1. **Title of Project:** Santa Rosa County South End Health Department Drainage Project

2. **Senate Sponsor:** Doug Broxson

3. **Date of Submission:** 12/06/2017

4. **Project/Program Description:**
   The project entails the installation of stormwater piping and a stormwater pond to reduce the potential for the flooding of the structure and the parking lot.

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 Environmental Protection

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

<table>
<thead>
<tr>
<th>Type of Request</th>
<th>Amount Requested for Operations</th>
<th>Amount Requested for Fixed Capital Outlay</th>
<th>Total Amount of Requested State Funds</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>473,000</td>
<td>473,000</td>
<td>473,000</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Type</th>
<th>Amount</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>State (excluding the amount of this request)</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Local</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>0</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 473,000

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

<table>
<thead>
<tr>
<th>FY:</th>
<th>Input Prior FY Appropriation for this project for FY 2017-18</th>
<th>(If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Column:</td>
<td>A</td>
<td>B</td>
</tr>
<tr>
<td>Funds Description:</td>
<td>Prior Year Recurring Funds *</td>
<td>Prior Year Nonrecurring Funds *</td>
</tr>
</tbody>
</table>

Input Amounts:

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?
Construction of improvements for flood control at the County health Department facility.

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

c. How will the funds be expended?

<table>
<thead>
<tr>
<th>Spending Category</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administrative Costs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Executive Director/Project Head Salary and Benefits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Other Salary and Benefits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Expense/Equipment/Travel/Supplies/Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Consultants/Contracted Services/Study</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Operational Costs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Salary and Benefits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Expense/Equipment/Travel/Supplies/Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Consultants/Contracted Services/Study</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
d. What are the direct services to be provided to citizens by the appropriations project?

   The structure that provides medical care to south end citizens will have less of a chance of being flooded during substantial rain storms.

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

   This facility serves the vulnerable population who are primarily of low socioeconomic status. The facility serves well over 5,000 individuals annually.

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

   Benefits will be in reduced flooding of the structure and the parking lot. The building has flooded on several occasions causing a loss of the vital services at this location.

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?

   The agency may consider withholding of funds.

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.

   Santa Rosa County is both the owner and operator. Residents of the County will receive benefit from the project.

13. Requestor Contact Information:
   a. Name: Stephen Furman
   b. Organization: Santa Rosa County
   c. Email: StephenF@santarosa.fl.gov
   d. Phone Number: (850)981-7121

14. Recipient Contact Information:
   a. Organization: Santa Rosa County
   b. County: Santa Rosa
   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:** Stephen Furman
e. **E-mail Address:** StephenF@santarosa.fl.gov
f. **Phone Number:** (850)981-7121

15. If there is a registered lobbyist, fill out the lobbyist information below.
a. **Name:** Jon Johnson
b. **Firm:** Johnson & Blanton
c. **Email:** jon@teamjb.com
d. **Phone Number:** (850)224-1900

16. Have you applied for alternative state funding?

☐ Wastewater Revolving Loan
☐ Drinking Water Revolving Loan
☐ Small Community Wastewater Treatment Grant
☐ Other (Please describe)
☒ N/A

17. What is the population economic status?

☐ Financially Disadvantaged Community (ch. 62-552, F.A.C)
☐ Financially Disadvantaged Municipality (ch. 62-552, F.A.C)
☐ Rural Area of Economic Concern
☐ Rural Area of Opportunity (s. 288-0656, Florida Statutes)
☒ N/A

18. What is the status of construction?

Has not commenced.

19. What percentage of construction has been completed?

0%

20. What is the estimated completion date of construction?

2019