



# The Florida Senate

## Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** Trout Lake Nature Center Education Expansion

2. **Senate Sponsor:** Dennis Baxley

3. **Date of Submission:** 10/30/2017

4. **Project/Program Description:**

Project includes building an additional facility to house a natural history museum, outdoor-accessible bathrooms, protected outdoor teaching area, classrooms, meeting room and additional office space.

5. **State Agency Contacted?** No

a. If yes, which state agency?

b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested?  
Department of State

6. **Amount of Non-recurring Requested for fiscal year 2018-19:**

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
200,000	2,040,000	2,240,000

7. **Type, amount and percent of matching funds available for this project for fiscal year 2018-19:**

Type	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	100,000	3.3%
Other	650,000	21.7%
TOTAL	750,000	25.0 %

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 2,990,000

9. **Previous Year Funding Details:**

a. Has funding been provided in a previous state budget for this activity? No

b. In the previous 5 fiscal years, how many years was funding provided? (Optional)

c. What is the most recent fiscal year the project was funded?

d. Were the funds provided in the most recent fiscal year subsequently vetoed?

e. Complete the following Worksheet.



# The Florida Senate

## Local Funding Initiative Request - Fiscal Year 2018-2019

<b>FY:</b>	<b>Input Prior FY Appropriation for this project for FY 2017-18</b> (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
<b>Column:</b>	<b>A</b>	<b>B</b>	<b>C</b>
<b>Funds Description:</b>	<b>Prior Year Recurring Funds *</b>	<b>Prior Year Nonrecurring Funds *</b>	<b>Total Funds Appropriated (Column A + Column B)</b>
<b>Input Amounts:</b>			

**10. Is future-year funding likely to be requested?**

No

**11. Program Performance:**

**a. What is the specific purpose or goal that will be achieved by the funds requested?**

One of the Trout Lake Nature Center's goals is providing quality environmental education, but due to the aging facilities and increased demands, TLNC needs to build additional facilities. The addition of classrooms and protected outdoor teaching areas and replacement of the Natural History Museum, currently housed in a 20+ year old double-wide trailer, is needed to continue to meet current demands and allow for the expansion of programs and an increase in audiences; provide multiple or concurrent programs, and develop multi-day larger events. The TLNC will serve as a destination for visitors to the region and increase the number of school programs and community activities.

**b. What are the activities and services that will be provided to meet the intended purpose of these funds?**

During the past year, TLNC provided programming to more than 8,800 students, 3,600 adults and families and interacted with over 28,000 individuals with 32% coming from outside Lake County. These activities will be continued and expanded to reach more people, allow for concurrent programs and events, longer or larger events such as the Wings and Wildflower Festival and serve as a day-long destination due to the renovation of the Natural History Museum and its exhibits.

**c. How will the funds be expended?**

Spending Category	Description	Amount
Administrative Costs		
<input checked="" type="checkbox"/> Executive Director/Project Head Salary and Benefits	Project Manager	50,000
<input type="checkbox"/> Other Salary and Benefits		



# The Florida Senate

## Local Funding Initiative Request - Fiscal Year 2018-2019

<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input checked="" type="checkbox"/> Consultants/Contracted Services/Study	Fundraising and Marketing	25,000
Operational Costs		
<input type="checkbox"/> Salary and Benefits		
<input checked="" type="checkbox"/> Expense/Equipment/Travel/Supplies/Other	Solar Equipment, Interpretive displays, furnishings and IT	340,000
<input checked="" type="checkbox"/> Consultants/Contracted Services/Study	Planning/Engineering/Architectural/Interpretive Design	125,000
Fixed Capital Construction/Major Renovation		
<input checked="" type="checkbox"/> Construction/Renovation/Land/Planning Engineering	Renovation and Site Work,	1,700,000
TOTAL		2,240,000

**d. What are the direct services to be provided to citizens by the appropriations project?**

Quality environmental education programs, recreational and health walks, increase outside classrooms and programs.

**e. Who is the target population served by this project? How many individuals are expected to be served?**

Residents and visitors to Central Florida area, projected short-term increases would be 50,000.

**f. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?**

Providing important environmental education to current residents and visitors. TLNC serves as a recreation area, and several environmental health programs have been offered providing exercise and stretching as parts of health walks

**g. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for in the contract?**

Cost penalties would be incurred for not meeting timelines and deliverables scheduled that are typical for construction projects.

**12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.**

None, TLNC is a non-profit organization and all board members abide by an approved conflict of interest policy.

**13. Requestor Contact Information:**

**a. Name:** Eileen Tramontana



# The Florida Senate

## Local Funding Initiative Request - Fiscal Year 2018-2019

- b. **Organization:** Trout Lake Nature Center, Inc.
- c. **Email:** TInc.director@gmail.com
- d. **Phone Number:** (352)357-7536

### 14. Recipient Contact Information:

- a. **Organization:** Trout Lake Nature Center, Inc
- b. **County:** Lake
- c. **Organization Type:**
  - For Profit
  - Non Profit 501(c) (3)
  - Non Profit 501(c) (4)
  - Local Entity
  - University or College
  - Other (Please specify)
- d. **Contact Name:** Eileen Tramontana
- e. **E-mail Address:** TInc.director@gmail.com
- f. **Phone Number:** (352)357-7536

### 15. If there is a registered lobbyist, fill out the lobbyist information below.

- a. **Name:** None
- b. **Firm:** None
- c. **Email:**
- d. **Phone Number:**