APPLICATION FOR CAPITAL PROJECT FUNDING

This application is to request funding from the following District(s):

District I: Key West - (shall encompass the city limits of Key West)

District II: Lower Keys - (city limits of Key West to west end of Seven Mile Bridge)

District IV: Islamorada - (between Long Key Bridge and Mile Marker 90.939)

District V: Key Largo - (from Mile Marker 90.940 to the Dade/Monroe County line and any portions of mainland Monroe County)

APPLICANT ORGANIZATION: City of Key West

(Registered business name exactly as it appears on www.sunbiz.org). Attach as Exhibit A

FEDERAL EMPLOYER'S IDENTIFICATION NUMBER OF APPLICANT'S ORGANIZATION:

59-6000346

DESIGNATED PROJECT CONTACT PERSON:

(Please note that the TDC Administrative Office conducts most of its correspondence, including agreement and reimbursement material by email, so the person listed below should be able to accept responsibility for receipt of this information).

Name & Title:	James K. Scholl		
Telephone/mobile no.:	305-809-3888		
E-mail:	jscholl@cityofkeywest-fl.gov		
Address:	1300 White Street		
	Key West, Florida33040		
TYPE OF APPLICANT:	Non-Profit Sovernmental Entity		
PROJECT TITLE: Charter	arter Boat Row Sidewalk Replacement		

LOCATION OR ADDRESS OF PROJECT: Provide physical (postal service) address, RE# and legal description (lot, block, subdivision) and attach map.

1801 N. Roosevelt Blvd.

RE #00072070-000000

WEBSITE FOR FACILITY: <u>www.cityofkeywest-fl.gov</u> WHICH OF THE FOLLOWING APPLIES TO YOUR FACILITY?

Publicly owned and operated by a non-profit organization
WHICH OF THE FOLLOWING BEST DESCRIBES YOUR FACILITY?

Convention Center	Sports Stadium	Sports Arena	
Auditorium	Aquarium	Museum	Zoological Park
Nature Center	Eishing Pier		h Park Facility, channel,
Public facilities in account set forth in F.S. 125.01		estuary or lago ns	
WHICH OF THE FOLLOW	/ING APPLIES TO Y	OUR PROJECT?	
Acquire Construct	Extend	Enlarge Re	emodel
Repair Improve			
	There are no funds a		ACILITY, WHICH OF THE each Park Facilities, channels,
	nourishment 🗌 Re	estoration 🗌 Er	osion control
Maintenance Co	nstruct 🗌 Re	epair	
	es in the event of	transfer of ownersl	or mortgage note requiring hip or change in use of the
🛛 Yes 🗌 No			
and/or fines/costs or liens	? (Please note that pursuare not eligible to receive	ant to Section 2-25(e), M grants or contracts from the	 outstanding code violations onroe County Code, organizations with e county until such time as the fines are answered yes, please explain

Non-Profit Organizations

Payment may be up to 75% reimbursement of the total cost of each segment of the project, subject to the maximum reimbursement amount of expenditures for each segment (if the project work is segmented) as set forth in the agreement. Applicant must be prepared to pay the entire cost of each segment of work in advance of seeking the up to 75% reimbursement. For purposes of this application no more than fifty percent (50%) of out of pocket cost for non-profits shall be of in-kind services and materials, and no in-kind services shall be reimbursed. If the TDC Funds Requested are allocated at less than 75% of the total project cost, only then may the organization request to allow additional in-kind services after submission of the application, which must be entered into your final agreement. The project may be broken down into 2 or 3 segments. When one segment is completed, reimbursement of the TDC portion of that completed segment cost can be applied for through the TDC. For acquisition of property see important information on page 5.

Total Project Cost:	TDC Funds Requested: (Up to 75% of Total Project Cost)	Organization Out of Pocket Cost: (Total Project Cost less TDC Funds Requested)	Confirmed In-Kind Services (Up to 50% of Out of Pocket Costs)	Confirmed/Available Hard Dollar Funds: (Total Project Cost Less In-Kind Services)	Organizations Financial Investment: (Out of Pocket Cost Less In-Kind Services)
\$	\$	\$	\$	\$	\$

In the space below list all in-kind services and goods and their values. These values are subject to negotiation with TDC/County. Please refer to page 4 of this application.

Governmental Entities

Payment may be up to 100% reimbursement of the total cost of each segment of the project, subject to the cap on expenditures for that segment as set forth in the agreement. Applicant must be prepared to pay the entire cost of each segment in advance of seeking up to 100% reimbursement. The project may be broken down into 2 or 3 segments. For acquisition of property see important information on page 5.

Total Project Cost:	TDC Funds Requested: (Up to 100% of Total Project Cost)	Governmental Agency Out of Pocket Cost (Total Project Cost less TDC Funds Requested)	I have highlighted the line item in budget for this specific project. Enclose portion of line item budget as proof of funding for Exhibit B 🖂
\$80,500	\$58,000	\$22,500	

TDC requires confirmation in writing that project funds are in place at the time of this application for grant funds (see Performance Guarantee on page 4) **Enclose proof of funding as Exhibit B**.

In the space below list the specific items/services, and the estimated dollar amount for each of those items/services that your requested TDC funds will be spent on (please do not include contingency fees or warranty fees as part of your budget):

Item Segment 1	Cost
Independent tourism impact study (3 months estimated at a cost of approximately 10% of potentially reimbursed cost to be paid for by the City's Garrison Bight Fund; consultant to be determined)	\$ 5,500
Segment 2 Sidewalk replacement	\$75,000
Total Project Estimate	\$80,500

1. Use:

a) Original use of structure and date of construction:

Covered walkway used for Charter Boat Row patrons, built 1974

b) Present use:

Covered walkway used for Charter Boat Row patrons

c) Proposed use:

Covered walkway used for Charter Boat Row patrons

d) Insert or attach photograph of existing site (Enclose as Exhibit C):

e) Historic designation: Indicate whether the property has been listed in the National Register, is located in a National Register district, is a locally designated historic landmark or is located in a locally designated historic district. If located within a historic district, provide the official name of the district. This information is available from the planning agency having jurisdiction over the property.

