

**Lee County Board Of County Commissioners
Agenda Item Summary**

October 7, 2003

Blue Sheet No. 2003-1173

1. REQUESTED MOTION:

ACTION REQUESTED: Approve and execute a contract between the State of Florida, Department of Health and the Lee County Board of County Commissioners for services provided by the Lee County Health Department from October 1, 2003 through September 30, 2004 which provides \$1,110,000 in cash and additional in kind resources.

WHY ACTION IS NECESSARY: To provide County funds in the amount of \$1,110,000 for public health services, retention of the County assessed portion of public health fees and other revenues, and in-kind services. Funds were approved during the Fiscal Year 2004 Budget Public Hearings.

WHAT ACTION ACCOMPLISHES: Provides County funding and support to the Lee County Health Department.

2. DEPARTMENTAL CATEGORY:
COMMISSION DISTRICT #

C5C

3. MEETING DATE:

10-28-2003

4. AGENDA:

- CONSENT
- ADMINISTRATIVE
- APPEALS
- PUBLIC
- WALK ON
- TIME REQUIRED:**

5. REQUIREMENT/PURPOSE:

- STATUTE 154.001
- ORDINANCE
- ADMIN. CODE
- OTHER
- Laws of Florida 83-177

6. REQUESTOR OF INFORMATION:

- A. COMMISSIONER _____
- B. DEPARTMENT Human Services
- C. DIVISION _____

BY: Ann Arnall

Ann Arnall 10/7/03

7. BACKGROUND :

The purpose of this contract is to provide funding for services to Lee County residents at the Lee County Health Department (LCHD). Funds are utilized to provide primary care services, communicable disease control, and environmental health services. The LCHD contracts with the Family Health Centers to fund primary care for patients without the means to pay for their own medical care. The Family Health Centers provides service at eight (8) locations in Lee County (Palm Beach Boulevard, Grand Avenue, Dunbar, Lehigh Acres, North Fort Myers, Bonita Springs, Cape Coral, and Myerlee). The LCHD provides various services at eight (8) locations throughout Lee County (Contract Attachment IV).

The Board of County Commissioners approved a cash allocation to the Lee County Health Department for FY2004 in the amount of \$1,344,000 during the budget process. The LCHD requested county assistance in purchasing vehicles for the newly approved Environmental Health staff. Therefore, the cash allocation is being reduced by \$234,000, which will be transferred to County Fleet Management for the purchase of the LCHD vehicles. The LCHD will pay for all necessary fuel, repairs, maintenance, and insurance costs for the additional vehicles.

In addition to the cash support, the LCHD retains County collected fees (\$1,626,350), other cash and local contributions and allocable County revenue earned by the Health Department or trust fund interest (\$1,614,893), and the in-kind services provided by the County such as building space and maintenance (\$935,838), brings the total annual cash and in-kind contribution made by Lee County and other local contributions to \$5,287,081.

Background Continued Page 2

8. MANAGEMENT RECOMMENDATIONS: Recommend approval

9. RECOMMENDED APPROVAL:

Department Director	B Purchasing of Contracts	C Human Resources	D Other	E County Attorney	F Budget Services			G County Manager
<i>[Signature]</i>	<i>[Signature]</i>	N/A	N/A	<i>[Signature]</i>	OA	OM	Risk	<i>[Signature]</i>
					Rec. by CoAtty	10/15/03	58 10/13/03	RECEIVED BY COUNTY ADMIN: <i>[Signature]</i> 10/16/03

10. COMMISSION ACTION:

- APPROVED
- DENIED
- DEFERRED
- OTHER

Date: 10/10/03
Time: 4:00 PM
Forwarded To: *[Signature]*

RECEIVED BY COUNTY ADMIN: *[Signature]* 10/16/03
9:30 am SLT
COUNTY ADMIN FORWARDED TO: *[Signature]*

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The State of Florida provides cash contribution of \$7,780,827. The LCHD anticipates collecting \$1,896,417 in State fees, \$206,331 in Medicaid fees, earning \$8,686 in Federal grants, \$150,450 in miscellaneous revenue, and in-kind services provided such as State Pharmacy, Laboratory, and WIC food in the amount of \$8,432,051. The total State estimated revenue is \$18,474,762. The total Contract estimated revenue for FY2004 from all sources is \$23,761,843.

