



April 27, 2015

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KEY DEER BOOKSTORE:**
Nancy Chatelaine

*The Mission of FAVOR -
Friends And Volunteers
Of Refuges - Florida Keys
is to support the
National Wildlife Refuges
of the Florida Keys through
education, volunteerism,
non-adversarial advocacy
and fundraising.*

PO Box 431840
Big Pine Key, FL 33043
305-872-0645

www.favorfloridakeys.org
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*FAVOR is a 501(c)3 non-
profit organization.
Your donations are tax
deductible.*



Bonnie Stine
Urban Forestry Program Coordinator, Florida Forest Service
Florida Department of Agriculture and Consumer Services
3125 Conner Boulevard, C-25
Tallahassee, FL 32399-1650
Re: City of Key West Urban and Community Forestry
Grant Application

Dear Ms. Stine:

This is a letter of support for the City of Key West's grant application to the Florida Department of Agriculture and Consumer Service Florida Forest Service grant program for a program to identify and map the trees and tree canopy within the city.

Friends And Volunteers Of Refuges - Florida Keys (FAVOR) is a non-profit whose mission is "to support the National Wildlife Refuges of the Florida Keys through education, non-adversarial advocacy, volunteerism and fundraising."

There are four National Wildlife Refuges in the Florida Keys, with the two nearest Key West having been established by President Theodore Roosevelt in order to protect the bird rookeries that were being demolished in the name of fashionable ladies hats. Those backcountry islands and the island of Key West are also very important rest and forage stop on the Eastern Flyway for migratory birds. Specifically the white-crowned pigeon (a "near threatened" keystone species) has been documented to feed almost exclusively on the canopied areas of Key West during breeding season.

Maintaining and increasing the tree canopy in the City of Key West will be crucial to the survival of the white-crowned pigeon and the multitudes of migratory species that rely on its diversity for forage.

We support the proactive role the City is taking in upgrading its Land Development Regulations to guide more canopy tree cover on the island, and especially its emphasis on native plants which support migratory birds.

Sincerely,

HISTORIC FLORIDA KEYS FOUNDATION, INC.

A Florida not-for-profit corporation

Old City Hall, 510 Greene Street, Key West, FL 33040

Tel.: (305) 292-6718

Cell: (305) 304-1453

Fax: (305) 293-6348

Diane E. Silvia, Ph.D.

April 27, 2015

Bonnie Stine
Urban Forestry Program Coordinator, Florida Forest Service
Florida Department of Agriculture and Consumer Services
3125 Conner Boulevard, C-25
Tallahassee, FL 32399-1650

Re: City of Key West Urban and Community Forestry Grant Application

Dear Ms. Stine:

This is a letter of support for the City of Key West's grant application to the Florida Department of Agriculture and Consumer Service Florida Forest Service grant program for a program to identify and map the trees and tree canopy within the city.

The mission of the Historic Florida Keys Foundation is to "promote historic preservation in the Florida Keys through education, advocacy, collaboration and stewardship". The unique subtropical species of our native and cultural trees have often been remarked upon throughout historical documents, from John James Audubon's natural history catalogues to letters from Civil War troops stationed here.

The City's Historic District has the most canopy cover on the island, primarily because of the strong oversight of the City of Key West Tree Commission. Mature trees are part of our historic neighborhoods, resulting in additional protections via the City's Historical Architectural Guidelines for "large and old trees. The historic district supports 4 of the State of Florida's champion trees.

Using the inventory for the maintenance and health of our existing canopy in the Historic District is important. The added bonus of increasing the tree canopy on other parts of the island makes for a well-rounded project that we support.

Sincerely,



Diane E. Silvia, Ph.D.
Executive Director



April 27, 2015

Bonnie Stine
Urban Forestry Program Coordinator, Florida Forest Service
Florida Department of Agriculture and Consumer Services
3125 Conner Boulevard, C-25
Tallahassee, FL 32399-1650

Re: City of Key West Urban and Community Forestry Grant Application

Dear Ms. Stine:

This is a letter of support for the City of Key West's urban tree inventory and canopy mapping project. A beautiful city is a very important for successful tourism. Trees and green space in urban and community areas create positive images and provide an aesthetically pleasing experience for both residents and tourists.

The Monroe County Tourist Development Council's mission is to "set an overall direction for the Monroe County tourism marketing effort in a manner that will assure long-term sustained growth in tourism revenues while also guaranteeing the sustainability and improvement of our product, including both our man-made and natural resources, and improvements to the quality of life of our residents".

Not only do our islands trees provide needed shade for our pedestrians, studies have shown that trees also increase retail sales by 9-12%, decrease stress and also improve driving safety; all of which are great for a tourism destination.

