

LFIR # 1575

1.	Project Title	ZooTampa Panther Medical and Habitat Facilities								
2.	Senate Sponsor	Darryl Rouson								
3.	Date of Request	02/11/2021								
4.	Project/Program De	escription								
	Panthers that have In These funds will ass	been deemed non-re sist in expanding the	eleasable by th single habitat	ne FV into a	VC and b a comple	by treating ar ete habitat fo	nd rehabilitating sic or each of the three	ida by caring for Florida k or injured panthers. non-releasable treatment at the Zoo.		
5.	State Agency to red	tate Agency to receive requested funds Fish and				Wildlife Conservation Commission				
	State Agency conta	acted? Yes								
6.	Amount of the Non	recurring Request	for Fiscal Yea	ır 202	21-2022					
	Type of Funding					Amo	ount	1		
	Operations									
	Fixed Capital Outlay	1					200,000)		
	Total State Funds I	Requested					200,000			
7. Total Project Cost for Fiscal Year 2021-2022 (including matching funds available for this project)										
	Type of Funding				Amo	unt	Percentage			
	Total State Funds Requested (from question #6)					200,000	9%	<u>) </u>		
	Matching Funds			ı				1		
	Federal	Federal State (excluding the amount of this request) Local Other Total Project Costs for Fiscal Year 2021-2022				0	0%	7		
	,					0	0%	7		
						2,100,000	91%	1		
						2, 300,000	0% 1 00%			
	Total Project Costs	s ioi i iscai i eai 20	21-2022			2,300,000	100 /0	4		
8.	Has this project pro	eviously received s	state funding?	<u> </u>	Yes					
	Fiscal Year	Amount			Sp	ecific	Vetoed			
	(уууу-уу)	Recurring	Nonrecurrir		Appro	priation #				
	2020-21	0	500	,000		1905C	Yes	_		
9.	Is future funding lil	kely to be requeste	d?		Yes					
a. If yes, indicate nonrecurring amount per year.										
b. Describe the source of funding that can be used in lieu of state funding.										
All other funds used for the exhibit expansion will come from local funds.										
10). Has the entity req	uesting this projec	t received an	v fad	eral acc	istance rela	ated to the COVID	-19 nandemic?		
10	Yes	acoming this projec	c received all	y 1 C U	ciai ass			- 10 panacinio:		
	If yes, indicate the amount of funds received and what the funds were used for.									
	If yes, indicate the	amount of funds r	eceived and v	what	tne fund	ds were use	ed for.			



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PPP loan for S	\$2.1	Million
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11. Details on how the requested state funds will be expended

Spending Category	Description	Amount			
Administrative Costs:					
Executive Director/Project Head Salary and Benefits		0			
Other Salary and Benefits		0			
Expense/Equipment/Travel/Supplies/Other		0			
Consultants/Contracted Services/Study		0			
Operational Costs: Other					
Salary and Benefits		0			
Expense/Equipment/Travel/Supplies/Other		0			
Consultants/Contracted Services/Study		0			
Fixed Capital Construction/Majo	r Renovation:				
Construction/Renovation/Land/ Planning Engineering	Continue to renovate and expand existing single habitat to house three non-releaseable panthers and provide for medical rehabilitation facilities for sick or injured panthers.	200,000			
Total State Funds Requested (must equal total from question #6) 200,0					

12. Program Performance

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

This funding will allow ZooTampa to provide a critical service to the State of Florida by housing and rehabilitating sick or injured Florida panthers, which are an endangered species.

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

The existing habitat will be expanded to house three non-releaseable Florida panthers and will provided needed space for panthers receiving medical care and rehabilitation services.

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

More than 1 Millions visitors to ZooTampa will have the ability to see and learn about Florida Panthers and their habitat, and more than 150,000 who participate in programs at the Zoo will have enhanced educational opportunities.

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

K-12 students, college students, developmentally disabled, physically disabled, at-risk youth, and economically disadvantaged. The Zoo currently serves approximately 200,000 individuals in these categories and expects the number to increase to at least 250,000 by 2022.

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

Expanded habitat and rehabilitation area at ZooTampa for Florida panthers unable to be released and for injured or sick panthers that are receiving medical care. Ability for 1 million visitors to learn about Florida panthers.

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 the contract?

return of state funds for failure to meet deliverables or performance measures



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13. 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.

The City of Tampa owns the land and buildings of ZooTampa at Lowry Park. Lowry Park Zoological Society, ZooTampa's 501(c)3, has a 50-year lease to operate the Zoo.



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14.	14. Requestor Contact Information							
	a. First Name	Joe		Last Name	Couceiro			
	b. Organization	ZooTampa at Lowry Park						
	c. E-mail Address	joe.couceiro@zootampa.org						
	d. Phone Number	(813)933-8038 Ext.						
15.	Recipient Contact	Informatio	on					
	a. Organization	ZooTampa at Lowry Park						
	b. Municipality and County Hillsborough							
	c. Organization Type							
	□For Profit Entity							
	☑Non Profit 501(c	Non Profit 501(c)(3)						
	□Non Profit 501(c	01(c)(4)						
	□Local Entity							
	□University or Co	□University or College						
	□Other (please specify)							
	d. First Name	Joe		Last Name	Couceiro			
	e. E-mail Address	joe.couceiro@zootampa.org						
	f. Phone Number	(813)933-8038						
16.	16. Lobbyist Contact Information							
	a. Name	Kimberly Case						
	b. Firm Name	Holland & Knight						
	c. E-mail Address	kimberly.case@hklaw.com						
	d. Phone Number	(850)425-5603						