



FY 2021-2022 Springs Restoration Funding Application Form

1. General Information

Project Name or Title:	
Project Location (City/Town):	County:
Required: include a project location map (in PDF or JPEG)	
Geographic Coordinates¹ (if available):	

Name(s) of Applicant:	
Project Manager/Authorized Agent for Applicant:	
Name, Title:	
Entity:	
Mailing Address:	
Address (continued):	
City, State:	ZIP:
Phone:	Phone 2:
Email address:	
Primary Contact for this Project Application (if different):	
Name, Title:	
Entity:	
Mailing Address:	
Address (continued):	
City, State:	ZIP:
Phone:	Phone 2:
Email address:	

2. Project Type (check all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Agricultural Best Management Practices (BMPs) | <input type="checkbox"/> Hydrologic Restoration |
| <input type="checkbox"/> Water Conservation | <input type="checkbox"/> Land Acquisition |
| <input type="checkbox"/> Wastewater Collection and Treatment | <input type="checkbox"/> Reuse |
| <input type="checkbox"/> Stormwater | <input type="checkbox"/> Other Water Quality/Quantity |

If more than one project type and/or "Other" provide brief description here:

¹ Latitude and longitude in decimal degrees (two-decimal point format, e.g., 30.112233; -86.112233).

3. Spring Information

Name of spring(s) that will receive the primary benefit from the proposed project.

Identify the spring magnitude. Also note if the spring is an [Outstanding Florida Spring \(OFS\)](#) and if so whether the proposed project is in a springs Priority Focus Area (PFA).

Does the spring have an identified [impairment](#) (Yes or No)?

If impaired, [identify](#) water quality parameters (nitrogen, bacteria, nutrients, sediment, etc.) and, where applicable, name the Waters Not Attaining Standards (WNASS) and adopted [Total Maximum Daily Loads](#) (TMDLs).

If impaired, is the proposed project in a [Basin Management Action Plan \(BMAP\)](#), (or BMAP Annual Update), and/or [Reasonable Assurance Plan \(RAP\)](#) area? Name all that apply.

Minimum flows and minimum levels (MFL) information, i.e., proximity of proposed project to spring(s) and their groundwater contribution area of the NFWFMD's [Minimum Flows and Minimum Water Levels](#) adopted MFLs or on the MFL priority list.

4. Project Description

In 150 words or less provide a concise but complete description of the proposed project. **What does the project do and why is it being done?** Be specific with size or scope of the project, purpose, activities, tasks, and quantity of work or items to complete. Clearly and succinctly summarize project benefits and the intended outcome or results.

Refer to [DEP's springs guidance](#) appendices for assistance on how to measure project benefits:

If the proposed project has **water quality benefits**, quantify the expected outcomes:

Nitrogen Reduced (lbs./yr.):

Sediment Reduced (lbs./yr.):

Any other expected water quality benefits:

If the proposed project has **water quantity benefits**, list the type/source of water and quantity of water to be made available or conserved (MGD):

If **land acquisition** project:

Identify the total number of acres to be acquired:

Estimated acres within a BMAP or spring groundwater contribution area:

Summarize existing and proposed land use, conservation easements, and land management activities.

Estimated recharge potential (MGD – see DEP Guidance, Appendix C.I.):

Additional **project information**:

Identify the major riverine-estuarine watershed where the proposed project is located and whether identified in a [Surface Water Management and Improvement \(SWIM\) Plan](#).

Is the proposed project in a **local plan**, e.g., local Capital Improvement Plan, Asset Management Plan, or Local Mitigation Strategy? If yes, identify relevant plan(s).

If applicable, indicate whether the proposed project is **multi-year** and/or related to or continues a previously funded springs restoration and protection project.

Measures of Success

How will the project's effectiveness be measured? Indicate specific metrics. Examples include pre- and post- water quantity or quality audits, number of added customers, monitoring programs, etc.

5. Project Outcomes and Benefits

In 150 words or less provide a narrative of the anticipated outcomes, results, and benefits of the proposed project. In addition to items previously noted, benefits may include local community or economic development, additional environmental or natural system protection, and/or how the project provides dual benefits or complementary efforts.