We support this important project by the City of Key West.

Sincerely,

Harold Wheeler
Director
Monroe County Tourist Development Council



BOARD OF COUNTY COMMISSIONERS

Mayor Danny Kolhage, District 1
Mayor Pro Tem Heather Carruthers, District 3
George Neugent, District 2
David Rice, District 4
Sylvia Murphy, District 5

UF/IFAS/Monroe County Extension Services
1100 Simonton Street, #2-260
Key West, FL 33040
Phone: (305) 292-4501
Fax: (305) 292-4415
E-mail - monroe@ifas.ufl.edu
Website - <http://monroe.ifas.ufl.edu>

April 23, 2015

Bonnie Stine
Urban Forestry Program Coordinator, Florida Forest Service
Florida Department of Agriculture and Consumer Services
3125 Conner Boulevard, C-25
Tallahassee, FL 32399-1650

Re: City of Key West Urban and Community Forestry Grant Application

Dear Ms. Stine:

This is a letter of support for the City of Key West's grant application to the Florida Department of Agriculture and Consumer Service Florida Forest Service grant program.

The University of Florida /Institute of Food and Agricultural Sciences (UF/IFAS) Monroe County Extension Office is dedicated toward serving Monroe County by providing scientifically based information to individuals, businesses, and agencies for better decision making and by creating programs and services that provide unique lifelong learning opportunities that empower people to improve their quality of life and the environment that surrounds us.

UF/IFAS created the Urban Forest Hurricane Recovery Program after the devastation of the 2004 and 2005 hurricane seasons. The main goal of the program is to foster a healthy urban forest that is more wind-resistant. The program is aimed at citizens and communities who seek to rebuild and set better management practices so that future storms are less devastating.

The City of Key West is requesting funding to inventory the City's trees. This inventory is not only important to the City for the maintenance, health, and resiliency of the trees in a storm, but also for post storm recovery. Knowing what you did have and what didn't survive helps guide new planting efforts for better long-term results.

The Monroe County Extension Office supports this application to ensure the long-term life and multitude of benefits from our urban forestry canopy.

Sincerely,

Kim Gabel, Environmental Horticulture Agent



© 2015 Google

Imagery Date: 12/17/2014 24°33'58.16" N 81°46'35.01" W elev

Google

Request for Taxpayer Identification Number and Certification

**Give Form to the
 requester. Do not
 send to the IRS.**

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return) CITY OF KEY WEST	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <input checked="" type="checkbox"/> Other (see instructions) ▶ _____	Exemptions (see instructions): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____
	MUNICIPALITY	
Address (number, street, and apt. or suite no.) 3104 FLAGLER AVENUE		Requester's name and address (optional)
City, state, and ZIP code KEY WEST, FLORIDA 33040		
List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)																																						
Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> on page 3.																																						
Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.	<table border="1" style="width: 100%; text-align: center;"> <tr><td colspan="9">Social security number</td></tr> <tr><td> </td><td> </td><td> </td><td>-</td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table> <table border="1" style="width: 100%; text-align: center;"> <tr><td colspan="9">Employer identification number</td></tr> <tr><td>5</td><td>9</td><td>-</td><td>6</td><td>0</td><td>0</td><td>0</td><td>3</td><td>4</td><td>6</td></tr> </table>	Social security number												-						Employer identification number									5	9	-	6	0	0	0	3	4	6
Social security number																																						
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Employer identification number																																						
5	9	-	6	0	0	0	3	4	6																													

Part II Certification	
Under penalties of perjury, I certify that:	
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and 3. I am a U.S. citizen or other U.S. person (defined below), and 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.	
Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.	
Sign Here	Signature of U.S. person ▶ <i>Abel Romo for City of Key West</i> Date ▶ <i>9/29/2014</i>

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. The IRS has created a page on www.irs.gov for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

Notes. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

Minority Business Designation: Other Non-Profit
Woman Owned Designation: Woman-Owned, Non-Certified
SDVBE Owned Designation: SDVBE, Non-Certified

Solicitation Selection

Registered for Solicitations: No
Registered for VBS: No
Solicitation/Sales Contact Email: N/A

Florida Terms of Use

Accepted: 08/15/2003 by David Sermak

Commodity Codes

No Commodity Codes Selected

Close Window

Copyright © 2009 State of Florida

MyFloridaMarketPlace Vendor Registration Customer Service: 866-FLA-EPRO (866-352-3776)

Please print this page for your records.

