# **Springs Restoration Grant Program Project Proposal**

**All project proposals must be submitted online via the** [**Protecting Florida Together Grants Portal**](https://protectingfloridatogether.gov/state-action/grants-submissions/general-grant-funding)**. Email submissions will not be accepted.**

**Proposal Questions**

It is not necessary to complete this proposal if you have already submitted your project to a Water Management District for consideration for the Fiscal Year 2025-2026 Springs Restoration Grant.

***Project Details***

Contact Information

1. Contact Name
2. Address
3. City
4. State
5. Zip
6. Phone
7. Email
8. Entity/Sponsor Name
9. Project Title (If requesting funding for only a single phase of a project, please include the phase name or number.) [10 word limit]
10. Project Description [250 word limit] (Please provide a brief narrative of the project. The description should only state what activities would be funded with the grant. Additional information may be provided in the questions below.
11. Additional Background Information [250 word limit] (Please provide any other context needed to understand the project or why it is being completed.)

***Project Location***

1. Enter the county or counties in which the project is located:
2. Enter the water management district in which the project is located: Dropdown:
   1. Northwest Florida Water Management District
   2. Suwannee River Water Management District
   3. St. Johns River Water Management District
   4. Southwest Florida Water Management District
   5. South Florida Water Management District
3. Project coordinates (latitude/longitude in decimal degrees):
4. Is this project located in a financially disadvantaged community or [Rural Area of Opportunity](https://www.floridajobs.org/community-planning-and-development/rural-community-programs/rural-areas-of-opportunity) as defined in Section 288.0656, Florida Statutes?
   * + 1. Yes
       2. No
5. Please provide the name of the spring that will receive the primary benefit of the project.
6. Is the project located within a basin management action plan (BMAP) area?
   1. Yes, located in a BMAP
      1. What BMAP area is the project located in? [View Map of BMAPs](https://fdep.maps.arcgis.com/apps/mapviewer/index.html?layers=fcecce7a4fa44709b75408b58106b224)
         1. *dropdown of Springs BMAPs*
      2. Is the project located within a Priority Focus Area (PFA) of the BMAP? [View Map of PFAs.](https://geodata.dep.state.fl.us/datasets/FDEP::springs-priority-focus-areas/explore?location=29.857600%2C-82.466139%2C7.82)
         1. Yes
         2. No
      3. Is the project identified in the [BMAP Statewide Annual Report?](https://floridadep.gov/dear/water-quality-restoration/content/statewide-annual-report)
         1. No
         2. No, but intended to be incorporated in next BMAP Annual Update
         3. Yes
            1. Please enter the name of the project as it appears in the BMAP Statewide Annual Report.
            2. Is the proposed grant project for the completion of the entire BMAP project listed above or a phase or portion thereof?

Entire project

Phase or portion of a project

Please explain what phase this project will be, what phases have been completed, and what phases remain to be completed for this listed BMAP project. Do not include other phases that are separately included in the BMAP Statewide Annual Report. [text box, 250 word limit]

* 1. No

1. Does the spring receiving the primary benefit have an established minimum flow and level (MFL), and if so, is it in recovery or prevention? [View Map of MFLs](https://floridadep.gov/water-policy/water-policy/content/statewide-mfl-map)
   1. No MFL
   2. MFL – Meeting
   3. MFL – Recovery
   4. MFL – Prevention
2. Is the Project listed in a Recovery/Prevention Strategy or identified in a Regional Water Supply Plan as Benefitting an MFL?
   1. Yes
      1. List the project number and name as they appear in the document.
   2. No
   3. No, but intended to be incorporated in next Annual Update

***Project Benefits***

1. Enter the project benefits in numeric form. If there is no benefit, the benefit is not known or the benefit is not calculable, enter "0." If benefits are other than those listed below, be sure to describe them in the ‘Other benefits’ section below. For septic to sewer projects, please use the OSTDS Calculations for BMAPs tool found [HERE](https://floridadep.gov/dear/water-quality-restoration/content/methods-calculating-project-reductions).
   1. Total Nitrogen reductions (lbs/year):
      1. *If zero entered: Question asking if there are no benefits or if benefits unknown/not able to be calculated*
   2. Ancillary Water Quantity Benefit
      1. Water made available within 2 years of project completion (MGD):
      2. Storage created upon project completion (MG):
   3. Please provide a description of how the above benefits were calculated, including the name of the model or tool used, if applicable. [250-word limit]
   4. Other benefits (If the project has benefits beyond water quality and/or water quantity, please explain.) [250-word limit]