Property is not listed in the National Register

All Capital projects funded by the TDC shall be owned and operated by a governmental entity or non-profit organization. Applicant shall provide proof of property ownership, long-term lease or *Monroe County Tourist Development Council FY 2019 2nd Round Capital Project Application*

service contracts for consideration of funding, and should show sufficient expertise or financial capability to operate such facilities (**Enclose as Exhibit D**).

- 2. Ownership or other interest in property by applicant:
 - a) Official records reference for ownership documentation
 - b) If not owned by applicant, provide long-term lease of property, or service contract and provide notarized consent letter from owner for use of property as outlined in this application

3. If proposed project calls for transfer of title of real property to County, at least two (2) current real estate appraisals and one (1) environmental assessment shall be provided (**Enclose as Exhibit E**). The TDC/County shall ascertain, prior to acceptance of any donation or prior to purchase, that the property will pose no environmental hazard or liability for same, to County. The TDC/County must also ascertain permissible governmental interest in the transfer of title. Indicate any such proposed title transfers here.

N/A

4. This paragraph applies only to an acquisition funding request, but you will still need to complete items 5 through 13, whether this is new construction or renovations, additions or exhibits. Indicate the area of the property to be acquired in acres.

N/A

In evaluating applications for acquisition funding, an important consideration is the appropriateness of the size of the site to be acquired. Determinations of the appropriateness of site size will be made on a case-by-case basis and will depend on the characteristics for which the property is considered to be significant. Sufficient property should be acquired to assure that the historic relationship of a structure or archaeological site to its surrounding environment is preserved. However, it is important that no more property than is necessary to achieve established preservation objectives be included in the acquisition project application. As this factor is crucial to favorable consideration of your grant application and will have substantial impact on the cost of the required application documentation, we encourage prospective applicants to consult with the staff of the TDC Administrative Office prior to initiating the required documentation.

5. Protection of property: Indicate any type of state or federal protection currently afforded the property. It may be that more than one type may be applicable. Provide citations for applicable local protective ordinances. Include copies of property-specific restrictive legal instruments in an attachment. By signing and submitting this application, the proposer <u>warrants</u> that <u>all</u> restrictions are disclosed. Failure to include <u>every</u> restriction on the property may result in immediate termination of any agreement and demand for return of any monies paid thereunder (Enclose as Exhibit F).

N/A

6. Is the property threatened by imminent destruction, deterioration or other loss which may include demolition, vacancy, severe deterioration, loss of structural integrity, encroaching development, adverse environmental conditions, vandalism, etc.? Be specific regarding the nature of immediacy of the threat. If so, describe in detail:

The property is in City ownership and control and therefore is not threatened.

7. a) Are there any building restrictions on the site? If so, describe. Attach copies of all recorded easement and restrictive covenants. By signing and submitting this application, the proposer **warrants** that **all** restrictions are disclosed. Failure to include **every** restriction on the property may result in immediate termination of any agreement and demand for return of any monies paid thereunder (**Enclose as Exhibit G**).

N/A

b) Is the proposed project compatible with the County's and/or the Municipality's Concurrency Requirements under the existing and proposed Land Use Comprehensive Plan?

🛛 Yes 🛛 🗌 No

Describe below how you have ascertained such compatibility. (Note: If your description does not provide information about existing permits and/or review by the County Planning Department, your application shall be rejected. Please list all permits required to complete this project)

Charter Boat Row has been an attraction within the City of Key West since the 1970's and considered in all City and County concurrency requirements and local land use comprehensive plans. Sidewalk replacement will require a new City Building Permit for site work.

c) Does the site contain endangered or threatened species of flora or fauna?

🗌 Yes 🛛 🕻

If yes, attach explanation as Exhibit H

d) Indicate whether or not the project will be accessible to the handicapped per Chapter 553, Part V, Florida Statutes and the Americans with Disabilities Act, Public Law 1012-336.

Yes 🗌 No If no, attach explanation as Exhibit I

e) Explain how your facility will utilize recycling within the work of your proposed project:

The City has an extensive public recycling program. For specific reference please see the Ctiy Code Section 58. The recycling program is managed under contract by Waste Management, Inc.

f) Public accessibility and use: Indicate the extent to which the property is currently or will be scheduled to be open to the public each year (hours per day, days per week and weeks per year) upon project completion. Estimate the number of persons who will use or visit the completed facility annually. For archaeological projects, if the site will not be accessible to the public, estimate the number of persons annually who will be exposed to the interpretive materials and reports resulting from the project. How was this estimate derived?

The facility is open and available to the general public year round, all 365 days of the year. This past year, we estimate approximately 35,000 residents and tourists utilized this facility. The estimate is based on 32 boats (6-pack) docked at the facility with a range 2 to 6 persons per charter and 1 party boat with a range of 6 to 75 persons per charter.

8. Describe present physical condition of site: (attach legal description per property tax records). Indicate the present condition of the property by checking the appropriate term below:

Excellent: The property is habitable and occupied; no repairs are needed. All physical evidence indicates that the property is under continuous maintenance. Application is for expansion and enhancement.

Good: The property is habitable and occupied; only replacement or cosmetic repairs are needed (e.g., peeling paint, missing ornamental features, windows, doors, some deteriorated mortar, etc.) Property is maintained but in need of minor repair.

