

LFIR # 3339

1. Project Title Homosassa River Restoration Project

2. Senate Sponsor Blaise Ingoglia

**3. Date of Request** 01/10/2024

#### 4. Project/Program Description

Homosassa River is a first magnitude spring and designated an Outstanding Florida Waterway which has been identified as a priority waterbody by SWIM. It has been listed as impaired for nutrients and filamentous algae by FDEP and USEPA. The goal is to restore water quality by vacuum removal of filamentous algae (Lyngbya) and benthic detrital matter, then planting and maintaining submerged aquatic vegetation (SAV).

5. State Agency to receive requested funds

Department of Environmental Protection

| State | Agency | contacted? | No |
|-------|--------|------------|----|
|-------|--------|------------|----|

#### 6. Amount of the Nonrecurring Request for Fiscal Year 2024-2025

| Type of Funding             | Amount    |  |
|-----------------------------|-----------|--|
| Operations                  | 4,000,000 |  |
| Fixed Capital Outlay        | 0         |  |
| Total State Funds Requested | 4,000,000 |  |

#### 7. Total Project Cost for Fiscal Year 2024-2025 (including matching funds available for this project)

| Type of Funding                                | Amount    | Percentage |
|--|-----------|------------|
| Total State Funds Requested (from question #6) | 4,000,000 | 100%       |
| Matching Funds                                 |           |            |
| Federal  | 0         | 0%         |
| State (excluding the amount of this request)   | 0         | 0%         |
| Local  | 0         | 0%         |
| Other  | 0         | 0%         |
| Total Project Costs for Fiscal Year 2024-2025  | 4,000,000 | 100%       |

8. Has this project previously received state funding? Yes

| Fiscal Year | Amount    |              | Specific        | Vetoed |  |
|-------------|-----------|--------------|-----------------|--------|--|
| (уууу-уу)   | Recurring | Nonrecurring | Appropriation # |        |  |
| 2023-24     | 0         | 4,000,000    |                 | No     |  |

9. Is future funding likely to be requested?

| Yes |
|-----|
|-----|

4,000,000

a. If yes, indicate nonrecurring amount per year.

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

None at this time

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

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



### **Complete questions 11 and 12 for Fixed Capital Outlay Projects**

#### **11. Status of Construction**

a. What is the current phase of the project?

| 🔘 Planning  | 🔵 Design       | <ul> <li>Construction</li> </ul> | 🔘 N/A   |     |  |
|---|----------------|----------------------------------|---------|-----|--|
| b. Is the project   | "shovel ready" | (i.e permitted)?                 |         | Yes |  |
| c. What is the estimated start date of construction?      |                |                                  | ongoing |     |  |
| d. What is the estimated completion date of construction? |                |                                  | 2028    |     |  |

12. List 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.

NA

#### 13. 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/<br>Other           |   | 0         |
| Consultants/Contracted<br>Services/Study              | Project Administration/Accounting/ Public Information services will be<br>secured by our organization, HRRP. Project Administration includes<br>oversight of the project as it relates to the DEP contract requirements<br>and accounting practices. Public Information included, but is not<br>limited, to supplying and directing information about the project to the<br>media, local government officials, other state agencies                               | 100,000   |
| Operational Costs: Other                              |   |           |
| Salary and Benefits                                   |   | 0         |
| Expense/Equipment/Travel/Supplies/<br>Other           |   | 0         |
| Consultants/Contracted<br>Services/Study              | HRRP will continue to utilize the same contractor providing vacuum<br>removal services, planting SAV,cages, monitoring, and maintenance.<br>This also includes any land lease costs, mobilization and<br>demobilization performed by the same contractor. Additionally, we will<br>continue to utilize an<br>independent biologist to perform an evaluation of the whether or not<br>the vacuum removal services meet standards for plant install and<br>survival | 3,900,000 |
| Fixed Capital Construction/Majo                       | or Renovation:  |           |
| Construction/Renovation/Land/<br>Planning Engineering |   | 0         |
| Total State Funds Requested (m                        | ust equal total from question #6)   | 4,000,000 |