***Funding Requests***

1. Have there been previous state funds committed to this project, or a phase of this project?
   1. No
   2. Yes
      1. If yes, please provide the previous DEP grant agreement number(s) associated with this project:
      2. State grant amount already awarded to this project:
2. Grant amount requested:
3. Applicant funds committed to the project:
4. Other funding contributions amount:
   1. *If greater than zero:* Please list who is providing the contribution. Please include the amounts if there is more than one contributor. [100 word limit]
5. Total project cost:
6. Please identify the funding requested for any of the applicable types of activities for the project. If $0, enter 0.
   1. Agricultural BMP Implementation costs: $\_\_\_\_\_\_
   2. Construction costs: $\_\_\_\_\_\_
   3. Land Acquisition costs: $\_\_\_\_\_\_
   4. Preconstruction Activities Amount (Design, etc.): $\_\_\_\_\_\_Engineering/Construction Oversight Amount: $\_\_\_\_\_\_
   5. Other, please describe and include grant requested amount: [text – 50 word limit]
7. Describe how this project accomplishes its goals in an affordable, efficient, and effective manner. Please include any cost saving strategies incorporated into the planning/design of the project. [250 word limit]
8. Have you applied, or do you plan to apply, for funding for this project under any other grant programs on Protecting Florida Together this grant cycle? [Yes/No]
   1. *If Yes*: Please list the programs: [text]

***Proposed Project Readiness to Proceed***

1. Estimated design completion at the time of this proposal submittal?
   1. 0%
      1. *If 0% is selected:* Will you be able to start and complete the design if you do not receive grant funding this year? [Yes/No]
   2. 30%
   3. 60%
   4. 90%
   5. 100%
   6. No design required.
2. Estimated completion date of design (If design is complete, please enter the date completed): [Date or N/A]
3. Has permitting been completed?
   1. Yes
   2. No
      1. Estimated completion date of permitting: [Date]
   3. No permits required.
4. Estimated start date of construction or BMP implementation:
5. Estimated project end date:
6. Land Ownership Status (for construction projects only):
   1. Land has been acquired.
   2. Land is under a legal option to buy.
   3. Land has not been acquired, but a willing seller has been identified.
   4. Land is under an easement that allows for construction and access.
   5. Land will need to be acquired, but process has not started.
   6. Multiple parcels need to be acquired. Some have been acquired but process not complete.

***Project Specific Information***

1. Project Type (dropdown):
   1. Agricultural Best Management Practices (BMPs)
      1. Please list and describe the BMPs that will be eligible. [500 word limit]
      2. To provide more information on the benefits of Agricultural Springs projects, a tool for grading project submissions was developed. The spreadsheet tool with guidance document can be found HERE. The completed spreadsheet should be sent to [DWRAFundingPortal@floridadep.gov](mailto:DWRAFundingPortal@floridadep.gov). Please include “Springs Grant” and the Project Title in the subject line.
   2. Water Conservation
   3. Hydrologic Restoration
   4. Land Acquisition

(Note: If available, please email a parcel location map to [DWRAFundingPortal@floridadep.gov](mailto:DWRAFundingPortal@floridadep.gov) with “Springs Grant” and the Project Title in the subject line.)

* + 1. How many acres will be acquired?
    2. Is there development potential for the land that will be prevented with this acquisition? [Yes/No]
       1. *If yes is chosen:* Please explain: [100 word limit]
    3. Will this be a conservation easement or fee simple acquisition?
       - 1. Conservation Easement
         2. Fee simple
         3. Combination of both
         4. Other: [text]
    4. Has the current landowner committed to the sale? dropdown
       1. Yes
       2. No
       3. No, but negotiations in process.
    5. What are the current land uses for the parcel(s)? [100 word limit]
    6. What are the proposed future allowable land uses for the land? [250 word limit]
    7. Who will own the rights to the land after the acquisition? [50 word limit]
    8. Who will be responsible for land management of the land following the acquisition?
  1. Aquifer Recharge
     1. What is the source of water for the recharge? [100 word limit]
     2. What is the total flow (in gallons per day) for the recharge project?
  2. Wastewater Treatment Facility Construction or Upgrade for water quality benefit
     1. This is a: [select all that apply]
        1. Enhanced nutrient reductions
           1. What is being proposed for enhancement? [100 word limit]
           2. Is this project to upgrade to AWT standards?

Yes

No

Facility already meets AWT standards.