Funds are available in account: FE5621000100.508120 Health Department, State Health Program.
Attachment: Contract-four (4) originals

**CONTRACT BETWEEN
LEE COUNTY BOARD OF COUNTY COMMISSIONERS
AND
STATE OF FLORIDA DEPARTMENT OF HEALTH
FOR OPERATION OF
THE LEE COUNTY HEALTH DEPARTMENT
CONTRACT YEAR 2003-2004**

This agreement ("Agreement") is made and entered into between the State of Florida, Department of Health ("State") and the Lee County Board of County Commissioners ("County"), through their undersigned authorities, effective October 1, 2003.

RECITALS

A. Pursuant to Chapter 154, F.S., the intent of the legislature is to "promote, protect, maintain, and improve the health and safety of all citizens and visitors of this state through a system of coordinated county health department services."

B. County Health Departments were created throughout Florida to satisfy this legislative intent through "promotion of the public's health, the control and eradication of preventable diseases, and the provision of primary health care for special populations."

C. Lee County Health Department ("CHD") is one of the County Health Departments created throughout Florida. It is necessary for the parties hereto to enter into this Agreement in order to assure coordination between the State and the County in the operation of the CHD.

NOW THEREFORE, in consideration of the mutual promises set forth herein, the sufficiency of which are hereby acknowledged, the parties hereto agree as follows:

1. RECITALS. ~~The parties mutually agree that the forgoing recitals are true and correct and incorporated herein by reference.~~

2. TERM. ~~The parties mutually agree that this Agreement shall be effective from October 1, 2003, through September 30, 2004, or until a written agreement replacing this Agreement is entered into between the parties, whichever is later, unless this Agreement is otherwise terminated pursuant to the termination provisions set forth in paragraph 8, below.~~

3. SERVICES MAINTAINED BY THE CHD. The parties mutually agree that the CHD shall provide those services as set forth on Part III of Attachment II hereof, in order to maintain the following three levels of service pursuant to Section 154.01(2), Florida Statutes, as defined below:

a. "Environmental health services" are those services which are organized and operated to protect the health of the general public by monitoring and regulating activities in the environment which may contribute to the occurrence or transmission of disease. Environmental health services shall be supported by available federal, state and local

funds and shall include those services mandated on a state or federal level. Examples of environmental health services include, but are not limited to, food hygiene, safe drinking water supply, sewage and solid waste disposal, swimming pools, group care facilities, migrant labor camps, toxic material control, radiological health, occupational health.

b. "Communicable disease control services" are those services which protect the health of the general public through the detection, control, and eradication of diseases which are transmitted primarily by human beings. Communicable disease services shall be supported by available federal, state, and local funds and shall include those services mandated on a state or federal level. Such services include, but are not limited to, epidemiology, sexually transmissible disease detection and control, HIV/AIDS, immunization, tuberculosis control and maintenance of vital statistics.

c. "Primary care services" are acute care and preventive services that are made available to well and sick persons who are unable to obtain such services due to lack of income or other barriers beyond their control. These services are provided to benefit individuals, improve the collective health of the public, and prevent and control the spread of disease. Primary health care services are provided at home, in group settings, or in clinics. These services shall be supported by available federal, state, and local funds and shall include services mandated on a state or federal level. Examples of primary health care services include, but are not limited to: first contact acute care services; chronic disease detection and treatment; maternal and child health services; family planning; nutrition; school health; supplemental food assistance for women, infants, and children; home health; and dental services.