 \boxtimes Fair: The property is habitable but may be vacant. Both the structural integrity (foundation, framing, etc.) and weather tight integrity of the property (siding, walls, roofing, etc.) are in jeopardy because of prolonged neglect.

Poor: The property is uninhabitable and vacant. Major structural repairs are needed. Weather tight integrity has been lost. The property is derelict, abandoned and not habitable without major rehabilitation work.

Also, list any specific factors or problems which contribute to the present condition of the property.

Age and environment		

9. Status of Project Planning: (Any work initiated prior to the approval of an agreement by the Monroe County Board of County Commissioners will be at applicants own cost):

\boxtimes	Not yet initiated	Initiated
	Schematics complete	Design development completed
	Construction documents completed	Permits have been obtained (if
		required)

10. Name and Address of Project Consultant (architect, engineer, contractor, etc.).

City of Key West

Enclose preliminary plans or architectural documents completed to date - 1 set (Enclose as Exhibit J).

11. Has an agreement for architectural services or construction services been executed?

 \Box Yes (costs will not be reimbursed by TDC) \Box No

Project does not require architectural services

12. It is the County's policy **not to fund operations and maintenance costs** of organizations. Describe the means by which the structure(s) affected by this project will be maintained subsequent to restoration/rehabilitation. Include sources and estimated amounts of funding for such maintenance.

The City Department of Community Services is responsible for maintaining these facilities. The cost of maintenance and operations are funded in the City's Annual Budget each year during the normal budget preparation process.

13. Estimated completion date

09/30/2019

14. How will the project enhance tourism in Monroe County?

By continuing to provide a safe environment for Charter Boat Row patrons as they embark and disembark from their charter.

15. Applicant must demonstrate the ability to complete the project as proposed and to maintain and operate the project as a viable and long-term tourist attraction that is open to the public.

Included in this demonstration should be a proposed operational budget and marketing program to promote this facility as a tourist attraction. (Attach as Exhibit K)

Detail by Entity Name

Page 1 of 3

Exhibit A

DIVISION OF CORPORATIONS

Florida Department of State



Department of State / Division of Corporations / Search Records / Detail By Document Number /

Detail by Entity Name

Florida Not For Profit Corporation THE CITY OF KEY WEST, INC.

Filing Information

Document Number	N13000007165	
FEI/EIN Number	38-3916807	
Date Filed	08/07/2013	
Effective Date	08/07/2013	
State	FL	
Status	ACTIVE	
Last Event	REINSTATEMENT	
Event Date Filed	10/02/2014	
Principal Address		
1300 White Street KEY WEST, FL 33040		
Changed: 02/09/2017		
Mailing Address		
1300 White Street		
KEY WEST, FL 33040		
Changed: 02/09/2017		
Registered Agent Name & A	ddress	
SMITH, SHAWN D, ESQ		
1300 White Street		
KEY WEST, FL 33040		
Address Changed: 02/09/2	017	
Officer/Director Detail		
Name & Address		
Title P		
CATES, CRAIG		
1300 White Street		
KEY WEST, FL 33040		
Title B		

Page 2 of 3 Exhibit A

LOPEZ, CLAYTON 1300 White Street KEY WEST, FL 33040

Title B

Kaufman, Samuel 1300 White Street KEY WEST, FL 33040

Title B

Romero, Margaret 1300 White Street KEY WEST, FL 33040

Title B

WARDLOW, WILLIAM 1300 White Street KEY WEST, FL 33040

Title B

WEEKLY, JAMES 1300 White Street KEY WEST, FL 33040

Title B

Payne, Richard 1300 White Street Key West, FL 33040

Annual Reports

Report Year	Filed Date
2016	05/11/2016
2017	02/09/2017
2018	01/24/2018

Document Images

01/24/2018 ANNUAL REPORT	View image in PDF format
02/09/2017 ANNUAL REPORT	View image in PDF format
05/11/2016 ANNUAL REPORT	View image in PDF format
01/27/2015 ANNUAL REPORT	View image in PDF format
10/02/2014 REINSTATEMENT	View image in PDF format
08/07/2013 Domestic Non-Profit	View image in PDF format

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000007165

Entity Name: THE CITY OF KEY WEST, INC.

Current Principal Place of Business:

1300 WHITE STREET KEY WEST, FL 33040

Current Mailing Address:

1300 WHITE STREET KEY WEST, FL 33040 US

FEI Number: 38-3916807

Name and Address of Current Registered Agent:

SMITH, SHAWN D ESQ 1300 WHITE STREET KEY WEST, FL 33040 US Certificate of Status Desired: No

Jan 24, 2018

Secretary of State

CC5649778634

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Address

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	Ρ	Title	В
Name	CATES, CRAIG	Name	LOPEZ, CLAYTON
Address	1300 WHITE STREET	Address	1300 WHITE STREET
City-State-Zip:	KEY WEST FL 33040	City-State-Zip:	KEY WEST FL 33040
Title	В	Title	В
Name	KAUFMAN, SAMUEL	Name	ROMERO, MARGARET
Address	1300 WHITE STREET	Address	1300 WHITE STREET
City-State-Zip:	KEY WEST FL 33040	City-State-Zip:	KEY WEST FL 33040
Title	В	Title	В
Name	WARDLOW, WILLIAM	Name	WEEKLY, JAMES
Address	1300 WHITE STREET	Address	1300 WHITE STREET
City-State-Zip:	KEY WEST FL 33040	City-State-Zip:	KEY WEST FL 33040
Title	В		
Name	PAYNE, RICHARD		