Print

Registration Summary

General Vendor Information

Vendor Name: City of Key West
Short Name (Does Business As):
Ariba Network ID:
Dun and Bradstreet Number:
Web Site: http://www.keywestcity.com
Federal Tax ID Number: F596000346
Name that appears on 1099 Form: City of Key West
W9 Status: Valid W-9 on File
DFS W9 Last Update Date: Nov 2, 2012
Business Designation: Government Entity - City

Contacts

<u>Name</u>	<u>Title</u>	<u>Phone</u>	<u>Fax</u>	<u>Email</u>
Nancy Kielman	Finance Director	305-809-3821	305-809-3806	ngibson@cityofkeywest-fl.gov
David Sermak	Accounts Payable	305-809-3819	305-809-3806	dsermak@cityofkeywest-fl.gov
Sue Snider	Purchasing	305-809-3815	N/A	ssnider@cityofkeywest-fl.gov

Locations

<u>City of Key West</u>		<u>Sequence 001</u>
P.O. Info: Orders:EMAIL Email:ssnider@keywestcity.com Fax:305-809-3806 Contact:Sue Snider	Remit To: Fax:305-292-8260 Contact:Nancy Kielman	Billing Contact: Email: Fax:305-809-3806 Contact:Nancy Kielman
PO Box 1409 Key West, FL 33041 Monroe US	PO Box 1409 Key West, FL 33041 Monroe US	PO Box 1409 Key West, FL 33041 Monroe US

Certified Business Enterprise Info (CBE)



ADAM H. PUTNAM
COMMISSIONER

ATTACHMENT I

Florida Department of Agriculture and Consumer Services
Bureau of General Services

DRUG-FREE WORKPLACE PROGRAM - BIDDER CERTIFICATION

IDENTICAL TIE BIDS - Preference shall be given to businesses with drug-free workplace programs. Whenever two or more bids, which are equal with respect to price, quality, and service are received by the state or by any political subdivision for the procurement of commodities or contractual services, a bid received from a business that certifies that it has implemented a drug-free workplace program shall be given preference in the award process. Established procedures for processing tie bids will be followed if none of the tied vendors have a drug-free workplace program. In order to have a drug-free workplace program, a business shall:

- 1) Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
- 2) Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
- 3) Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
- 4) In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
- 5) Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
- 6) Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.

A handwritten signature in blue ink, appearing to read "J.K. Schell", written over a horizontal line.

VENDOR'S SIGNATURE

ATTACHMENT H

STATE OF FLORIDA
FLORIDA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
CONFLICT OF INTEREST STATEMENT

I, James K. Scholl, as authorized
representative of City of Key West, FL

certify that neither member of this firm nor any person having interest in this firm has been
awarded a contract by the Florida Department of Agriculture and Consumer Services on a
non-competitive basis to:

- (1) develop this Invitation to Bid (ITB) or Request for Proposal (RFP);
- (2) perform a feasibility study concerning the scope of work contained
in this ITB/RFP;
- (3) develop a program similar to what is contained in this ITB/RFP.

J.K. Scholl James K. Scholl, City Manager
Authorized Representative

28 APRIL 2015
Date

ATTACHMENT F



Florida Department of Agriculture and Consumer Services
Division of Administration

ADAM H. PUTNAM
COMMISSIONER

CERTIFICATION REGARDING LOBBYING;
DEBARMENT, SUSPENSION AND OTHER
RESPONSIBILITY MATTERS
FOR EXPENDITURE OF FEDERAL FUNDS

LOBBYING

As required by 7 CFR Part 3018, for persons entering into a contract, grant or cooperative agreement over \$100,000 involving the expenditure of Federal funds, the undersigned certifies for itself and its principals that:

- (a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement;
- (b) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress or an employee of a Member of Congress, in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form - LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions; and
- (c) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subgrants, contracts under grants and cooperative agreements, and subcontracts) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

James K. Scholl, City Manager
PRINTED NAME/TITLE OF REPRESENTATIVE
JK Scholl
SIGNATURE OF REPRESENTATIVE / DATE

CONTRACT / PURCHASE ORDER NUMBER

DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS

As required by 7 CFR Part 3017, for persons entering into a contract, grant or cooperative agreement over \$25,000 involving the expenditure of Federal funds, the undersigned certifies for itself and its principals that:

- (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
- (b) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) Are not presently indicted for or otherwise criminally or civilly charged by a Government entity (Federal, State, or local) with commission of any offenses enumerated in paragraph (b) of this certification; and
- (d) Have not within a three-year period preceding this application had one or more public transaction (Federal, State, or local) terminated for cause or default; and

Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

James K. Scholl, City Manager
PRINTED NAME/TITLE OF REPRESENTATIVE
JK Scholl 28 April 2015
SIGNATURE OF REPRESENTATIVE / DATE

CONTRACT / PURCHASE ORDER NUMBER

order to develop a proper tree care and maintenance schedule and calendar.