4. FUNDING. The parties further agree that funding for the CHD will be handled as follows:

a. The funding to be provided by the parties and any other sources are set forth in Part II of Attachment II hereof. This funding will be used as shown in Part I of Attachment II.

i. The State's appropriated responsibility (direct contribution excluding any state fees, Medicaid contributions or any other funds not listed on the Schedule C) as provided in Attachment II, Part II is an amount not to exceed \$ 7,780,827 (State General Revenue, Other State Funds and Federal Funds listed on the Schedule C). The State's obligation to pay under this contract is contingent upon an annual appropriation by the Legislature.

ii. The County's appropriated responsibility (direct contribution excluding any fees, other cash or local contributions) as provided in Attachment II, Part II is an amount not to exceed \$1,110,000 (amount listed under the "Board of County Commissioners Annual Appropriations section of the revenue attachment).

b. Overall expenditures will not exceed available funding or budget authority, whichever is less, (either current year or from surplus trust funds) in any service category. Unless requested otherwise, any surplus at the end of the term of this Agreement in the County Health Department Trust Fund that is attributed to the CHD shall be carried forward to the next contract period.

c. Either party may establish service fees as allowed by law to fund activities of the CHD. Where applicable, such fees shall be automatically adjusted to at least the Medicaid fee schedule. Fees are listed in Attachment II Part II of this contract and in the Environmental Health Fee Schedule that is provided by the Environmental Health Program Office. The estimated annual environmental health fee revenues accruing to the County Health Department Trust Fund are listed on Attachment VI.

d. Either party may increase or decrease funding of this Agreement during the term hereof by notifying the other party in writing of the amount and purpose for the change in funding. If the State initiates the increase/decrease, the CHD will revise the Attachment II and send a copy of the revised pages to the County and the Department of Health, Bureau of Budget Management. If the County initiates the increase/decrease, the County shall notify the CHD. The CHD will then revise the Attachment II and send a copy of the revised pages to the Department of Health, Bureau of Budget Management.

e. The name and address of the official payee to who payments shall be made is:

County Health Department Trust Fund
Lee County
3920 Michigan Avenue
Fort Myers, FL 33916

5. CHD DIRECTOR/ADMINISTRATOR. Both parties agree the director/administrator of the CHD shall be a State employee or under contract with the State and will be under the day-to-day direction of the Deputy State Health Officer. The director/administrator shall be selected by the State with the concurrence of the County. The director/administrator of the CHD shall insure that non-categorical sources of funding are used to fulfill public health priorities in the community and the Long Range Program Plan. ~~A report detailing the status of public health as measured by outcome measures and similar indicators will be sent by the CHD director/administrator to the parties no later than October 1 of each year (This is the standard quality assurance "County-State Goal Achievement" report located on the Department of Health Intranet).~~

6. ADMINISTRATIVE POLICIES AND PROCEDURES. The parties hereto agree that ~~the following standards should apply in the operation of the CHD:~~

a. The CHD and its personnel shall follow all State policies and procedures, except to the extent permitted for the use of county purchasing procedures as set forth in subparagraph b., below. All CHD employees shall be State or State-contract personnel subject to State personnel rules and procedures. Employees will report time in the Client Information System/Health Management Component compatible format by program component as specified by the State.

b. The CHD shall comply with all applicable provisions of federal and state laws and regulations relating to its operation with the exception that the use of county purchasing procedures shall be allowed when it will result in a better price or service and no statewide

Department of Health purchasing contract has been implemented for those goods or services. In such cases, the CHD director/administrator must sign a justification therefore, and all county-purchasing procedures must be followed in their entirety, and such compliance shall be documented. Such justification and compliance documentation shall be maintained by the CHD in accordance with the terms of this Agreement. State procedures must be followed for all leases on facilities not enumerated in Attachment IV.

