

LFIR # 2238

1. Project Title	West Coast Inlan	d Navigation Dist	rict - Sarasota County				
2. Senate Sponsor	Joe Gruters						
3. Date of Request	01/03/2022						
4. Project/Program De	escription						
of rented space (inclespatial limitations, the building used by WC required public meet include: office space public meeting space	uding hotel rooms) e current office facil IND was constructe ings must be held in for current employe e for District Board r	or has purchased ity is no longer act in 1965 as a properties and future grownestings and regimeetings and regimeetings and regimeetings and regimeetings.	existing buildings desi	gned for other purpo erational needs of the loard meeting, regio vailability. Elements r trainings and regions. The building will the	of the new facility onal meetings, and be designed and		
5. State Agency to red	eive requested fur	nds Departr	ment of Economic Opp	ortunity			
State Agency conta 6. Amount of the Nonr		for Fiscal Year 2	022-2023				
Type of Funding			Amo	unt			
Operations				0			
Fixed Capital Outlay			2,000,000				
Total State Funds F	Requested			2,000,000			
7. Total Project Cost fo	or Fiscal Year 2022	2-2023 (including	g matching funds ava	ilable for this proje	ect)		
Type of Funding			Amount	Percentage			
Total State Funds Re	equested (from que	stion #6)	2,000,000	32%			
Matching Funds							
Federal			0	0%			
State (excluding the	amount of this requ	est)	0	0%			
Local			4,228,666	68%			
Other			0	0%			
Total Project Costs	for Fiscal Year 20	22-2023	6,228,666	100%			
8. Has this project pre	eviously received s	state funding?	No				
Fiscal Year	Δmo	unt	Specific	Vetoed			
(yyyy-yy)	Aiiio						
(333333)	Recurring	Nonrecurring	Appropriation #				
9. Is future funding lik	Recurring		No				
	Recurring cely to be requeste	d?					
9. Is future funding lik	Recurring sely to be requeste onrecurring amount	d? nt per year.	No				
9. Is future funding lik	Recurring sely to be requeste onrecurring amount	d? nt per year.					



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1	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.	
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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	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 trainings meetings. The building will be designed and outfitted with state-of-the-art technology to facilitate enhanced communications.	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 provide 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. Additionally, District staff will manage the construction of the facility.

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 people. Also, those who utilize District waterways in those counties.

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



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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?

Forfeit of all funds if building is not completed and any excess funds.

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.



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14.	Requestor Contact	Informat	ion					
	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.	15. Recipient Contact Information							
	a. Organization	West Coast Inland Navigation District						
	b. Municipality and County Sarasota							
	c. Organization Type							
	□For Profit Entity							
	□Non Profit 501(c	c)(3)						
	□Non Profit 501(c	c)(4)						
	□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@wcind.net						
	f. Phone Number							
16.	16. Lobbyist Contact Information							
	a. Name	Douglas Arlington Holder Jr						
	b. Firm Name	The Legis Group						
	c. E-mail Address							
	d. Phone Number	(941)735-4755						