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CRAIG CATES

City-State-Zip: KEY WEST FL 33040

1300 WHITE STREET

PRESIDENT

01/24/2018

Electronic Signature of Signing Officer/Director Detail

Date

Date

City of Key West Annual Budget Fiscal Year 2018/2019

Fund: 413 Garrison Bight

Department: 7551 Marina Operations

Кеу	Object	Accour	nt Description	Category	FY 2015/2016 Actuals	FY 2016/2017 Actuals	FY 2017/2018 Adopted	FY 2017/2018 6 Mth Amnd	FY 2017/2018 6 Mth Actuals		FY 2018/2019 CM Review	FY 2018/2019 CC Adopted
4137551 4137551	5755500 5755700	Training Other Expenses			\$0 \$560	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	
			Ор	erating Expenditures	\$328,007	\$307,899	\$399,500	\$361,500	\$146,552	\$414,950	\$414,950	\$414,950
4137551	5756200	Buildings			\$0	\$0	\$729,822	\$929,822	\$17,200	\$41,550	\$79,631	\$79,631
			GB1301 - DOCKMASTER B GB1302 - TRANSIENT BAT	`	,							\$79,631 \$0
4137551	5756300	Infrastructure			\$0	\$0	\$143,550	\$9,550	\$210,423	\$125,000	\$75,000	\$75,000
			GB1501 - WAHOO PIER RE GB75511602 - DOLPHIN PI GB75511801 - WAHOO PIE <mark>NEW CIP - CHARTERBOAT</mark>	ER REPLACEMENT (\$724,2 R REPAIRS (CARRY FORV	248) VARD \$14,246)							\$0 \$0 \$0 <mark>\$75,000</mark>
4137551	5756400	Machinery & Equipr	ment		\$0	\$0	\$51,500	\$34,900	\$22,003	\$51,000	\$51,000	\$51,000
			FOUR SECURITY GATES F ONE WASHER ONE DRYER SECURITY CAMERAS FOR		JE PORTAL SLIDE N	MECHANISM (\$1.00	SURCHARGE TO E	BE COLLECTED FR	OM LIVE-ABOARD	TENANTS)		\$28,000 \$1,500 \$1,500 \$20,000
				Capital Outlay	\$0	\$0	\$924,872	\$974,272	\$249,626	\$217,550	\$205,631	\$205,631
		Λ	Iarina Operations - Total		\$811,893	\$747,220	\$1,780,400	\$1,791,800	\$610,444	\$1,070,021	\$1,092,346	\$1,092,346

CITY OF KEY WEST FY 18/19 CIP PROJECT DETAIL

Project No:	TBD
Project Name:	Charterboat Row Sidewalk Replacement
Location:	City Marina at Garrison Bight
Department:	City Marina at Garrison Bight
Account No:	413-7551-575-6300
Location: Department:	City Marina at Garrison Bight City Marina at Garrison Bight

04/06/18
K. Olson
10/01/17
09/30/19
\$ 75,000
\$ -
-

Project Description/Justification:

This project will provide new sidewalks for the commercial fishing area of sidewalk. 8	850' x 6' (+/-)
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Reasons for Funding Modification (if applicable):

Operating Impact:	Related Projects:

Project Phase Summary

Phase	Committed	FY18/19	FY 19/20	FY 20/21	FY 21/22	FY 22/23
Construction		\$ 75,000				
Total	\$-	\$ 75,000	\$-	\$-	\$-	\$-

Funding Source Summary

Phase	Committed	F	Y18/19	FY 19/2	0	FY 20/21		FY 21/22	FY 22/23	
GB Fund		\$	75,000							
Total	\$-	\$	75,000	\$	-	\$	-	\$-	\$-	\$ 75,000

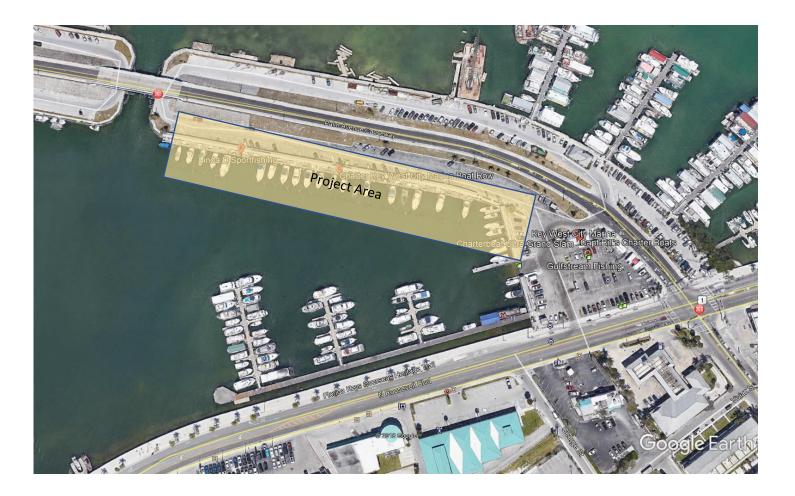
Exhibit C

Charter Boat Row Existing Facilities



Exhibit C

Charter Boat Row Location Map





Disclaimer

The Monroe County Property Appraiser's office maintains data on property within the County solely for the purpose of fulfilling its responsibility to secure a just valuation for ad valorem tax purposes of all property within the County. The Monroe County Property Appraiser's office cannot guarantee its accuracy for any other purpose. Likewise, data provided regarding one tax year may not be applicable in prior or subsequent years. By requesting such data, you hereby understand and agree that the data is intended for ad valorem tax purposes only and should not be relied on for any other purpose.

By continuing into this site you assert that you have read and agree to the above statement.

Summary

-		
Parcel ID	00072070-000000	6
Account #	1075868	12
Property ID	1075868	18
Millage Group	10KW	
Location	GARRISON BIGHT Cswy, KEY WEST	5
Address		15
Legal	33 67 25 KW GARRISON BIGHT G30-330-332 OR354-106/108(II DEED	100
Description	NO 19259-A) OR357-489-490(II DEED NO 19259-B) OR2251-1343/50	
	OR2727-1031/1056Q/C	
	(Note: Not to be used on legal documents)	
Neighborhood	32220	-
Property Class	MUNICIPAL (8900)	-
Subdivision		122
Sec/Twp/Rng	32/67/25	20
Affordable	No	-
Housing		



Owner

CITY OF KEY WEST FLA FOR GARRISON BIGHT PO Box 1409 Key West FL 33041

Valuation

	2018	2017	2016	2015
+ Market Improvement Value	\$265,574	\$265,574	\$265,574	\$0
+ Market Misc Value	\$1,405,090	\$1,405,090	\$1,405,090	\$511,863
+ Market Land Value	\$26,232,755	\$26,232,755	\$26,232,755	\$14,017,826
= Just Market Value	\$27,903,419	\$27,903,419	\$27,903,419	\$14,529,689
= Total Assessed Value	\$17,279,457	\$15,708,597	\$14,280,543	\$12,982,312
- School Exempt Value	(\$27,903,419)	(\$27,903,419)	(\$27,903,419)	(\$14,529,689)
= School Taxable Value	\$0	\$0	\$0	\$0

Land

Land Use	Number of Units	Unit Type	Frontage	Depth
COMMERCIAL EXEMPT (100E)	375,950.00	Square Foot	0	0
COMMERCIAL EXEMPT (100E)	16,000.00	Square Foot	0	0
ENVIRONMENTALLY SENS (000X)	74.57	Acreage	0	0

Yard Items

Description	Year Built	Roll Year	Quantity	Units	Grade
WOOD DOCKS	1991	1992	1	23478 SF	5
WOOD DOCKS	2001	2002	1	2700 SF	5
CON DKS/CONPIL	1969	1970	1	8109 SF	5
WOOD DOCKS	2003	2003	1	184 SF	5
CON DKS/CONPIL	1991	1992	1	2730 SF	5
COM CANOPY	1991	1992	1	6752 SF	4
WALL AIR COND	1984	1985	1	1 UT	1
UTILITY BLDG	2000	2001	1	100 SF	3
ASPHALT PAVING	1969	1970	1	348480 SF	2
UTILITY BLDG	2000	2001	1	100 SF	3
WOOD DOCKS	2003	2004	1	1800 SF	5
WOOD DOCKS	2003	2004	1	640 SF	5

Permits

	Permit Type		Date Completed	Date Issued	
Notes 5	\$	Amount 🖨	\$	\$	Number 🖨
DEMOLISH AND REPLACE DOLPHIN PIER AT CITY MARINA GARRISON BIGHT TEMPORARY RELOCATE HOUSEBOATS TO KINGFISH PIER DURING CONSTRUCTION. REPLACE UTILITY SERVICE TO DOLPHIN PIER	Commercial	\$883,960		10/19/2017	883960
DEMO SAILFISH PIER, REMOVE OLD PILES REPLACE WITH STEEL PILES. REPLACE FIXED PIERS WITH A NEW FLOATING DOCK WITH FINGER PIERS	Commercial	\$854,616		7/26/2017	16-2760
REVISION 1: RELOCATION MIDDLE OFFICE ADA BATHROOM DOOR TO OFFICI WALL	Commercial	\$74,450		4/12/2017	17-595
INSTALLATION OF ADDITIONAL CONDUIT, FEEDER, DLO CABLING, GROUNDING TO UPDATE SERVICE ENTRANCE, DISTR PANELS, PEDESTAL RECEPTACLES ADDITION OF 4 PEDESTALS A KINGFISH PIER 3 AT WAHOO PIER WITH ASSOC OVER-CURRENT PROTECTION	Commercial	\$555,000		3/9/2017	17-990
CONSTRUCT RAILING OUSIDE WITH WOOD AND ROPI		\$250		2/7/2014	14-0361
CONSTRUCT RAILING OUTSIDE OF FLOATING HOME OUT OF WOOD & ROPI APPROX 120 SQ/F	Commercial	\$250		2/7/2014	14-0361
R & R FIBERGLASS FROM VESSE		\$800		1/29/2014	14-0283
REMOVE ROTTEN FIBERGLASS COMPOSITE RAIL FROM VESSEL AND REPLACI WITH SAMI	Commercial	\$800		1/29/2014	14-0283
PROVIDE AND INSTALL MARINE VACUUM SEWER PUMPS AND ASSOCIATED PIPING ON WAHOO/KINGFISH PIERS. 25 BANJO PUMP OUT HYDRANTS CONNECT TO EXISTING FIRE MAIN DISCHARGE LINE SERVICEING BIGHT DOCKMASTEF FACILITY. TWO PUMPS 1330FT SUCTION LINI	Commercial	\$123,450		10/3/2013	13-4206
INSTALL CONDUIT AND WIRE FOR NEW PUMP OUT SYSTEM	Commercial	\$400		10/3/2013	13-4208
INSTALL LOW VOLTAGE WIRING FOR PHONES AND CATV AT TARPON PIER	Commercial	\$10,500		7/22/2013	13-3107
RELOCATE ELECTRICAL FOR CURRENT GARBAGE COMPRESSOR		\$750		3/4/2013	13-0859
REMOVE EXISTING TARPON PIER		\$1,040,380		1/25/2013	12-4532
INSTALL THIRTY THREE (33) 50 AMP RECEP. WITH THIRTY THREE (33) PEDESTALS FOR BOAT SLIP POWEF		\$900		1/10/2013	13-0092
REPLACE FINGER PIER TRI FRAME BRACING 4 X 6 AT EACH FINGER PIEF REPLACING OF ALL 8-01/2 AND 4-3" THRU RODS INCLUDING HARDWARE	Commercial	\$124,660		12/18/2012	12-4530
TEMPORARY REMOVE 10 FINGER PIERS FRONT KINGFISHER PIER STORAGE REINSTALL IN ORIGINAL LOCATION	Commercial	\$58,000		12/18/2012	12-4531
INSTALL OUTDOOR FLOODLIGHTS, 10 OUTDOOR ELECTRICAL BOXES GFC RECEPT WITH WEATHER PROOF CONTROL, HOOK UP 2 HIGH VOLTAGI PEDESTAL	Commercial	\$2,300		3/12/2010	10-761
REPLACE 22 POWER PEDESTAL	Commercial	\$7,000		9/29/2009	09- 00003284
INSTALL SECURITY VIDEO SYSTI		\$18,000		9/23/2009	09- 00003175
INSTALL 13 DOUBLE & TWO WATER SEWER PEDISTAL BOXI		\$39,000		12/4/2008	08-4349
INSTALL METER ENCLUSURE AND CUSTOMER LOAD CENTER		\$500		2/12/2007	07-0559
REMOVAL OF TOWER	Commercial	\$500		5/17/2006	06-3014
INSTALLED FLOATING DOCH	Commercial	\$104,000	8/13/2003	12/26/2003	01-3899
INSTALL FOUR NEW SHORE POWER PEDESTALS-50AMO AND REPLACE 200 AMI SERVICE	Commercial	\$15,000		1/1/1900	08-1127