c. The CHD shall maintain books, records and documents in accordance with those promulgated by the Generally Accepted Accounting Principles (GAAP) and Governmental Accounting Standards Board (GASB), and the requirements of federal or state law. These records shall be maintained as required by the Department of Health Policies and Procedures for Records Management and shall be open for inspection at any time by the parties and the public, except for those records that are not otherwise subject to disclosure as provided by law which are subject to the confidentiality provisions of paragraph 6.i., below. Books, records and documents must be adequate to allow the CHD to comply with the following reporting requirements:

- i. The revenue and expenditure requirements in the Florida Accounting System Information Resource (FLAIR).
- ii. The client registration and services reporting requirements of the minimum data set as specified in the most current version of the Client Information System/Health Management Component Pamphlet;
- iii. Financial procedures specified in the Department of Health's Accounting Procedures Manuals, Accounting memoranda, and Comptroller's memoranda;
- iv. The CHD is responsible for assuring that all contracts with service providers include provisions that all subcontracted services be reported to the CHD in a manner consistent with the client registration and service reporting requirements of the minimum data set as specified in the Client Information System/Health Management Component Pamphlet.

d. All funds for the CHD shall be deposited in the County Health Department Trust Fund maintained by the state treasurer. These funds shall be accounted for separately from funds deposited for other CHDs and shall be used only for public health purposes in Lee County.

e. That any surplus/deficit funds, including fees or accrued interest, remaining in the County Health Department Trust Fund account at the end of the contract year shall be credited/debited to the state or county, as appropriate, based on the funds contributed by each and the expenditures incurred by each. Expenditures will be charged to the program accounts by state and county based on the ratio of planned expenditures in the core contract and funding from all sources is credited to the program accounts by state and county. The equity share of any surplus/deficit funds accruing to the state and county is determined each month and at contract year-end. Surplus funds may be applied toward

the funding requirements of each participating governmental entity in the following year. However, in each such case, all surplus funds, including fees and accrued interest, shall remain in the trust fund until accounted for in a manner which clearly illustrates the amount which has been credited to each participating governmental entity. The planned use of surplus funds shall be reflected in Attachment II, Part I of this contract, with special capital projects explained in Attachment V.

f. There shall be no transfer of funds between the three levels of services without a contract amendment unless the CHD director/administrator determines that an emergency exists wherein a time delay would endanger the public's health and the Deputy State Health Officer has approved the transfer. The Deputy State Health Officer shall forward written evidence of this approval to the CHD within 30 days after an emergency transfer.

g. The CHD may execute subcontracts for services necessary to enable the CHD to carry out the programs specified in this Agreement. Any such subcontract shall include all aforementioned audit and record keeping requirements.

h. At the request of either party, an audit may be conducted by an independent CPA on the financial records of the CHD and the results made available to the parties within 180 days after the close of the CHD fiscal year. This audit will follow requirements contained in OMB Circular A-133 and may be in conjunction with audits performed by county government. If audit exceptions are found, then the director/administrator of the CHD will prepare a corrective action plan and a copy of that plan and monthly status reports will be furnished to the contract managers for the parties.

i. The CHD shall not use or disclose any information concerning a recipient of services except as allowed by federal or state law or policy.

j. The CHD shall retain all client records, financial records, supporting documents, statistical records, and any other documents (including electronic storage media) pertinent to this Agreement for a period of five (5) years after termination of this Agreement. If an audit has been initiated and audit findings have not been resolved at the end of five (5) years, the records shall be retained until resolution of the audit findings.

k. The CHD shall maintain confidentiality of all data, files, and records that are confidential under the law or are otherwise exempted from disclosure as a public record under Florida law. The CHD shall implement procedures to ensure the protection and confidentiality of all such records and shall comply with sections 384.29, 381.004, 392.65 and 456.057, Florida Statutes, and all other state and federal laws regarding confidentiality. All confidentiality procedures implemented by the CHD shall be consistent with the Department of Health Information Security Policies, Protocols, and Procedures, dated September 1997, as amended, the terms of which are incorporated herein by reference. The CHD shall further adhere to any amendments to the State's security requirements and shall comply with any applicable professional standards of practice with respect to client confidentiality.

