

LFIR # 2467

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Project Title	Zoo Miami - Expansion/	Renova	tion of Animal H	ospita	<b>l</b>				
Senate Sponsor	Anitere Flores								
Date of Request	04/00/0000								
Date of Request	01/23/2020								
Project/Program	-								
rehabilitation of numer	of the hospital and rehab facilit ous endangered species in So as a hurricane. It would provid	uth Florida	a; and as a critical fa	cility fo	r endangere	ed nativ	ve wildlife	e in the	event c
	receive requested funds	1 1311	and Wildlife Cor	nserva	ation Com	ımissi	ion		
State Agency conf			V 2020 2024						
Type of Funding	onrecurring Request fo	rriscai	Amount	I					
	9								
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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
Administrative Costs:		
Executive Director/Project		
Head Salary and Benefits		
Other Salary and Benefits		
Expense/Equipment/ Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Operational Costs: Oth	er	
Salary and Benefits		
Expense/Equipment/ Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Fixed Capital Construc	tion/Major Renovation:	
Construction/Renovation/ Land/Planning	Expansion/renovation of the hospital and rehab facilities at Zoo Miami	1,000,000
Engineering		
Total State Funds Re	quested (must equal total from question #6)	1,000,000



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1.	Program Performance
a.	What specific purpose or goal will be achieved by the funds requested?
	Expansion/renovation of the hospital and rehab facilities at Zoo Miami will enable it to serve the need for treatment, recovery, and rehabilitation of numerous endangered species in South Florida; and as a critical facility for endangered native wildlife in the event of a natural disaster, such as a hurricane. It would provide a central location for receiving injured, orphaned, or displaced animals.
b.	What activities and services will be provided to meet the intended purpose of these funds?
	Veterinary treatment, to include surgery as required, followed by recovery and rehabilitation care for injured and sick animals; as well as coordination with local and state wildlife agencies to release rehabilitated native wildlife whenever possible.
c.	What direct services will be provided to citizens by the appropriation project?
	Zoo Miami will be able to serve as a health care resource in the South Florida region for endangered native wildlife, so critical to the conservation and preservation of the environment.
d.	Who is the target population served by this project? How many individuals are expected to be served?
	General public in South Florida region - residents and visitors
e.	What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?
	Treatment, recovery and rehabilitation of numerous endangered species in South Florida. The methodology for measuring outcomes will include hospital intake records and recorded contacts with FWC, USFWS and other organizations.
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?
	Reduced collaborations involving wildlife intake, treatment, rehab, etc.



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200 Miami is owned	by Miami-Dade County.		
Requestor Contac	ct Information		
a. First Name	Maria	Last Name Narid	
o. Organization	Miami-Dade Parks, Recreation	& Open Spaces Department	
c. E-mail Address	Maria.Nardi@miamidade.gov		
d. Phone Number	(305)755-7903	Ext.	
Recipient Contac	t Information		
a. Organization	Zoo Miami Foundation		
o. Municipality and	d County Miami-Dade		
c. Organization Ty	/ре		
For-profit I	Entity		
O Non-Profit	501(c) (3)		
O Non-Profit	501(c) (4)		
O Local Entit	ty		
<ul><li>University</li></ul>	or College		
<ul><li>Other (ple</li></ul>	ase specify) Non Profit 501(c) (3		
d. First Name	William "Bill"	Last Name Moore	
e. E-mail Address	bmoore@zoomiami.org		
f. Phone Number			
Lobbyist Contact	Information		
a. Name	None		
b. Firm Name	None		
c. E-mail Address			