



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2020-2021

LFIR # 2126

1. **Project Title** Autonomous Transit AV Technology - Workforce and Economic Development Program -

2. **Senate Sponsor** Jeff Brandes

3. **Date of Request** 12/04/2019

4. **Project/Program Description**

Autonomous Transit, a minority-owned business based in northeast Florida, will initiate an automated driverless advanced technology transportation shuttle program and economic development opportunity for northeast Florida. Autonomous Transit will work with a nonprofit facility at Jacksonville University. The funds will be invested in innovative transportation technology by bringing three autonomous vehicles (AV) shuttles to NE Florida and create the first working laboratory and research center of this technology anywhere in Florida. The autonomous electric minibus program will help create a working example of advanced driverless technology while also creating an advanced technology program opportunity for the state. To further promote and accelerate Florida's leadership in this technology, Autonomous Transit will share the data and research with universities in the area. This will help Florida become a leader in this technology, thus creating a new economic and workforce opportunity.

5. **State Agency to receive requested funds** Department of Economic Opportunity

State Agency contacted? ☒ Yes ☐ No

6. **Amount of the Nonrecurring Request for Fiscal Year 2020-2021**

Type of Funding	Amount
Operations	12,000
Fixed Capital Outlay	2,350,000
<b>Total State Funds Requested</b>	<b>2,362,000</b>

7. **Total Project Cost for Fiscal Year 2020-2021 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	2362000	100.0 %
<b>Matching Funds</b>		
Federal	00	0 %
State (excluding the amount of this request)	00	0 %
Local	00	0 %
Other	00	0 %
<b>Total Project Costs for Fiscal Year 2020-2021</b>	<b>2,362,000</b>	<b>100 %</b>

8. **Has this project previously received state funding?** ☐ Yes ☒ No

If yes, provide the most recent instance:

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. **Is future-year funding likely to be requested?** ☐ Yes ☒ No

If yes, indicate nonrecurring amount per year.



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#### 10. Details on how the requested state funds will be expended

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		
Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
<b>Operational Costs: Other</b>		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other	Maintenance costs	12,000
Consultants/Contracted Services/Study		
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Renovation of research and vehicle storage building, research scientist offices, campus safety and transportation signage for the vehicles, and the acquisition of three autonomous vehicles.	2,350,000
<b>Total State Funds Requested (must equal total from question #6)</b>		2,362,000



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#### 11. Program Performance

- a. What specific purpose or goal will be achieved by the funds requested?

The funds will be spent to invest in innovative transportation technology by bringing three AV shuttles to NE Florida and creating the first working laboratory and research center of this technology anywhere in Florida. To further promote and accelerate the state and NE Florida's leadership in this technology, Autonomous Transit will share the data and research with universities in the area. This will help the state become a leader in this technology, thus creating a new economic and workforce opportunity.

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

Autonomous Transit will work together to pay for and support all faculty and for the physical structure to host and house this new initiative. It will be housed on the campus of Jacksonville University.

- c. What direct services will be provided to citizens by the appropriation project?

The research will provide economic impact by direct, indirect, and induced means as well as provide a working testing ground for the most advanced transportation technology. Citizens will benefit from the sharing of data and research as it will help accelerate and promote the wider use of this technology statewide.

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

The general population of the area will benefit as this will create a technology hub that will draw attention from across the country.

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

This will help establish northeast Florida as a leader in artificial technology in regards to transportation and economic development. It will create an economic incubator and workforce development opportunity for the region.

- f. 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?

Refund of any monies that are appropriated.



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

Jacksonville University owns the buildings and Autonomous Transit will be using them to house the project, the vehicles, and any other space needs for the research. Jacksonville University will not own the autonomous vehicles. The renovation costs would be in lieu of rental or other types of use fees for the space – same with the routes and etc. on campus.

13. **Requestor Contact Information**

- a. First Name  Last Name
- b. Organization
- c. E-mail Address
- d. Phone Number  Ext.

14. **Recipient Contact Information**

- a. Organization
- b. Municipality and County
- c. Organization Type
- ☐ For-profit Entity
  - ☐ Non-Profit 501(c) (3)
  - ☐ Non-Profit 501(c) (4)
  - ☐ Local Entity
  - ☐ University or College
  - ☒ Other (please specify)
- d. First Name  Last Name
- e. E-mail Address
- f. Phone Number

15. **Lobbyist Contact Information**

- a. Name
- b. Firm Name
- c. E-mail Address
- d. Phone Number  Ext.