l. The CHD shall abide by all State policies and procedures, which by this reference are incorporated herein as standards to be followed by the CHD, except as otherwise permitted for some purchases using county procedures pursuant to paragraph 6.b. hereof.

m. The CHD shall establish a system through which applicants for services and current clients may present grievances over denial, modification or termination of services. The CHD will advise applicants of the right to appeal a denial or exclusion from services, of failure to take account of a client's choice of service, and of his/her right to a fair hearing to the final governing authority of the agency. Specific references to existing laws, rules or program manuals are included in Attachment I of this Agreement.

n. The CHD shall comply with the provisions contained in the Civil Rights Certificate, hereby incorporated into this contract as Attachment III.

o. The CHD shall submit quarterly reports to the county that shall include at least the following:

i. The DE385L1 Contract Management Variance Report and the DE580L1 Analysis of Fund Equities Report;

ii. A written explanation to the county of service variances reflected in the DE385L1 report if the variance exceeds or falls below 25 percent of the planned expenditure amount. However, if the cumulative amount of the variance between actual and planned expenditures does not exceed three percent of the cumulative expenditures for the level of service in which the type of service is included, a variance explanation is not required. A copy of the written explanation shall be sent to the Department of Health, Bureau of Budget Management.

p. The dates for the submission of quarterly reports to the county shall be as follows unless the generation and distribution of reports is delayed due to circumstances beyond the CHD's control:

- i. March 1, 2004 for the report period October 1, 2003 through December 31, 2003;
- ii. June 1, 2004 for the report period October 1, 2003 through March 31, 2004;
- iii. September 1, 2004 for the report period October 1, 2003 through June 30, 2004; and
- iv. December 1, 2004 for the report period October 1, 2003 through September 30, 2004.

7. FACILITIES AND EQUIPMENT. The parties mutually agree that:

a. CHD facilities shall be provided as specified in Attachment IV to this contract and the county shall own the facilities used by the CHD unless otherwise provided in Attachment IV.

b. The county shall assure adequate fire and casualty insurance coverage for County-owned CHD offices and buildings and for all furnishings and equipment in CHD offices through either a self-insurance program or insurance purchased by the County.

c. All vehicles will be transferred to the ownership of the County and registered as county vehicles. The county shall assure insurance coverage for these vehicles is available through either a self-insurance program or insurance purchased by the County. All vehicles will be used solely for CHD operations. Vehicles purchased through the County Health Department Trust Fund shall be sold at fair market value when they are no longer needed by the CHD and the proceeds returned to the County Health Department Trust Fund.

8. TERMINATION.

a. Termination at Will. This Agreement may be terminated by either party without cause upon no less than one hundred eighty (180) calendar days notice in writing to the other party unless a lesser time is mutually agreed upon in writing by both parties. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery.

b. Termination Because of Lack of Funds. In the event funds to finance this Agreement become unavailable, either party may terminate this Agreement upon no less than twenty-four (24) hours notice. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery.

c. Termination for Breach. This Agreement may be terminated by one party, upon no less than thirty (30) days notice, because of the other party's failure to perform an

obligation hereunder. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery. Waiver of breach of any provisions of this Agreement shall not be deemed to be a waiver of any other breach and shall not be construed to be a modification of the terms of this Agreement.

