CITY OF MARATHON, FLORIDA RESOLUTION 2017-76

A RESOLUTION OF THE CITY COUNCIL OF THE CITY OF MARATHON, FLORIDA AUTHORIZING THE SUBMISSION OF A GRANT APPLICATION TO THE DEPARTMENT OF ENVIRONMENTAL PROTECTION'S CLEAN VESSEL ACT GRANT PROGRAM FOR THE PURCHASE OF A NEW PUMPOUT VESSEL FOR THE CITY MARINA; AND PROVIDING FOR AN EFFECTIVE DATE

WHEREAS, the Department of Environmental Protection's Clean Vessel Act Grant Program is a competitive grant program administered by the Florida Department of Environmental Protection Clean Vessel Act Program ("CVA"); and

WHEREAS, the City of Marathon is in need of a replacement for one of the two pumpout vessels utilized for the City Marina Pumpout Program; and

WHEREAS, the City of Marathon continues to provide pumpout service to customers of the marina and other vessels requesting pumpouts in Boot Key Harbor; and

WHEREAS, grant funding would allow the pumpout program to continue to provide free or low cost pumpouts to the boating public.

NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF MARATHON, FLORIDA, THAT:

Section 1. The above recitals are true and correct and incorporated herein.

Section 2. The City Council hereby authorizes the submission of a grant application to the Department of Environmental Protection's Clean Vessel Act Grant Program for funding for the purchase of a new City pumpout vessel, and authorizes the appropriate City officials to execute the application on behalf of the City.

Section 3. This resolution shall take effect immediately upon its adoption.

PASSED AND APPROVED BY THE CITY COUNCIL OF THE CITY OF MARATHON, FLORIDA, THIS 26th DAY OF SEPTEMBER, 2017.

THE CITY OF MARATHON, FLORIDA

Dr. Daniel Zieg, Maw

AYES:Bartus, Coldiron, Cook, Senmartin, ZiegNOES:NoneABSENT:NoneABSTAIN:None

ATTEST:

lane claver

Diane Clavier, City Clerk

(City Seal)

APPROVED AS TO FORM AND LEGAL SUFFICIENCY FOR THE USE AND RELIANCE OF THE CITY OF MARATHON, FLORIDA ONLY:

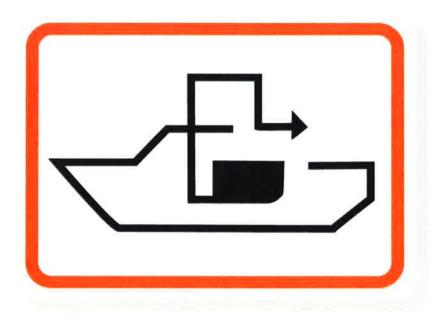
David Migut, City Altorney

#1232793 v1



Florida Department of Environmental Protection

Clean Vessel Act Grant Application & Instructions



KEEP FLORIDA'S WATER CLEAN

Clean Vessel Act Grant Requirements and Instructions

- 1. The CVA application form is an Adobe Acrobat file that allows you to submit your completed application online. You will need Adobe Reader software to submit the application form. Click here to install *free* reader software.
- 2. Review the following requirements *before* completing the application form on the next page. Follow links for additional information and examples.
- 3. These items must be completed before submitting your application.

Public Access and Fees

To receive CVA funds, facilities must provide public access to pumpout equipment. Fees to use the pumpout equipment cannot exceed \$5.00 per vessel.

***Business Registration**

All applicants for CVA grants (private businesses *and* government entities) must register with the State of Florida Department of Management Services vendor system. If you are not a registered vendor, register at: <u>https://vendor.myfloridamarketplace.co</u>m. Private businesses (*not applicable to government entities*) must *also* register with the State of Florida, Division of Corporations. If you are not registered, register at: <u>https://efile.sunbiz.org/onlmenu.html</u> *Applications will not be processed without appropriate business registration*.

***Insurance**

All facilities (except self-insured, government entities) must be insured by carriers licensed in or eligible to do business in Florida, and must maintain *applicable* Commercial General Liability, Automobile Liability and Workers Compensation coverage. A current Certificate of Insurance that includes the Florida Department of Environmental Protection as an additional insured must be submitted with the grant application. Follow Insurance link for detailed information.

*****Permits

Facilities must have any/all permits applicable to the pumpout project in place in order for DEP to process the application and approve funding. *Failure to obtain required permits prior to placing a pumpout system/equipment into operation can result in enforcement actions and civil penalties.*

***Vendor Quotes**

Applicants must submit two written quotes for any equipment costs that exceed \$2,500. Quotes must be submitted with the application form and approved before any work can begin.

Site Visit

Prior to approving funding for the purchase and installation of pumpout equipment, a DEP District Coordinator will visit your facility to determine if any permits are needed for your project, and to ensure the proposed pumpout location allows for proper sewage disposal. This *is not* a regulatory inspection, but it must be conducted to process the application and approve funding.

Allowable Expenses

Expenses for permits; construction, renovation; equipment purchase and installation; operations; maintenance and repair; sewage hauling; signage; and educational materials are allowed for reimbursement. Follow Allowable Expenses link for details.

Reimbursement

Grant recipients are reimbursed 75% of the total, approved project cost and must provide a minimum of 25% of the total, approved project cost as match. Expenditures made prior to official DEP notification that you can begin the project *will not* be reimbursed.

Reports

A progress report is required during installation/construction. Quarterly pumpout activity reports are required for five years following completion of the pumpout project.

