1. **Title of Project:** Hurricane Michael - Bay County - Debris Removal

2. **Senate Sponsor:** George Gainer

3. **Date of Submission:** 03/05/2019

4. **Project/Program Description:**
   This project is to provide assistance to Bay County with the cost of debris removal in the wake of Hurricane Michael. Debris removal costs for Bay County currently total in excess of $228 million. While FEMA is going to pay 100 percent of the costs incurred in the first 45 days after the storm, the county will be responsible for at least 12.5 percent of all costs incurred after 45 days. While the exact numbers are not yet known, the vast majority of the debris removal costs were and continue to be incurred outside the 45 day window. Bay County’s ultimate responsibility depends in part on FEMA reimbursements.

5. **State Agency to receive requested funds:** Executive Office of the Governor
   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>28,500,000</td>
</tr>
<tr>
<td>Fixed Capital Outlay</td>
<td></td>
</tr>
<tr>
<td><strong>Total State Funds Requested</strong></td>
<td><strong>28,500,000</strong></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>28,500,000</td>
<td>100.00%</td>
</tr>
<tr>
<td>Federal</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>State (excluding the amount of this request)</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Local</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td><strong>Total Project Costs for Fiscal Year 2019-2020</strong></td>
<td><strong>100.0%</strong></td>
<td></td>
</tr>
</tbody>
</table>

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

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

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

    | Spending Category        | Description | Amount |
    |--------------------------|-------------|--------|
    | Administrative Costs:    |             |        |
The Florida Senate
Local Funding Initiative Request
Fiscal Year 2019-2020

Executive Director/Project Head Salary and Benefits
Other Salary and Benefits
Expense/Equipment/Travel/Supplies/Other
Consultants/Contracted Services/Study

**Operational Costs:**
- Salary and Benefits
- Expense/Equipment/Travel/Supplies/Other
- Consultants/Contracted Services/Study

**Debris removal and monitoring costs**
28,500,000

**Fixed Capital Construction/Major Renovation:**
- Construction/Renovation/Land/Planning Engineering

**Total State Funds Requested (must equal total from question #6)**
28,500,000

11. Program Performance:

a. **What is the specific purpose or goal that will be achieved by the funds requested?**
   The purpose of the requested funds is to help offset the cost of debris removal in the wake of Hurricane Michael.

b. **What are the activities and services that will be provided to meet the intended purpose of these funds?**
   The services provided will be the removal of debris from Bay County to protect life and property from future damage or injury.

c. **What are the direct services to be provided to citizens by the appropriations project?**
   Removal of debris from the county will allow for safer transportation, eliminate vermin, and create an environment where the recovery of the county and its citizens can move forward.

d. **Who is the target population served by this project? How many individuals are expected to be served?**
   Bay County has a population of approximately 185,000 individuals.

e. **What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?**
   The expected benefit is that Bay County can eliminate the debris from Hurricane Michael and move forward with its recovery.

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?**
   The money should be used for the project intended. If not, the suggested penalty is repayment of the 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: Bob Majka
   b. Organization: Bay County
   c. E-mail Address: bmajka@baycountyfl.gov
   d. Phone Number: (850)248-8140

14. Recipient Contact Information:
   a. Organization: Bay County Board of County Commissioners
   b. County: Bay
   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: Bob Majka
   e. E-mail Address: bmajka@baycountyfl.gov
   f. Phone Number: (850)248-8140

15. Lobbyist Contact Information
   a. Name: None
   b. Firm Name: None
   c. E-mail Address:
   d. Phone Number: