

# FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION

## **Derelict Vessel Removal Grant Application**

## FOR OFFICE USE ONLY

	Derelict Vessel Removal Grant Application Number:	Date Received:
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I. APPLICANT INFORMATION			
Applicant:	Indian River County- Coastal Engineering Division		
a) Federal Employer ID No.:	59-60000674		
b) Project Manager Name: Melissa Meisenburg	c) Project Lagoon Environmental Specialist		
d) Mailing Address	1801 27th Street, Bldg A		
e) City/State/ZIP	Vero Beach, FL 32960		
f) Shipping Address	1801 27th Street, Bldg A		
g) City/State ZIP	Vero Beach, FL 32960		
h) Telephone	772-226-1651		
i) FAX	772-778-9391		
j) Email	mmeisenburg@ircgov.com		
k) District Numbers:			
I) State House	8		
m) State Senate	17		

	II.	PROJECT SUMMARY	
a)	Project Title		Summer 2024 Indian River County Derelict Vessel Removal
b)	Project Goal(s)		Efficiently and safely remove five (5) authorized derelict vessels from the Indian River Lagoon water body within Indian River County, Florida.
c)	Project Cost (T	otal):	

d)	Grant Amount Requested:				
e)	Project Type(s):		Bulk Derelict Vessel Grant (See Section V of guidelines for eligibility and restrictions. Rapid Removal Derelict Vessel Grant (See Section VI of guidelines for eligibility and restrictions).		
	•		luding the total number of derelict vessels that you are requesting be removed as part of detailed Project Summary/Scope of Work is required as an attachment to this application.		
Ind Ma FW	ian River Lago ritime LLC) the	on wite Cour	e (5) derelict vessels have been authorized for removal from the waters of the thin the boundaries of Indian River County. Using a contractor (Outlaw nty will efficiently and safely remove all five (5) derelict vessels following the emoval Guidelines. A detailed Scope of Work is attached to this document		
	III.	IUSTIFI	ICATION FOR RAPID REMOVAL GRANT REQUEST VS. BULK DERELICT VESSEL GRANT		

**REQUEST** 

Describe how the vessel to be removed meets the rapid removal criteria listed in Section VI of the Derelict Vessel Removal Grant guidelines using specific conditions which demonstrate it is in danger of imminent sinking, breaking apart, or is a critical danger to public safety or the environment.

Not applicable, the application is for a Bulk Derelict Vessel Removal Grant.

#### IV. PROJECTED OUTCOMES

a. How many total derelict vessels are there in the project's jurisdiction? What percentage of the total derelict vessels located within the project's jurisdiction will be removed by this project? (Limited to those listed in the Statewide Derelict Vessel Database).

There are currently ten (10) open derelict vessel cases in Indian River County. There are currently five (5) derelict vessels authorized for removal. Indian River County intends to remove 50% of the open vessels cases, 100% of the authorized derelict vessels within the County.

b. Describe the system to be used in demonstrating complete removal and destruction of the removed vessel(s). Include the procedure to verify contractor's completeness in removal of the vessel(s).

A marine barge and crane will be used to lift and remove derelict vessels from the waters of the Indian River Lagoon. FWC Removal Guidelines will be followed to prevent impacts to the waters and surrounding area. The barge will transport removed vessels to the boat ramp for removal where they will be disposed of at an authorized landfill. Coastal Engineering staff will observe the removal process, documenting removal and disposal, including the inclusion of photos and landfill tickets in the final report. Upon completion of the removal, Coastal Engineering staff will inspect the location to insure all debris has been removed. FWC Law Enforcement will be notified prior to removal and upon removal completion with documentation.

## V. BUDGET

Has a detailed cost estimate/proposal been developed for this derelict vessel removal project? If yes, attach a copy of application.

		<b>✓</b> YES		NO	
		THER SOURCE OF FUI	NDS (STATUS)		
a.	Federal	State/Local	Loan	Agency:	
b.	Grant Name:	_	_	Amount:	
c.	Approval Status:	Approved	Pending	Intend to Apply, Date:	
			_		_

#### VII. LAW ENFORCEMENT CASE DATE

(Include a line for each derelict vessel that you are requesting be removed as a part of this project)

	AGENCY	AGENCY CASE NUMBER	VESSEL REGISTRATION	VESSEL MAKE	VESSEL LENGTH	REMOVAL QUOTE
	FWC	FWC21ON0006601	FL4188CB	Wayfarer	32	\$ 4,800.00
1	FWC	FWC23ON0060348	FL9599DC	Walkins Yacht	27	\$ 4,100.00
2	FWC	FWC22ON0088129	Unknown	Unknown	30'	\$ 8,000.00
3	FWC	FWC22ON0100409	Unknown	Unknown	34	\$ 6,800.00
4	FWC	FWC23ON0105066	DO550986	Gulfstar	41	\$ 9,900.00
5						
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**TOTAL** \$ 33,600.00

**VESSEL** 

### VIII. APPLICATION ATTACHMENTS CHECKLIST

For mailed applications, include a copy on electronic media with paper copy or you may email entire application to: DVGrant@MyFWC.com

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nc.	Required	d Attachments

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- a. Cover Letter: A brief letter explaining overview of project and responsible parties involved.
- b. Application: One (1) application with original signature from authorized individual.
- c. Project Proposal: a detailed description of the project as described in the application instructions.
- d. Delegation of Authority: Formal documentation to show that the person signing the application has the authority to apply for, administer and commit the governing body or not-for-profit organization to the grant project on behalf of the applicant.
- e. Detailed Cost Estimate: Cost estimate in the form of a formal bid, written quote from proposed vendor or a detailed cost estimate for the project elements. One (1) tabbed section for each vessel removal requested to include the Derelict Vessel Data Sheet (Attachment "A).

### **APPLICANT SIGNATURE**

Application is hereby made for the activities described herein. I certify that I am familiar with the information contained in the application, and to the best of my knowledge and belief, this information is true, complete, and accurate. I further certify that I possess the authority (see grant guidelines Section IV, 4.4) to sign on behalf of the Applicant and that the Applicant has the ability to undertake the proposed activities in compliance with the FWC Derelict Vessel Removal Grant Program Guidelines.

I also certify that the applicant's governing body is aware of and has authorized the project manager as the official representative of the applicant to act in connection with this application and subsequent project, as well as to provide additional information as may be required. By my signature below, the applicant agrees to comply with all applicable federal, state, and local laws in conjunction with this proposal and the resulting project if approved.

Print/Type Name:	Title:
Signature:	Date:
STATE OF FLORIDA, COUNTY OF SELECT ONE	
personally, appeare	ed before me this day of
20 who subscribed and swore to the above instrument i	in my presence.
Notary Public Name	My commission expires:

NOTE: Instruction and further information regarding this application and the FWC Derelict Vessel Removal Grant Program can be found in the Program's Guidelines document or by contacting the Program Administrator at: Florida Fish and Wildlife Conservation Commission, Boating and Waterways Section, Derelict Vessel Program, 620 South Meridian Street, Tallahassee, FL 32399-1600 or call (850) 488-5600