Signage

Facilities must display at least one pumpout operations sign, and one pumpout symbol sign.

| CVA Grant Application Form | | | | | | |
|--|-------------------------------------|-----------------------------|--|--|--|--|
| Facility Name: Boot Key Harbor City Ma | Irina | | | | | |
| Federal Employer ID #: 65-0984873 | Facility's Fiscal Year | from: October to: September | | | | |
| Facility Address: 800 35th Street Ocear | - | | | | | |
| City: Marathon | County: Monroe | Zip Code: 33050 | | | | |
| Mailing Address (if different): | | | | | | |
| City: | County: | Zip Code: | | | | |
| Phone: (305) 289-8877 Fax: 3 | 805-289-8876 Web site: www.cit | yofmarathonmarina.com | | | | |
| | | | | | | |
| Contact Responsible For CVA Grant Application and Project Implementation | | | | | | |
| Name: Katrina Spelker | Title: Admin. As | sst. to Ports Director | | | | |
| Phone: (305) 289-8877 E-ma | il Address: spelkerk@ci.marathon.f | fl.us | | | | |
| | | | | | | |
| | Facility Owner(s) | | | | | |
| Name: City of Marathon | | | | | | |
| Address: 9805 Overseas Hwy. | | | | | | |
| City: Marathon | State: FL | Zip Code: 33050 | | | | |
| Phone: (305) 743-0033 E-mail A | ddress: cityofmarathon@ci.maratho | on.fl.us | | | | |
| | | | | | | |
| Name: | | | | | | |
| Address: | | | | | | |
| City: | State: | Zip Code: | | | | |
| Phone: E-mail A | ddress: | | | | | |
| Facility Information | | | | | | |
| Is the facility owned/operated by a self-i | nsured government entity (city, cou | unty, state)? 🗹 Yes 🗌 No | | | | |
| Type of Facility (<i>check all that apply</i>): | ☑ Marina | □Yacht/Boat Club | | | | |
| | 🗌 Dockominium 🛛 Boat Ramp | ☑Mooring Field | | | | |
| Proposed pumpout project is for an: DExisting Facility Proposed Facility (not yet under construction) | | | | | | |
| Name of the common/local water body where facility is located: Boot Key Harbor Facility's coordinates? Latitude: 24 deg. 42' 33.8" N Longitude: 81 deg. 5' 29.1" W | | | | | | |
| Number of slips? Wet: 13 Dry: 0 Mooring: 226 | | | | | | |
| Is the facility a designated: \Box Clean Marina \Box Clean Boatyard? \Box N/A | | | | | | |
| | | | | | | |
| | | CVA Application Page 3 | | | | |

| Project Information | | | | | | |
|---|------------------|----------------------|-----------------------------|--|--|--|
| Type of project/s? | | | | | | |
| ✓ Equipment purchase | & installation | Sewage hauling | Operations | □Maintenance/ Repair | | |
| Type of pumpout system requested? | | | | | | |
| Stationary pumpout with sewer connection Stationary pumpout with holding tank | | | | | | |
| ✓ Pumpout boat | Dump s | tation 🗌 Lift s | tation Por | table pumpout unit | | |
| Where on the premises wi | ll the pumpout/d | lumpout be located ? | 2 pumpout boats will conduc | ct mobile service and pump out at the dock | | |
| Number of pumpout connections installed through this project? None | | | | | | |
| Disposal method for pumpout/dumpout/boat sewage? O Directly to a permitted wastewater treatment facility O Directly to an on-site sewage treatment system O Directly to an on-site septic tank O Into holding tank, then transported to permitted wastewater treatment facility | | | | | | |
| ☑ Monday ☑ Tues | day 📝 Wedne | esday 🔽 Thursda | y 📝 Friday | ✓ Saturday ✓ Sunday | | |
| Between the hours | of 8:00 am | and 5:00 pm | | | | |
| 24 hours a day | ato? | Anti-instal | | 4-1-2 | | |
| Anticipated project start d | October 1, 2 | 017 Anucipated J | project completion | date? April 1, 2018 | | |
| | | | | | | |
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| | | | (| CVA Application Page 4 | | |

Estimated Project Budget Click here for Allowable Expenses & Budget Estimating Tips

| Project Component | Estimated Cost | Briefly describe how funds will be spent: |
|--------------------------------------|----------------|---|
| Permits | \$0.00 | |
| Construction | \$0.00 | 1 |
| Renovation | \$0.00 | |
| Equipment | \$103,438.00 | 1 |
| Equipment Installation | \$0.00 | 1 |
| Operations | \$0.00 | 1 |
| Maintenance and Repair | \$0.00 | |
| Sewage Hauling | \$0.00 | |
| Pumpout Signage | \$0.00 | - |
| Education/Instructional Materials | \$0.00 | - |
| TOTAL PROJECT COST | \$103,438.00 | |
| 75% reimbursable | \$77,578.50 | |
| 25% in match | \$25,859.50 |] |

| Grant Application Checklist | | | | | |
|--|------------------------|--|--|--|--|
| Facility is registered with MyFloridaMarketPlace (MFMP) vendor system. Facility is registered with Florida Division of Corporations (Not applicable for government entities). Facility's certificate of insurance is attached (Not applicable for self-insured government entities). If equipment costs exceed \$2,500, two vendor quotes are attached. Answers are provided for all questions on this form. | | | | | |
| X | | | | | |
| Name: Sean Cannon Title: | : Ports Director Date: | | | | |
| Name: Sean Cannon Date: Print Form SUBMIT APPLICATION | | | | | |
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