Sketches (click to enlarge)

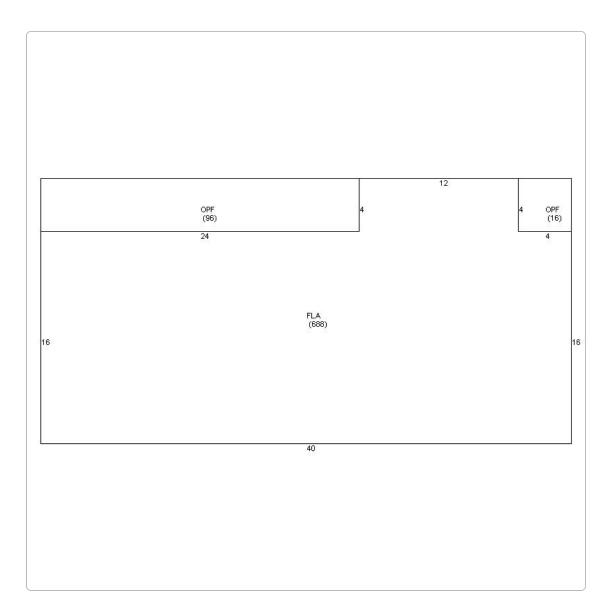
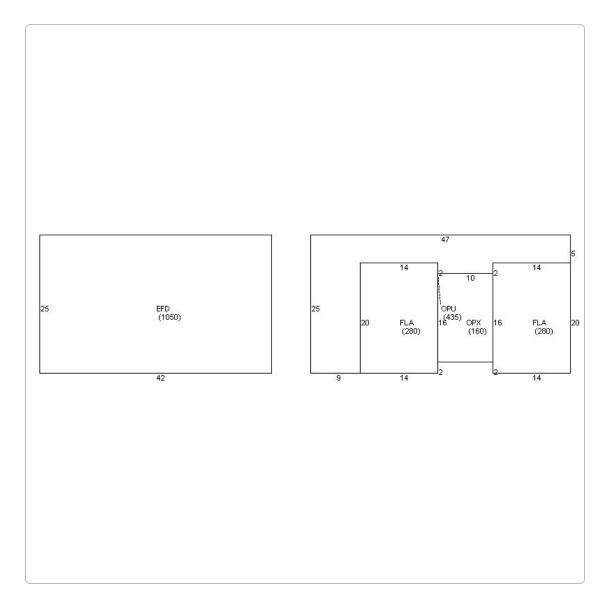
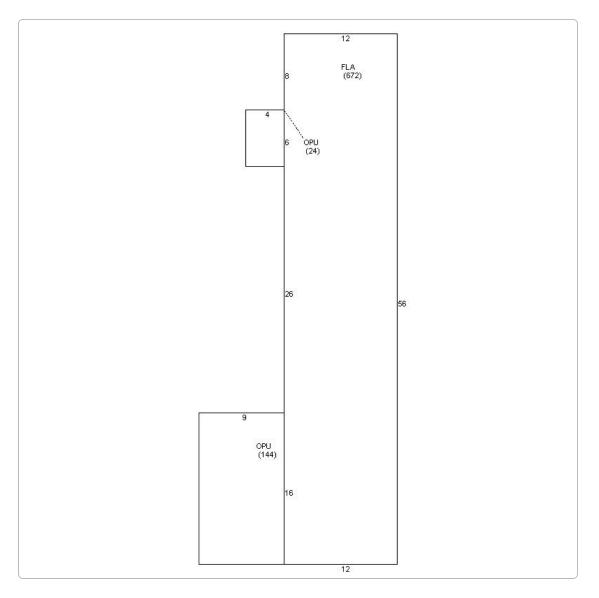


Exhibit D



qPublic.net - Monroe County, FL



Photos



Map



No data available for the following modules: Buildings, Commercial Buildings, Mobile Home Buildings, Exemptions, Sales, TRIM Notice.