Section 2: The City Commission hereby authorizes the City Manager to enter into an Urban and Community Forestry Grant Memorandum of Agreement between the City of Key West, Florida and Florida Department of Agriculture and Consumer Services.

Section 3: That this Resolution shall go into effect immediately upon its passage and adoption and authentication by the signature of the Presiding Officer and the Clerk of the Commission.

Passed and adopted by the City Commission at a meeting held this _____ day of _____, 2015.

Authenticated by the Presiding Officer and Clerk of the Commission on _____ day of _____, 2015.

Filed with the Clerk on _____, 2015.

Mayor Craig Cates	_____
Vice Mayor Mark Rossi	_____
Commissioner Teri Johnston	_____
Commissioner Clayton Lopez	_____
Commissioner Billy Wardlow	_____
Commissioner Jimmy Weekley	_____
Commissioner Tony Yaniz	_____

CRAIG CATES, MAYOR

ATTEST:

CHERYL SMITH, CITY CLERK

(On City Commission Agenda for May 19th Approval)

RESOLUTION NO. _____

A RESOLUTION OF THE CITY COMMISSION OF THE CITY OF KEY WEST, FLORIDA, AUTHORIZING THE CITY TO APPLY FOR AND EXECUTE A MEMORANDUM OF AGREEMENT WITH THE STATE OF FLORIDA, DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES, FLORIDA FOREST SERVICE IN RESPONSE TO URBAN & COMMUNITY FORESTRY GRANT BID #RFP/FFS 15/16-50; PROVIDING FOR AN EFFECTIVE DATE

WHEREAS, trees are an important part of our community; and

WHEREAS, the City of Key West desires to apply for an Urban and Community Forestry Grant which would provide monies in which to help fund the "Keys Trees: Inventory & Assessment of the Subtropical Trees and their Canopy in Key West" program, and

WHEREAS, the City of Key West wishes to enter into an Urban and Community Forestry Grant Memorandum of Agreement between the City of Key West, Florida and the Florida Department of Agriculture and Consumer Services;

NOW, THEREFORE, BE IT RESOLVED BY THE CITY COMMISSION OF THE CITY OF KEY WEST, FLORIDA AS FOLLOWS:

Section 1: That the City Commission supports the development of a "Keys Trees: Inventory & Assessment of the Subtropical Trees and their Canopy in Key West" program, a tree canopy mapping program to inventory the trees within the city in

**ATTACHMENT B (CONTINUED)
BUDGET**

Please note: All proposals must include a detailed itemized budget summary that lists all anticipated expenditures and explains all project costs. Proposals for site specific demonstration tree planting projects must list the quantity, species, and approximate size (container size, or caliper and height) of trees to be planted.

IMPORTANT: THIS FORM MUST BE USED. PROPOSERS NOT USING THIS FORM WILL BE RULED INELIGIBLE

COST ITEMS	QUANTITY	RATE OR PRICE	GRANT COST	MATCH COST
<u>Contractual</u>				
Contract with Certified Arborist to: 1) Populate iTree with descriptions of species, size and health; 2) Analyze Canopy cover by subregion; 3) Create Canopy Management Plan.	1	\$30,000	\$30,000	
Land Development Regulation upgrades based on data analysis and best management practices.	1	\$ 2,500		\$ 2,500
<u>Personnel:</u>		("Wrapped" hourly)		(rounded)
Urban Forester	250 hours	\$ 36.99		\$ 10,570
GIS Manager	250 hours	\$ 45.48		\$ 12,990
Senior Grants Manager	22 hours	\$ 36.39		\$ 930
Administrative Admin II	40 hours	\$ 24.35		\$ 1,110
7 Person volunteer Tree Commission Board @ 2015 Points of Light hourly rate.	70 hours	\$ 22.14		\$ 1,550
			Subtotal	\$ 27,150
<u>Travel</u>				
<u>Equipment</u> (List items)				
<u>Supplies</u> (List items)				
<u>Operating Costs</u> (List)				
Tree Commission Workshop	1	\$350		\$ 350
<u>Trees</u> (List species and size)				
<u>Total</u>			\$30,000	\$30,000

BID NUMBER: RFP/FFS-15/16-50

OPENING DATE: MAY 1, 2015 @ 2:00 P.M.

ATTACHMENT B

BUDGET

Activity: Keys Trees: Inventory & Assessment of the Subtropical Trees and their Canopy in Key West, Florida.