If multi-year project: (1) If related to or a continuation of a previously funded project, summarize the outcomes and benefits to date; (2) If a new multi-year project and if the anticipated outcome will be realized during a future phase, describe results at the end of Year One, and explain how the current proposed project will make progress toward the final outcome; and, (3) submit a Multi-Year Plan.

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6. Project Status and Schedule

A. Current status of the project (check one and complete %, as applicable):	<input type="checkbox"/> Conceptual planning <input type="checkbox"/> Design stage; % complete: _____ <input type="checkbox"/> Shovel-ready
B. Briefly describe the project status and planned next steps. Note that all projects should plan to begin in the Fall of 2021, and that grant funds <i>shall not be applied to costs incurred prior to the date of grant agreement execution.</i>	
C. Note the number of months or years needed to complete the project and provide a summary statement of applicant's readiness to implement and commitment to complete project within the proposed timeframe.	
D. Briefly describe any known or anticipated challenges (e.g. permitting, site access, labor or funding constraints, easements, etc.); and how they will be addressed.	

7. Project Funding

Complete on the following pages: (A) project budget table, (B) financial need and local commitments, and (C) any additional funding sources. Where available, submit project and construction cost estimates with this application.

A. Project Budget Table

Budget by Task	Requested Grant Amount (whole \$)	Match Funding Amount (whole \$) ⁽ⁱ⁾	Identify Match Funding Source ⁽ⁱⁱ⁾
1) _____			
2) _____			
3) _____			
4) _____			
5) _____			
6) _____			
Totals			
Total Project Cost			

(i) Funds listed represent realistic estimates for each category of spending. Except for communities with qualified financial need, and with approved reductions or waivers, a minimum 50% match of the overall cost to complete the project is required. Match funds will transfer to a contract requirement, so only include committed funds.

(ii) Name sources of matching or additional funds and further describe below in Section B.

B. Financial Need and Local Commitment

In 150 words or less provide a concise but complete description of local commitments, match, and financial need. Identify project partners or cooperating entities and how they are contributing or how match funds are committed to the project. Describe public support and how this was achieved (noticed meetings, public workshops, etc.). Also describe the capability of local revenue sources for ongoing operation and maintenance over the life of the proposed project.

If the applicant is economically distressed or financially disadvantaged pursuant to sections 288.0656 or 403.1838(2), Florida Statutes, and qualifies for financial assistance, indicate the requested reduction or waiver in match requirements here.

Clearly indicate if project is contingent upon additional funding sources to proceed as presented (including if a companion project is planned). If part of a multi-year project, summarize the full project cost and timeframe, and submit a Multi-Year Plan.

C. Additional Funding Sources

Note all that apply including year and/or status (include all years and funding amounts)	
<p>NWFWMD Springs Restoration Funding</p> <p>Eligible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p> <p>Applied? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p> <p>Received? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p>	
<p>DEP Clean Water SRF or Florida Legislature Water Projects</p> <p>Eligible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p> <p>Applied? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p> <p>Received? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p>	
<p>Other (name) _____</p> <p>Eligible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p> <p>Applied? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p> <p>Received? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p>	

8. Supporting Information Checklist

- Project Location Map (required)**
- Summary Project Schedule
- Multi-Year Plan (where applicable, **required**)
- Supporting Documentation for Project Benefit Calculations (lbs/yr., MGD, etc.)
- Site Plan, Preliminary Engineering Plans, Design Development, or Construction Documents²
- Cost Estimates
- Record of Local Commitments (commission resolutions, meeting minutes, news articles, etc.)
- Feasibility Studies, Photos, or Other Supporting Information (identify):
 - _____
 - _____
 - _____
 - _____
 - _____

9. Submitting a Proposal

Complete and submit this form with supporting information according to the Springs **Application Guidelines** to: grants@nwfwater.com. Visit www.nwfwater.com for more information.

² Up to ten sheets maximum or limit of one email transmission. The intent of this supporting information is to have a record of project status - not complete plans, details, or specifications.