The Monroe County Property Appraiser's office maintains data on property within the County solely for the purpose of fulfilling its responsibility to secure a just valuation for ad valorem tax purposes of all property within the County. The Monroe County Property Appraiser's office cannot guarantee its accuracy for any other purpose. Likewise, data provided regarding one tax year may not be applicable in prior or subsequent years. By requesting such data, you hereby understand and agree that the



Last Data Upload: 10/1/2018 1:48:53 AM

Proposed Operation Budget and Marketing Plan

Operation Budget:

The normal maintenance and ongoing upkeep of Charter Boat Row sidewalks will be provided by the City of Key West Community Services Department as part of the City's regular maintenance program, funded by the City's General Fund Budget.

Marketing Plan:

Charter Boat Row is marketed through the City of Key West website and social media and through the individual charter boat companies via their Charter Boat Row Association website: <u>http://www.keywestfishingboats.com/</u>. The Association also advertises in 2 magazine publications. For more than 30 years, men and women charter fishing boat captains have dedicated their lives to the promotion and preservation of sport fishing, easily accessible at Charter Boat Row. There are 32 boats of various sizes offering a number of fishing experiences (flats, center console, offshore sportfishing or party boat).

At the completion of the proposed project, the new sidewalks will provide a safe environment for Charter Boat Row patrons as they embark and disembark from their charter.

NON-COLLUSION AFFIDAVIT and VERIFICATION (Enclose as Exhibit L)

I, <u>Craig Cates</u>, of the city of <u>Key West</u>, according to law on my oath, and under penalty of perjury, depose and say that:

1) I am ______ Mayor Craig Cates _____, the applicant making the application for the project described as follows:

2) The prices in this application have been arrived at independently without collusion, consultation, communication or agreement for the purpose of restricting competition, as to any matter relating to such prices with any other applicant or with any competitor;

3) Unless otherwise required by law, the prices which have been quoted in this application have not been knowingly disclosed by the applicant and will not knowingly be disclosed by the applicant prior to application opening, directly or indirectly, to any other applicant or to any competitor; and

4) No attempt has been made or will be made by the applicant to induce any other person, partnership or corporation to submit, or not to submit, an application for the purpose of restricting competition;

5) The statements contained in this affidavit are true and correct, and made with full knowledge that Monroe County relies upon the truth of the statements contained in this affidavit in awarding agreements for said project.

VERIFICATION

I HEREBY CERTIFY that I have read the forgoing application and that the facts stated herein are true and correct to the best of my knowledge and belief.

Craig Cates	GGL
President's/Mayor's Name Typed Pre	esident's/Mayor's Signature
Sworn to and subscribed before me this	day of Cotober 20 18
personally appeared	,, and
known to be the person named in and w	
My commission expires: Notary Public	State of
Monto ACO PORTIA Y. NAVARRO Monto ACO Protection SIGO reverse protect Council FY 2019 24 Expires May 13, 2022 Bonded Thru Trev Falo Insurance 800-385-7019	nd Round Capital Project Application

DRUG FREE WORKPLACE FORM (Enclose as Exhibit M)

The undersigned vendor in accordance with Florida Statute 287.087 hereby certifies that:

City of Key West

(Name of Business)

1. Publishes 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. Informs 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. Gives each employee engaged in providing the commodities or contractual services that are under application a copy of the statement specified in subsection (1).

4. In the statement specified in subsection (1), notifies the employees that, as a condition of working on the commodities or contractual services that are under application, 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 (Florida Statutes) 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. Imposes 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, or any employee who is so convicted.

6. Makes 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.

	AAI	
Applicant's Signature:	light	
Date:	10/1/18	

HOLD HARMLESS/INDEMNIFICATION (Enclose as Exhibit N)

City of Key West (herein after "Organization") hereby covenants and agrees to indemnify and hold harmless the Monroe County Board of County Commissioners and Monroe County Tourist Development Council (herein after "BOCC/TDC") and the 3406 North Roosevelt Blvd. Corporation or any of its officers and employees from and against any and all claims, liabilities, litigation, causes of action, bodily injury (including death), personal injury, and property damage, and another other losses, damages, costs, expenses (including but not limited to fees and expenses arising from any factual investigation, discovery or preparation for litigation), and the payment of any and all of the foregoing or any demands, settlements or judgments arising out of, or in connection with, **Key West Amphitheater Enhancements** (herein after "Project") being funded by the BOCC/TDC. The Organization shall immediately give notice to the BOCC/TDC of any suit, claim or action made against the Organization that is related to this Project, and will cooperate with the BOCC/TDC in the investigation arising as a result of any suit, action or claim related to this Project.

a.) Non-Waiver of Immunity. Notwithstanding the provisions of Sec. 768.28, Florida Statutes, the participation of the BOCC/TDC in reimbursing/funding any portion of the Project and the acquisition of any commercial liability insurance coverage, self-insurance coverage, or local government liability insurance pool coverage shall not be deemed a waiver of immunity to the extent of liability coverage, nor shall any contract entered into by the BOCC/TDC be required to contain any provision for waiver.

b.) Privileges and Immunities. All of the privileges and immunities from liability, exemptions from laws, ordinances, and rules and pensions and relief, disability, workers' compensation, and other benefits which apply to the activity of officers, agents, or employees of any public agents or employees of the BOCC/TDC, when performing their respective functions related to this Project within the territorial limits of the County shall apply to the same degree and extent to the performance of such functions and duties of such officers, agents, volunteers, or employees outside the territorial limits of the County.

c.) RESTRICTIONS ON AGREEMENTS FUNDED BY BOCC/TDC. The Organization shall include the following term in all agreements funded by the BOCC/TDC for this Project:

Hold harmless/indemnification. Contractor acknowledges that this agreement is funded at least in part by the BOCC/TDC and agrees to indemnify and hold harmless the BOCC/TDC and any of its officers and employees from and against any and all claims, liabilities, litigation, causes of action, damages, costs, expenses (including but not limited to fees and expenses arising from any factual investigation, discovery or preparation for litigation), and the payment of any and all of the foregoing or any demands, settlements or judgments (collectively claims) arising directly or indirectly from any negligence or criminal conduct on the part of contractor in the performance of the terms of this agreement. The contractor shall immediately give notice to the BOCC/TDC of any suit, claim or action made against the contractor that is related to the activity under this agreement, and will cooperate with the BOCC/TDC in the investigation arising as a result of any suit, action or claim related to this agreement.