Specific Description: Inventory and mapping of Tree Canopy

SUMMARY OF COSTS

(A 50/50 match on behalf of the Proposer is required)

	REQUESTED GRANT \$	LOCAL MATCH \$
Contractual costs	<u>\$30,000</u>	<u>\$ 2,500</u>
Personnel costs	<u></u>	<u>\$27,150</u>
Travel costs	<u></u>	<u></u>
Equipment costs	<u></u>	<u></u>
Supplies costs	<u></u>	<u></u>
Operating costs	<u></u>	<u>\$ 350</u>
Tree costs	<u></u>	<u></u>
Overhead costs	<u></u>	<u></u>
Total Requested Grant (I)	<u>\$30,000</u>	<u></u>
Total Matching Costs (II)	<u></u>	<u>\$30,000</u>
Total Program Costs (III)	<u>\$60,000</u>	<u></u>

Add columns I and II for total III (100%)

50% Grant request

50% Local match

A BUDGET, DETAILING ALL COSTS IDENTIFIED ABOVE MUST BE ATTACHED.

PROJECT LOCATION INFORMATION (Please print or type - complete where applicable)

County: Monroe

Describe the Specific Location of the Project: Within the city limits of the City of Key West

Who has responsibility for overseeing Project implementation (name and title)? Karen DeMaria, Urban Forestry Manager

Who has maintenance responsibility for the Project after completion? Karen DeMaria, Urban Forestry Manager

Is the Land Ownership Public or Private? The trees in the inventory will be on public property

Name of Landowner: City of Key West

Project Title: Key West I-Tree and Canopy Mapping Project

Applicant Name: City of Key West

Email Address: csheldon@cityofkeywest-fl.gov

Describe why these funds are needed to complete this project: After years of having this on our wish list, we had started on this project with an interning grad student. The internship has ended and now we have a fledgling data set that needs to be put into action before it is obsolete. Our current staff does not have this skill set. Also, the City is about to do an overhaul of its Land Development Regulations, and this is the perfect time to use the data analysis to apply urban forestry best management strategies to and get it all codified.

For a tree planting: Describe what species are being planted and why. How will they be installed and maintained (be brief and concise, but complete)? N/A

What environmental or educational value will the community derive from this project? This project will allow the City to get a "big picture" view of the trees and canopy through GIS mapping.

- Realize the value of canopy and the benefit to planting in areas with inadequate coverage
- Right Plant, Right Place principles, especially regarding long term Sea Level Rise.
- Citizens will be able to identify trees on the website through the mapping tool.
- How to correctly trim a tree, and when to come in for a permit.
- Importance of a strong urban forestry program for the economy and well-being of Key West.

What steps have been taken to carry out this project in a cost effectiveness manner?

- GPS data for 90% of our existing City-tree inventory was performed by a Grad Student.
- The City has already invested in One Solution™ maintenance software for the entire City. The tree data will be entered into this program to develop a proactive maintenance schedule.

How will this project increase citizen involvement and support for the Community's Urban Forestry program in the long term? What evidence of community support for this project can be produced? This project will increase citizen involvement through community outreach and education regarding the inventory and canopy needs of the city. Residents of Key West are very concerned about the ecological balance on the island and will be encouraged to take action to close the gaps in canopy coverage. The letters attached to the application show the broad base of community support.

- Understanding = Greater Support & Compliance.
- Donor Program = Greater bonds with community partners and projects.

How will this project be publicized in the local community?

- Workshops and Presentations.
- Local TV, radio, print and social media.
- Newsletters of local partners.
- Displays at key contact points (Library, Home Depot, etc).

Tree City or Tree Campus USA certification and growth award, last year current?

The City of Key West has been a Tree City for three years, last year current.

Will a Certified Arborist(s) or a graduate forester from an accredited four year Bachelor of Science in Forestry program oversee this project? If not, who will provide oversight and what are their credentials? Yes: Karen DeMaria, Urban Forestry Manager and Certified Arborist.

What new partnerships will the project create or encourage?

- The "Tree Rings" partnership will involve local partners and community projects as donor sites to increase areas where canopy trees can be installed.
- The Monroe County Extension Service and their Master Gardeners will receive an update on the Canopy Management Goals and methodologies.

