1. **Title of Project:** Monroe County Mobile Vessel Pumpout Service

2. **Senate Sponsor:** Anitere Flores

3. **Date of Submission:** 01/08/2018

4. **Project/Program Description:**
   
   This program provides pump-out service to anchored-out vessels at marinas that currently do not have pump-out facilities, to help ensure that liveaboards and other vessel occupants are properly disposing of waste rather than discharging waste into the water column. This service helps promote the protection of the fragile marine resources of the Florida Keys and is consistent with the objectives of the No Discharge Zone established by the Environmental Protection Agency.

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>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>500,000</td>
<td></td>
<td>500,000</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>172,350</td>
<td>23.6%</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>57,450</td>
<td>7.9%</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>229,800</td>
<td>31.5%</td>
</tr>
</tbody>
</table>

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 729,800

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.

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

Input Amounts:

10. Is future-year funding likely to be requested?
   Yes
   a. If yes, indicate non-recurring amount per year.
      Yes, <1M

11. Program Performance:
   a. What is the specific purpose or goal that will be achieved by the funds requested?
      Pump-out service will be made available to anchored-out vessels at marinas that currently do not have pump-out facilities.
   b. What are the activities and services that will be provided to meet the intended purpose of these funds?
      Pump-out service will be made available to anchored-out vessels at marinas that currently do not have pump-out facilities.
   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>
</tbody>
</table>
d. **What are the direct services to be provided to citizens by the appropriations project?**

   Pump-out service will be made available to anchored-out vessels at marinas that currently do not have pump-out facilities.

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

   Over 800 vessel liveaboards and other vessel occupants annually.

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

   Improves water quality in the Florida Keys National Marine Sanctuary and Florida Bay, cleaner nearshore waters are safer for swimmers and divers, healthier coral reef attract additional visitors, pumpout program decreases sewage discharges into the water.

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?**

   Funds will not be dispersed unless deliverables are met and vessels serviced.

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.

   N/A

13. **Requestor Contact Information:**

   a. Name: George Neugent
   b. Organization: Monroe County Board of County Commissioners
   c. Email: Neugent-george@monroecounty-fl.gov
   d. Phone Number: (305)292-4512
14. **Recipient Contact Information:**
   a. **Organization:** Monroe County Board of County Commissioners
   b. **County:** Monroe
   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:** George Neugent
   e. **E-mail Address:** Neugent-george@monroecounty-fl.gov
   f. **Phone Number:** (305)292-4512

15. **If there is a registered lobbyist, fill out the lobbyist information below.**
   a. **Name:** Clark Smith
   b. **Firm:** Southern Strategy Group
   c. **Email:** csmith@sostrategy.com
   d. **Phone Number:** (850)251-3218