1

Craig Cates	Cat-	
President of Organization/Mayor's Name Typed	President's/Mayor's Signature	
Sworn to and subscribed before me this	day of	20 18
personally appeared Craig Crates	,, and	-
known to be the person pamed in and who execu	ited the foregoing document?	
Hortea G. Mailasso		
My commission expires: No	tary Public State of	
PORTIA Y. NAVARRO Commission # GG 187673 Expires May 13, 2022 Boded Tura Fair Instruments 800 285 2010		
Morroe County Tourist Development Council FY 2019	9 2 nd Round Capital Project Application	

Form	W-	-9
(Rev. D	ecembe	or 2014)
Departr Internal	nent of th Revenue	ne Treasury Service

Request for Taxpayer Identification Number and Certification

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

			_		_				
	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.								
	City of Key West								
сů.	2 Business name/disregarded entity name, if different from above			_					
page	,								
ЧO						4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):			
23	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partners	ship) 🕨		Exer	npt p	ayee coo	le (if a	ny)	
Print or type See Specific Instructions	Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the tax classification of the single-member owner.	n the line abo	ove fo	и Г	nptio e (if a	n from F Iny)	ATCA	repor	ting
5.5	✓ Other (see instructions) ► Government Entity			(Appli	es to ac	counts mai	ntained o	outside t	he (J.S.)
Ŭ.	5 Address (number, street, and apt. or suite no.)	Requester'	s nam	ne and ad	and address (optional)				
ed	1300 White Street								
6	6 City, state, and ZIP code								
Š	Key West, Florida 33040								
	7 List account number(s) here (optional)								
Par	t I Taxpayer Identification Number (TIN)							_	
Enter	your TIN in the appropriate box. The TIN provided must match the name given on line 1 to ave	oid Se	cial :	security	num	ber			·
reside	up withholding. For individuals, this is generally your social security number (SSN). However, for ent alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other es, it is your employer identification number (EIN). If you do not have a number, see How to ge			-]		- []	·		
TIN o	n page 3.	or	·				L		
Note.	If the account is in more than one name, see the instructions for line 1 and the chart on page	4 for Er	nploy	er identi	ificat	ion num	ber		
guide	lines on whose number to enter.		T_				T		1
		5	9	- 6	0	00	3	4	6
Par	t 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.

	no en pago er			
Sign Here	Signature of U.S. person ►	MAC	F. NANCE Dic Dates 3/22/17	
Gener	al Instructions		 Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098 	3-т

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted. Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an Information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- · Form 1099-INT (interest earned or paid)
- · Form 1099-DIV (dividends, Including those from stocks or mutual funds)
- · Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- · Form 1099-S (proceeds from real estate transactions)
- · Form 1099-K (merchant card and third party network transactions)

 Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)

- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.
- If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).

2. Certify that you are not subject to backup withholding, or

3. 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. See What is FATCA reporting? on page 2 for further information.

ATTACHMENTS AND CERTIFICATIONS (Enclose as Exhibit P)

1.	The followin	g supporting documents are attached.
a)	X	Print out of Sunbiz.org "Detail by Entity" (Exhibit A)
b)	X	Documentation from bank of confirmed project funds (Exhibit B)
c)	X	If applicable: Insert or attach photograph of existing site (Exhibit C)
d)	X	Proof of ownership; long term lease or service contract (Exhibit D)
		(Include consent of owner for use of property as described within this application)
e)		If applicable: Enclose at least two (2) current real estate appraisals and one (1) environmental assessment (Exhibit E)
f)		If applicable: Enclose citations for local protective ordinances (Exhibit F)
g)		If applicable: Enclose copies of all recorded easement and restrictive covenants (Exhibit G)
h)		If applicable: Enclose description of endangered/threatened special of flora or fauna (Exhibit H)
i)		If applicable: Enclose ADA accessibility explanation (Exhibit I)
j)		If applicable: Enclose preliminary plans or architectural documents - 1 set (Exhibit J)
k)	X	Proposed operation budget and marketing plan (Exhibit K)
I)	X	Notarized Non-Collusion affidavit and verification (Exhibit L)
m)	X	Signed Drug Free Workplace Form (Exhibit M)
n)	X	Notarized Hold Harmless/Indemnification form (Exhibit N)
o)	X	Applicant has printed and completed the W-9 form included within the application (page 20) (Exhibit O)
p)	X	Notarized Attachments and Certification form (Exhibit P)
q)	X	I have read the Capital Project Funding Process and Importation Information provided on Pages 2-7 of this application

VERIFICATION

I swear and certify that the information contained in this application is true and correct, and that I am the duly authorized representative of the applicant.

	A	AL	
Craig Cates	Kink	The	
President's/Mayor's Name Typed	President's/Mayor s Sigr	ature	
Sworn to and subscribed before me this	day of	etation	20 B
personally appeared Centra Cre	tes .	, and	
known to be the person named in and who	o executed the foregoing do	ocument	
Portia Haveno		A	
My commission capines	Notary Public State of	Horian	
Commission # GG 187673 Expires May 13, 2022			
Monrae Centrely Banan Bat De tal legennet Bound il	FY 2019 2 nd Round Capital Pr	oject Application	