* + - 1. Expansion of facility capacity
         1. Does the facility already meet AWT standards? (Yes/No)
      2. Construction of a new facility
         1. Will the new facility meet AWT standards? (Yes/No)
    1. Does the project accommodate and consider growth?
       1. Yes
          1. To what year in the future was growth evaluated?
       2. No
    2. Will this project assist the project sponsor in complying with any of the following statutory deadlines? [multi-select]
       1. SB 64 (2021) to eliminate surface water discharges by Jan. 1, 2032, where applicable (s. 403.064(17), F.S.)
       2. SB 1379 (2023) to meet AWT by Jan. 1, 2033, where applicable (s. 403.086(1)(c)3, F.S.)
       3. HB 1557 HB 1557 (2024) to meet AWT for reuse irrigation or land application by July 1, 2034, where applicable (s. 403.086(1)(c)3, F.S.)
          1. If any of the above are selected, describe how the project assists the sponsor in complying with each of the above selected statutory deadlines. [150 word limit]
    3. Please describe how the project will improve surface or groundwater quality. [100 word limit]
  1. Septic to Sewer
     1. If the project selected makes sewer connections available to properties currently served by onsite sewage treatment and disposal systems (OSTDS), please verify that you agree that you will provide notification of the availability of sewer and the requirement to connect within 365 days of the notification, per [s. 381.00655, F.S.](http://www.leg.state.fl.us/statutes/index.cfm?mode=View%20Statutes&SubMenu=1&App_mode=Display_Statute&Search_String=sewer+connection&URL=0300-0399/0381/Sections/0381.00655.html) Proof of such notice will be required in the grant agreement following construction completion and prior to reimbursement.
        1. [Check box: I agree]
     2. What is the facility ID for the receiving wastewater treatment facility?
     3. Does the receiving wastewater facility have existing capacity to accept the flow associated with this project? [Y/N]
        1. Yes
        2. No
           1. When will the capacity of the facility be expanded?
     4. What is the current level of buy-in or approval from neighborhood for sewer connections?
     5. Will the requested grant funding be used to subsidize the connections to central sewer? [Y/N]
     6. What other incentives are offered for hooking up to sewer, if any?
     7. Will connections be required?
     8. Please select the project components that you are including in the grant request. Please note that impact fees (also referred to as infrastructure fees or capital fees) will not be included in any grant award.: [multi-select options]
        1. Sewer extension
        2. Lift station(s)
        3. Laterals and/or grinder stations
        4. Connection costs
        5. Other costs
           1. Please explain: [100 word limit]
     9. Who will be responsible for the abandonment of OSTDS (septic tanks)?
        1. Applicant
        2. Homeowner
     10. How many septic tanks will be eliminated as a result of this project? [Numeric Only]
     11. How many sewer connections will be made as a result of this project?
     12. How many of those connections are made available to currently vacant parcels to prevent future septic tanks?
     13. How many of the OSTDS targeted by this project are on individual parcels of 1 acre or less?
     14. How many of those OSTDS are within 200 meters of a waterbody?
     15. Has the utility established a billing method associated with the new connections (e.g., plans to use potable use data)? [Yes/No]
     16. Does the utility have a plan to ensure ongoing maintenance of the system for its usable life? [Yes/No]
  2. Septic Upgrades
     1. Does this project include upgrading conventional onsite sewage treatment and disposal systems (OSTDS) to enhanced nutrient-reducing system or other equivalent wastewater system that can reduce nitrogen by 65%? [Yes/No]
     2. How many OSTDS systems will be upgraded?
     3. Will the applicant be upgrading/replacing the systems on behalf of homeowners? [yes/no]
     4. Will the applicant be using grant funds to offer a grant program to eligible homeowners to install individual enhanced nutrient reducing OSTDS? [yes/no]
        1. If Yes: Please describe the grant program, including maximum grant reimbursement amount and any eligibility requirements. [250 word limit]
     5. Who will be responsible for continued operations and maintenance? [100 word limit]
  3. Stormwater
     1. What is the size of the drainage basin for the stormwater project, in acres?
  4. Other Water Quality
     1. Please describe how the project removes nutrients. [250 word limit]
  5. Other Water Quantity
     1. Please describe how the project benefits water quantity in springs. [250 word limit]

***Multi-year Plan***

Since the Springs Grant is a recurring State grant, the Department can commit future funding to projects with a multi-year plan.

The main objective of implementing a multi-year plan is to only award the grant funds necessary for a project in the current fiscal year in an effort to maximize the number of projects that can be funded in each award cycle.

Projects that can be put on the multi-year plan to be funded over multiple years have an increased chance of being funded, especially for higher cost projects.

1. Would you be willing to put this project on the multi-year plan? (Yes/No)
   1. No
   2. Yes. If Yes, please provide an estimated grant and local contribution amount needed for each fiscal year that the project is anticipated to be active:
      1. FY25/26 grant:
      2. FY25/26 local contributions:
      3. FY26/27 grant:
      4. FY26/27 local contributions:
      5. FY27/28 grant:
      6. FY27/28 local contributions:
      7. FY28/29 grant:
      8. FY28/29 local contributions:
      9. FY29/30 grant:
      10. FY29/30 local contributions:

***Additional Information***

1. Please provide any additional information that would be beneficial in evaluating the project. [500 word limit]

If you would like to submit any supplemental documents, please email them to [DWRAFundingPortal@floridadep.gov](mailto:DWRAFundingPortal@floridadep.gov) . Please include “Springs Grant” and the Project Title in the subject line.