

LFIR # 2024

1. Project Title West Coast Inland Navigation District Operations Center - Sarasota

2. Senate Sponsor Joe Gruters

3. Date of Request 02/16/2021

4. Project/Program Description

Since its inception in 1947, WCIND has never owned a facility to meet its operational needs. The district has operated out of rented space (including hotel rooms) or has purchased existing buildings designed for other purposes. Due to its age and spatial limitations, the current office facility is no longer adequate to meet the operational needs of the district. The current building used by WCIND was constructed in 1965 as a print shop. Any district board meeting, regional training, and state required public meetings must be held in rented or borrowed space subject to availability. Elements of the new facility include: office space for current employees and future growth, meeting space for trainings and regional meetings, public meeting space for district board meetings, and regional training meetings. The building will be designed and outfitted with state-of-the-art technology to facilitate enhanced communications with the district's member counties and regional partners.

5. State Agency to receive requested funds De

Department of Economic Opportunity

State Agency contacted? No

6. Amount of the Nonrecurring Request for Fiscal Year 2021-2022

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	2,000,000
Total State Funds Requested	2,000,000

7. Total Project Cost for Fiscal Year 2021-2022 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	2,000,000	34%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	3,853,060	66%
Other	0	0%
Total Project Costs for Fiscal Year 2021-2022	5,853,060	100%

8. Has this project previously received state funding?

Fiscal Year	Amount		Specific	Vetoed
(уууу-уу)	Recurring	Nonrecurring	Appropriation #	

9. Is future funding likely to be requested?

No

a. If yes, indicate nonrecurring amount per year.

unt per year.

b. Describe the source of funding that can be used in lieu of state funding.

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?



No

If yes, indicate the amount of funds received and what the funds were used for.

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	Funds will be used to construct all facets of an operations center for WCIND. Elements of the new facility include: parking lot and entrance road, office space for current employees and future growth, meeting space for trainings and regional meetings, public meeting space for district board meetings and regional training meetings. The building will be designed and outfitted with state-of-the-art technology to facilitate enhanced communications with the district's member counties and partners.	2,000,000
Total State Funds Requested (m	ust equal total from question #6)	2,000,000

12. Program Performance

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

Construction of a new operations facility to allow the district to continue providing superior customer service to the citizens of the district. Securing state funding will allow the district and its member counties to continue to maximize funding from the annual budget for waterway projects.

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

The district and its member counties have expended or committed funds for purchase of the land, feasibility study, architecture, and permitting and design. This represents over 65% of the total project cost.

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

Access given to the public for regular meetings, public hearings, and other functions open to the public.

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

Citizens of the district living in Lee, Charlotte, Sarasota, and Manatee Counties. Approximately 1.8 million persons.

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



The requested funds represent just under 40% of the district's annual budget. Securing state funding will allow the district and its member counties to continue to maximize funding from the annual budget for waterway projects to fulfill its mission.

State funds will be recognized and the projects completed as a result of the availability of the funding will be recorded and detailed in the strategic plan update.

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?

The funding will be returned to the State of Florida.

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.

Owner of facility will be the West Coast Inland Navigation District.



LFIR # 2024

14. Requestor Contact Information

d. Phone Number

a. First Name	Justin		Last Name	McBride
b. Organization	West Coast Inland Navigation District			
c. E-mail Address	justin@wcind.net			
d. Phone Number	(941)485-9402 Ext.			
15. Recipient Contact	Informatio	on		
a. Organization	West Coast Inland Navigation District			
b. Municipality and	I County	Sarasota		
c. Organization Type				
□For Profit Entity				
□Non Profit 501(c)(3)				
□Non Profit 501(c	□Non Profit 501(c)(4)			
□Local Entity	□Local Entity			
□University or Co	□University or College			
☑Other (please specify) Multi County Independent Special Taxing District				
d. First Name	Justin		Last Name	McBride
e. E-mail Address	justin@w	cind.net		
f. Phone Number	(941)485	-9402		
16. Lobbyist Contact Information				
a. Name	None			
b. Firm Name	None			
c. E-mail Address				