



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2026-2027

LFIR # 1842

1. Project Title Pelican Harbor Wildlife Rescue, Rehabilitation, and Release Outdoor Habitats

2. Senate Sponsor Ana Maria Rodriguez

3. Date of Request 12/9/2025

#### 4. Project/Program Description

Our state-of-the-art native wildlife hospital enables Pelican Harbor to deliver the highest quality of patient care and serve as a hub for conservation awareness and education. Through the creation of outdoor habitats, including pens, pools, and educational signage, we are expanding our care for sick, injured, and orphaned native wildlife and enhancing our environmental education programs to engage more children, families, and community groups about Florida's native wildlife and ecosystems.

5. State Agency to receive requested funds Fish and Wildlife Conservation Commission

State Agency contacted? No

#### 6. Amount of the Nonrecurring Request for Fiscal Year 2026-2027

Type of Funding	Amount
Operating	0
Fixed Capital Outlay	850,000
<b>Total State Funds Requested</b>	<b>850,000</b>

#### 7. Total Project Cost for Fiscal Year 2026-2027 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	850,000	100%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2026-2027</b>	<b>850,000</b>	<b>100%</b>

8. Has this project previously received state funding? No

If yes, provide the most recent instance:

Fiscal Year (YYYY-YY)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. Is future-year funding likely to be requested? No

a. If yes, indicate nonrecurring amount per year.

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



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## Complete questions 10 and 11 for Fixed Capital Outlay Projects

### 10. Status of Construction

a. What is the current phase of the project?

☒ Planning ☐ Design ☐ Construction ☐ N/A

b. Is the project "shovel ready" (i.e permitted)?

No

c. What is the estimated start date of construction?

07/01/2026

d. What is the estimated completion date of construction?

07/02/2027

e. What funding stream will be used for ongoing operations and maintenance of the project?

Philanthropy and private donations.

### 11. 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.

Pelican Harbor is a 501(c)(3). It is governed by a Board of Directors and has bylaws that prohibit any Board member from benefiting from the resources of the organization. Their requested funds for Fixed Capital Outlay would not be used for any Administrative nor Operational needs, including staff compensation.

### 12. Details on how the requested state funds will be expended

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	The Capital Outlay Funds being requested are solely related to the outdoor pens, pools, and educational signage as part of Pelican Harbor's new wildlife hospital and education center's 2.6-acre campus.	850,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>850,000</b>

### 13. Program Performance

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



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Our new native wildlife hospital enables Pelican Harbor to deliver the highest quality of patient care and serve as a hub for conservation awareness and education. Through the creation of outdoor habitats on a 2.6-acre campus, including pens, pools, and educational signage, we are expanding care for sick, injured, and orphaned native wildlife and enhancing our environmental education programs to engage more children, families, and community groups about Florida's native wildlife and ecosystems.

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

These funds will be used to complete the construction of new outdoor wildlife habitats including pens, pools, and educational signage at Pelican Harbor's new wildlife hospital and education center.

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

This request is for Capital Outlay funds only . No direct services will be provided to citizens by the appropriation project.

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

The funds requested for the project are for Capital Outlay, not populations to be served. Once this project is completed, we will be able to meet the increased need for treating sick, injured, and orphaned native wildlife with the goal of releasing healthy animals back into the ecosystem. We also plan to expand program opportunities and the number of stakeholders by 10 to 20 percent in the first year, to engage more children, families, and community groups in conservation education.

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

The new facility will be South Florida's premier native wildlife hospital and education center; a hub for community activity offering high-level animal care as well as educational programming to raise awareness of the threats facing wildlife and the environment, and solutions for preserving and protecting these resources. Pelican Harbor utilizes WRMD software to measure and track all data related to each patient, including species, type of injury, location found, treatment plan, and release information. This data is used to inform the environmental education program and shared with other wildlife centers.

**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?**

In addition to standard penalties, the contracting agency may consider the following additional penalties for failing to meet deliverables or performative measures:

1. Corrective Action Plan (CAP) Requirement
2. Increased Monitoring and Reporting Requirements
3. Performance-Based Payment Adjustments
4. Termination for Default

**14. Is this project related to mitigation, response, or recovery from a natural disaster?**

**a. If Yes, what phase best describes the project?**

- ☐ Mitigation (reducing or eliminating potential loss of life or property)
- ☐ Response (addressing the immediate and short-term effects of a natural disaster)
- ☐ Recovery (assisting communities return to normal operations, including rebuilding damaged infrastructure)

**b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):**

**15. Has the entity applied for or received federal assistance for this project?**

☐ Yes, Applied



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- ☐ Yes, Received
- ☐ No
- ☐ No, but intends to apply

a. If yes, provide the FEMA project worksheet ID#:

b. Provide the total project cost listed on the FEMA project worksheet:

16. Has the entity applied for or received state assistance for this project (other than this request)?

- ☐ Yes, Applied
- ☐ Yes, Received
- ☐ No
- ☐ No, but intends to apply

a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):

#### 17. Requester Contact Information

- a. First Name  Last Name
- b. Organization
- c. E-mail Address
- d. Phone Number  Ext.

#### 18. Recipient Contact Information

- a. Organization
- b. Municipality and County
- c. Organization Type
- ☐ For Profit Entity
- ☒ Non Profit 501(c)(3)
- ☐ Non Profit 501(c)(4)
- ☐ Local Entity
- ☐ University or College



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☐ Other (please specify)

d. First Name  Last Name

e. E-mail Address

f. Phone Number  Ext.

#### 19. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number

*The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.*