#### 14. Program Performance



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

These funds will restore a critical habitat that is designated as an Outstanding Florida Waterway. This project will also help local governments and agencies to meet a variety water quality improvement mandates (SWIM plans, BMAP plans, Comp plans, etc.) through the reduction of phosphorus and nitrogen

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

The vacuum removal services, planting SAV, cages, monitoring, and maintenance will be provided by the same contractor that started our project. This also includes any land lease costs, mobilization and demobilization performed by the same contractor. Additional services are provided by an independent biologist to confirm standards met by contractor as well as perform project evaluation study to compare pre versus post restoration.

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

The tourism industry is one of the largest economic drivers in the region. The loss of Water Quality (clarity) associated with current conditions and degrading habitat conditions could potentially cause a collapse of this economy. Improvements proposed by this project will help to improve and maintain condition's for which residents, local, regional, national, international tourists come to expect

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

The citizens and the economy of the State of Florida, Citrus County, and Homosassa as well as the 350,000 local, national and international visitors per year that visit the area.

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

#### be measured?

The expected outcome is overall improvement in the water quality leading to thriving aquatic flora and fauna communities, including the West Indian manatee. The methodology being utilized by the independent biologist to measure successful outcome in the post restoration versus pre restoration areas are through core sampling (pre and post de-mucking), macroinvertebrate sampling, fish sampling, SAV surveys and field water chemistry

# 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?

loss of funding

#### **15. Requester Contact Information**

| a. First Name     | Steve                   | Last Name     | Minguy |
|-------------------|-------------------------|---------------|--------|
| b. Organization   | Homosassa River Restora | ation Project |        |
| c. E-mail Address | sminguy@aol.com         |               |        |
| d. Phone Number   | (407)832-1598           | Ext.          |        |
|                   |                         |               |        |

#### **16. Recipient Contact Information**

| a. Organization | Homosassa River Restoration Project |  |
|-----------------|-------------------------------------|--|
|                 |                                     |  |

b. Municipality and County Citrus

#### c. Organization Type

□For Profit Entity

☑Non Profit 501(c)(3)



LFIR # 3339

| □Non Profit 501(c      | :)(4)                    |           |        |  |
|------------------------|--------------------------|-----------|--------|--|
| Local Entity           |                          |           |        |  |
| □University or Co      | llege                    |           |        |  |
| □Other (please sp      | pecify)                  |           |        |  |
| d. First Name          | Steve                    | Last Name | Minguy |  |
| e. E-mail Address      | sminguy@aol.com          |           |        |  |
| f. Phone Number        | (407)832-1598            |           |        |  |
| 17. Lobbyist Contact I | nformation               |           |        |  |
| a. Name                | Wallace Gene McGee Jr.   |           |        |  |
| b. Firm Name           | Sunrise Consulting Group |           |        |  |
| c. E-mail Address      | gene@scgroup.us          |           |        |  |

**d. Phone Number** (850)661-7110

### Please complete the questions below for Water Projects only.

#### 18. Have you applied for alternative state funding?

- □ Waste Water Revolving Loan
- Drinking Water Revolving Loan
- □ Small Community Wastewater Treatment Grant
- ☑ Other (please specify) Springs Funding
- $\Box$  N/A

#### **19. What is the population economic status?**

- □ Financially Disadvantaged Community (ch. 62-552, F.A.C)
- □ Financially Disadvantaged Municipality (ch. 62-552, F.A.C)
- Rural Area of Economic Concern
- □ Rural Area of Opportunity (s. 288.0656, Florida Statutes)

☑ N/A

#### 20. What is the status of construction?

ongoing phase 2

#### 21. What percentage of the construction has been completed?



LFIR # 3339

37%

#### 22. What is the estimated completion date of construction?

12/31/2028