**ATTACHMENT A (CONTINUED)
PROJECT DESCRIPTION
Urban and Community Forestry Grant Proposal**

Describe the local community and current urban forestry program, and role of applicant in that program if a non-profit group: Key West is a City of approximately 26,000 residents located in South Florida (Monroe County) with a strong tourism economy. It is a tropical island, 2 miles by 4 miles in size with four distinct tree areas, Old Town, New Town Residential, New Town Commercial, College Road, and the Salt Ponds. The Old Town area is a historical area with a lot of tourism traffic and consists of numerous large, old trees with a mixture of native trees and tropical trees (Caribbean and Pacific) on very small properties. New Town Residential and Commercial have a lower elevation with a mixture of native and ornament tree species. The College Road area is dominated by a mangrove wetland area with large commercial properties including a community college, hospital, jail, golf course and botanical garden. The Salt Pond area is a preserved natural area on the south side of the island consisting of wetland and tropical hardwood hammock. Recently, there has also been an influx of tree failures and tree deaths due to insects in the larger canopy trees. A tree inventory project and canopy mapping will help the City set specific management goals and directives for an urban forestry management plan and will specifically help the City target specific areas in need of additional canopy.

Previous U&CF Grants received by the applicant. When were they implemented and what did they accomplish? None known in the last five years.

Describe the goals and objectives of this project:

Goal #1: Document Current Status of Tree Canopy in the City of Key West

Objective 1a) Populate iTree with tree info for existing GPS data (>890 trees)

Objective 1b) Calculate tree canopy for sub-regions of Key West.

Objective 1c) Summarize one year of past permitting data.

Goal #2: Canopy Management Plan

Objective 2a) Set Goals for proactive Canopy Management

Objective 2b) Improve existing Land Development Regulations to meet Goals

Objective 2c) Devise Donor Program to guide new trees to high priority areas

Objective 2d) Create reporting mechanism to measure progress towards Goals

Goal 3#) Improved Outreach

Objective 3a) Community Workshop for new goals

Objective 3b) 2-3 press releases regarding current status and new goals

Objective 3c) 3-5 minute video spot for government TV rotation explaining new goals.

Objective 3d) Flyers / brochures explaining new goals

Describe how this project will help to develop and improve this program in the long-term: The City is committed to preserving, protecting, maintaining and enhancing the urban forest and its canopy. The City has a Tree ordinance, a Tree Commission and an ISA certified arborist. The City does not have an understanding of the species, size and location of the trees through-out the city. This project will:

- Introduce i-Tree and its urban forestry analysis and benefits assessment tools to the community
- Create the first tree canopy map for the City of Key West
- Determine areas of inadequate canopy in order to increase canopy in these priority areas.
- Connect community with local underfunded donor projects
- Increase efficiency of Urban Forester
- Increase community understanding of big picture and specific steps to protect tree canopy.
- Increase right tree, right place plantings community wide
- Reduce green-house gasses and island heat—promoting walkability

FLORIDA URBAN AND COMMUNITY FORESTRY GRANT PROPOSAL FORM 2015

GENERAL INSTRUCTIONS: Please complete all items pertaining to the Category Grant for which you are applying. The proposal packet must not exceed thirty (30) one sided pages, including attachments. All attachments must be 8 1/2" X 11", except any attached sketches, plans and maps which must be no larger than 2' X 3' and folded into 8 1/2" X 11". **Six (6) copies, (one copy with original signatures and five copies) of the proposal packet including the proposal form, the project description and all attachments must be received no later than 2:00 p.m., May 1, 2015, at:**

Florida Department of Agriculture and Consumer Services
Purchasing Office - **U&CF - 2015 PROPOSAL**
407 South Calhoun Street
Mayo Building - Room SB-8
Tallahassee, FL 32399-0800
Telephone (850) 617-7181

If you have any questions, please see **ATTACHMENT M, District/Center Contacts.**

PROPOSER INFORMATION (Please Print or Type)

Project Title: Keys Trees: Inventory & Assessment of the Subtropical Trees and their Canopy in Key West, Florida.

Proposer Name: City of Key West

Name and Title of Contact Person: Carolyn Sheldon, Grants Administrator

Address: P.O. Box 1409, Key West, FL

Zip: 33041-1409

Phone: (305) 809-3741

FEID Number 59-6000346

US Congressional District Number: 26th District - Curbelo

Is your organization a Non-profit corporation pursuant to Chapter 617, Florida Statutes: No XX

If the applicant is a city or county government, does your urban forestry program have the following:
Professional Staff, in-house or contracted. List qualifications such as ISA certification, forestry degree, etc:

- Karen De Maria, Urban Forestry Manager, BS in Marine Science, ISA Certified Arborist, 30 years of experience in habitat studies and environmental studies.

Citizen Tree Advisory Board or Tree Advocacy Group. Describe: Yes, the Key West Tree Commission was established by the State of Florida in 1971. It approves or denies requests for tree removal, trimming and replacement.

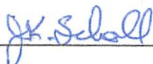
Urban Tree Inventory or Management Plan, how current? No-will be established through this grant program.

