1. **Title of Project:** Madeira Beach - Beach Groin Replacement
2. **Senate Sponsor:** Jeff Brandes
3. **Date of Submission:** 02/18/2019
4. **Project/Program Description:**
   Replace beach groins to preserve the beach without the need for beach re-nourishment.
5. **State Agency to receive requested funds:** Department of Environmental Protection
   State Agency Contacted? No
6. **Amount of the Nonrecurring Request for Fiscal Year 2019-2020**

<table>
<thead>
<tr>
<th>Type of Funding</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operations</td>
<td></td>
</tr>
<tr>
<td>Fixed Capital Outlay</td>
<td>1,500,000</td>
</tr>
<tr>
<td>Total State Funds Requested</td>
<td>1,500,000</td>
</tr>
</tbody>
</table>

7. **Total Project Cost for Fiscal Year 2019-2020 (including matching funds available for this project)**

<table>
<thead>
<tr>
<th>Type of Funding</th>
<th>Amount</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total State Funds Requested (from question #6)</td>
<td>1,500,000</td>
<td>100.00%</td>
</tr>
<tr>
<td>Federal</td>
<td></td>
<td>0.00%</td>
</tr>
<tr>
<td>State (excluding the amount of this request)</td>
<td>0.00%</td>
<td>0.00%</td>
</tr>
<tr>
<td>Local</td>
<td></td>
<td>0.00%</td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td>0.00%</td>
</tr>
<tr>
<td>Total Project Costs for Fiscal Year 2019-2020</td>
<td>1,500,000</td>
<td>100.0%</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Fiscal Year (yyyy-yyyy)</th>
<th>Recurring</th>
<th>Amount</th>
<th>NonRecurring</th>
<th>Specific Appropriation #</th>
<th>Vetoed</th>
</tr>
</thead>
</table>

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

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

    | Spending Category Administrative Costs: | Description | Amount |
    |-----------------------------------------|--------------|--------|
    | Executive Director/Project Head Salary and Benefits | | |
    | Other Salary and Benefits | | |
    | Expense/Equipment/Travel/Supplies/Other | | |
    | Consultants/Contracted Services/Study | | |
The Florida Senate
Local Funding Initiative Request
Fiscal Year 2019-2020

Operational Costs:
<table>
<thead>
<tr>
<th></th>
<th>Salary and Benefits</th>
<th>Expense/Equipment/Travel/Supplies/Other</th>
<th>Consultants/Contracted Services/Study</th>
</tr>
</thead>
</table>

Fixed Capital Construction/Major Renovation:
| Construction/Renovation/Land/Planning Engineering | Remove and replace 22 existing groins | 1,500,000 |

Total State Funds Requested (must equal total from question #6) | 1,500,000 |

11. Program Performance:
   a. What is the specific purpose or goal that will be achieved by the funds requested?
      To preserve the beach without the need for beach re-nourishment.
   b. What are the activities and services that will be provided to meet the intended purpose of these funds?
      This is for Capital Improvement Project
   c. What are the direct services to be provided to citizens by the appropriations project?
      Prevention of sedimentation and erosion of sand from shores provides beach use for all citizens.
   d. Who is the target population served by this project? How many individuals are expected to be served?
      Target population includes residents and tourists that visit Maderia Beach and the surrounding area.
   e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?
      The expected outcome is reduction of sand outflow, which will enhance and improve our beach environment.
      This will be measured by the reduced need for re-nourishment.
   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?
      Return of appropriated 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.
    N/A

13. Requestor Contact Information:
   a. Name: Jonathan Evans
   b. Organization: City of Madeira Beach
   c. E-mail Address: jevans@madeirabeachfl.gov
   d. Phone Number: (727)391-9951 Ext. 228

14. Recipient Contact Information:
a. **Organization**: City of Madeira Beach
b. **County**: Pinellas
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**: Jonathan Evans
e. **E-mail Address**: jevans@madeirabeachfl.gov
f. **Phone Number**: (727)391-9951 Ext. 228

15. **Lobbyist Contact Information**
   a. **Name**: Alan Suskey
   b. **Firm Name**: Suskey Consulting LLC
c. **E-mail Address**: as@suskeyconsulting.com
d. **Phone Number**: (850)510-8314