Tree Ordinance covering either public or private lands, describe: Adopted in 1997, the City has a Tree Ordinance that regulates the removal and maintenance of both publicly and privately owned trees within the City limits. As part of this tree permitting process, replacements are required of both private citizens and the public. Recently, there has also been an influx of tree failures and tree deaths due to insects in the larger canopy trees.

As the duly authorized representative of the Proposer named above, I hereby certify that all parts of the proposal and required grant information have been read and understood and that all information submitted herein is true and correct.

Authorized Executive Officer: James K. Scholl

Title: City Manager

Signature: 

Date: 28 APRIL 2015

**REQUEST FOR
PROPOSAL**

**FLORIDA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
CHECKLIST**

- _____ 1. The entire Request for Proposal has been read.
- _____ 2. Page 1 of the Request for Proposal Form **PUR 1001/1000**, Instructions to Respondents and General Contract Conditions, has been completed, signed and included in the proposal package. Provide a complete address for the proposer in the space provided (include street address or post office box, city, zip code and telephone number.) Please note: **ALL FUTURE PAYMENTS WILL BE SENT TO THE CONTACT PERSON AND ADDRESS LISTED ON THIS PAGE.**
- _____ 3. **ATTACHMENT A, URBAN AND COMMUNITY FORESTRY GRANT PROPOSAL FORM 2015**, has been completed, signed and included in the proposal package. Please note: **ALL FUTURE CORRESPONDENCE WILL BE SENT TO THE CONTACT PERSON LISTED ON THIS PAGE.**
- _____ 4. A detailed itemized budget summary (**ATTACHMENT B, BUDGET**) has been completed and included in the proposal package.
- _____ 5. A resolution (by the local government) indicating support for the project must be included with the proposal package (**ATTACHMENT C, EXAMPLE URBAN AND COMMUNITY FORESTRY GRANT RESOLUTION**).
- _____ 6. **ATTACHMENT F, CERTIFICATION REGARDING LOBBYING; DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS FOR EXPENDITURE OF FEDERAL FUNDS**, has been completed, signed and included in the proposal package.
- _____ 7. **ATTACHMENT G, GRANT EQUIPMENT JUSTIFICATION AND CERTIFICATION STATEMENT**, has been completed, signed and included in the proposal package, if applicable.
- _____ 8. **ATTACHMENT H, CONFLICT OF INTEREST STATEMENT**, has been completed, signed and included in the proposal package.
- _____ 9. **ATTACHMENT I, DRUG-FREE WORKPLACE PROGRAM - BIDDER CERTIFICATION**, form has been signed and is included in the proposal package.
- _____ 10. Applicant has registered current Federal Employer Identification Number (FEID #) and mailing address in MyFloridaMarketplace.com. Applicant must also complete the Division of Financial Services required Substitute Form W-9 (**ATTACHMENT K, REGISTRATION WITH MY FLORIDA MARKETPLACE/REGISTRATION FOR SUBSTITUTE W-9**). No contract can be entered into without both registrations being completed.
- _____ 11. For demonstration or site Specific projects, this resolution package (**ATTACHMENT C, EXAMPLE URBAN AND COMMUNITY FORESTRY GRANT RESOLUTION**) must also state that they will execute a Maintenance Memorandum of Agreement (**ATTACHMENT O, EXAMPLE URBAN AND COMMUNITY FORESTRY GRANT MAINTENANCE MEMORANDUM OF AGREEMENT**) with the Florida Department of Agriculture and Consumer Services.
- _____ 12. For demonstration or site specific projects along roadways, a map must be included showing both the U.S. Highway and S.R. (State Road) numbers separated by a slash (/), if both exist. If only one exists, please circle either "U.S." or "S.R." to indicate which numbers you are giving. At least three photos of the site should also be included in the proposal package.
- _____ 13. In conformance with Section 481.329(7), Florida Statutes, "Persons who perform landscape architectural services not for compensation, or in their capacity as employees of municipal or county governments, shall not be required to be licensed...." This means that if the required design is completed by an unpaid volunteer or an employee of municipal or county government, a Florida registered architect does not have to sign and seal the drawings.
- _____ 14. One (1) original with blue ink signature and five (5) copies of the proposal package have been submitted.

symbol or process) attached to or logically associated with the response created by the respondent within MyFloridaMarketPlace. The respondent agrees that the action of electronically submitting its response constitutes:

- \$ an electronic signature on the response, generally,
- \$ an electronic signature on any form or section specifically calling for a signature, and
- \$ an affirmative agreement to any statement contained in the solicitation that requires a definite confirmation or acknowledgement.

4. **Terms and Conditions.** All responses are subject to the terms of the following sections of this solicitation, which, in case of conflict, shall have the order of precedence listed:
- \$ Technical Specifications,
 - \$ Special Conditions and Instructions,
 - \$ Instructions to Respondents (PUR 1001),
 - \$ General Conditions (PUR 1000), and
 - \$ Introductory Materials.

The Buyer objects to and shall not consider any additional terms or conditions submitted by a respondent, including any appearing in documents attached as part of a respondent's response. In submitting its response, a respondent agrees that any additional terms or conditions, whether submitted intentionally or inadvertently, shall have no force or effect. Failure to comply with terms and conditions, including those specifying information that must be submitted with a response, shall be grounds for rejecting a response.

- *5. **Questions.** Respondents shall address all questions regarding this solicitation to the Procurement Officer. Questions must be submitted via the Q&A Board within MyFloridaMarketPlace and must be RECEIVED NO LATER THAN the time and date reflected on the Timeline. Questions shall be answered in accordance with the Timeline. All questions submitted shall be published and answered in a manner that all respondents will be able to view. Respondents shall not contact any other employee of the Buyer or the State for information with respect to this solicitation. Each respondent is responsible for monitoring the MyFloridaMarketPlace site for new or changing information. The Buyer shall not be bound by any verbal information or by any written information that is not contained within the solicitation documents or formally noticed and issued by the Buyer's contracting personnel. Questions to the Procurement Officer or to any Buyer personnel shall not constitute formal protest of the specifications or of the solicitation, a process addressed in paragraph 19 of these Instructions.




ADAM H. PUTNAM
COMMISSIONER

Submit Bids to:

Florida Department of Agriculture and Consumer Services
407 South Calhoun Street - Mayo Building, Room SB-8
Tallahassee, FL 32399-0800

Telephone: (850) 617-7181

Page 1 of <u>77</u> Pages	BIDS NO. RFP/FFS-14/15-50
AGENCY MAILING DATE: MARCH 23, 2015	WILL BE OPENED MAY 1, 2015 @ 2:00 P.M. and may not be withdrawn within 90 days after such date and time NOTICE OF INTENDED AWARD POSTING WILL BE ON OR ABOUT JUNE 30, 2015
BID TITLE: 2015 NATIONAL URBAN AND COMMUNITY FORESTRY GRANT PROGRAM	

VENDOR NAME City of Key West, FL	AUTHORIZED SIGNATURE (MANUAL)
VENDOR MAILING ADDRESS P. O. Box 1409 604 Simonton Street	
CITY - STATE - ZIP Key West, FL 33040	AUTHORIZED SIGNATURE (TYPED) TITLE
TELEPHONE: (305) 809-3741	James K. Scholl, City Manager

I certify that this Proposal is made without prior understanding, agreement, or connection with any corporation firm, or person submitting a proposal for the same materials, supplies or equipment, and is in all respects fair and without collusion or fraud. I agree to abide by all conditions of this Proposal and certify that I am authorized to sign this Proposal for the Proposer and that the Proposer is in compliance with all requirements of the Request for Proposal including but not limited to, certification requirements. In submitting a Proposal to an agency for the State of Florida, the Proposer offers and agrees that if the Proposal is accepted, the Proposer will convey, sell, assign or transfer to the State of Florida all rights, title and interest in and to all causes of action it may now or hereafter acquire under the Anti-trust laws of the United States and the State of Florida for price fixing relating to the particular commodities or services purchased or acquired by the State of Florida. At the State's discretion, such assignment shall be made and become effective at the time the purchasing agency tenders final payment to the Proposer.

GENERAL INSTRUCTIONS TO RESPONDENTS

1. **Definitions.** The definitions found in s. 60A-1.001, F.A.C. shall apply to this agreement. The following additional terms are also defined:
 - (a) "Buyer" means the entity that has released the solicitation. The "Buyer" may also be the "Customer" as defined in the PUR 1000 if that entity meets the definition of both terms.
 - (b) "Procurement Officer" means the Buyer's contracting personnel, as identified in the Introductory Materials.
 - (c) "Respondent" means the entity that submits materials to the Buyer in accordance with these Instructions.
 - (d) "Response" means the material submitted by the respondent in answering the solicitation.
 - (e) "Timeline" means the list of critical dates and actions included in the Introductory Materials.
2. **General Instructions.** Potential respondents to the solicitation are encouraged to carefully review all the materials contained herein and prepare responses accordingly.
- *3. **Electronic Submission of Responses.** Respondents are required to submit responses electronically. For this purpose, all references herein to signatures, signing requirements, or other required acknowledgments hereby include electronic signature by means of clicking the "Submit Response" button (or other similar