9. MISCELLANEOUS. The parties further agree:

a. Availability of Funds. If this Agreement, any renewal hereof, or any term, performance or payment hereunder, extends beyond the fiscal year beginning July 1, 2004, it is agreed that the performance and payment under this Agreement are contingent upon an annual appropriation by the Legislature, in accordance with section 287.0582, Florida Statutes.

b. Modification. This Agreement and its Attachments contain all of the terms and conditions agreed upon between the parties. Modifications of this Agreement shall be enforceable only when reduced to writing and signed by all parties.

c. Contract Managers. The name and address of the contract managers for the parties under this Agreement are as follows:

For the State:

William F. Mallett, Jr.
Assistant Director
Lee County Health Department

3920 Michigan Avenue
Fort Myers, FL 33916
(239) 332-9513

For the County:

Karen Hawes
Director
Lee County Human Services

83 Pondella Road
N. Fort Myers, FL 33093
(239) 652-7930

If different contract managers are designated after execution of this Agreement, the name, address and telephone number of the new representative shall be furnished in writing to the other parties and attached to originals of this Agreement.

d. Captions. The captions and headings contained in this Agreement are for the convenience of the parties only and do not in any way modify, amplify, or give additional notice of the provisions hereof.

In WITNESS THEREOF, the parties hereto have caused this 30-page agreement to be executed by their undersigned officials as duly authorized effective the 1st day of October 2003.

**BOARD OF COUNTY COMMISSIONERS
FOR LEE COUNTY**

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

SIGNED BY: _____

NAME: Ray Judah

TITLE: Chairman

DATE: _____

ATTESTED TO:

SIGNED BY: _____

NAME: _____

TITLE: _____

DATE: _____

SIGNED BY: _____

NAME: **John O. Agwunobi, M.D., M.B.A.**

TITLE: **Secretary**

DATE: _____

SIGNED BY: 

NAME: **Judith A. Hartner, M.D., M.P.H.**

TITLE: **CHD Director/Administrator**

DATE: Sep 16, 2003

ATTACHMENT I

LEE COUNTY HEALTH DEPARTMENT

PROGRAM SPECIFIC REPORTING REQUIREMENTS AND PROGRAMS REQUIRING COMPLIANCE WITH THE PROVISIONS OF SPECIFIC MANUALS

Some health services must comply with specific program and reporting requirements in addition to the Personal Health Coding Pamphlet (DHP 50-20), Environmental Health Coding Pamphlet (DHP 50-21) and FLAIR requirements because of federal or state law, regulation or rule. If a county health department is funded to provide one of these services, it must comply with the special reporting requirements for that service. The services and the reporting requirements are listed below:

	<u>Service</u>	<u>Requirement</u>
1.	Sexually Transmitted Disease Program	Requirements as specified in FAC 64D-3 and F.S. 384 and the CHD Guidebook Internal Operating Policy STD 6 and 7.
2.	Dental Health	Monthly reporting on DH Form 1008*.
3.	Special Supplemental Nutrition Program for Women, Infants and Children.	Service documentation and monthly financial reports as specified in DHM 150-24* and all federal, state and county requirements detailed in program manuals and published procedures.
4.	Healthy Start/ Improved Pregnancy Outcome	Requirements as specified in the Healthy Start Standards and Guidelines 1998 and as specified by the Health Start Coalitions in contract with each county health department.
5.	Family Planning	Periodic financial and programmatic reports as specified by the program office and in the CHD Guidebook, Internal Operating Policy FAMPLAN 14*
6.	Immunization	Periodic reports as specified by the department regarding the surveillance/investigation of reportable vaccine preventable diseases, vaccine usage accountability, the assessment of various immunization levels and forms reporting adverse events following immunization and Immunization Module quarterly quality audits and duplicate data reports.
7.	Chronic Disease Program	Requirements as specified in the Community Intervention Program (CIP) and the CHD Guidebook
8.	Environmental Health	Requirements as specified in DHP 50-4* and 50-21*
9.	HIV/AIDS Program	Requirements as specified in Florida Statute 384.25 and 64D-3.016 and 3.017 F.A.C. and the CHD Guidebook. Case reporting on CDC Forms 50.42B (Adult/ Adolescent) and 50.42A (Pediatric). Socio-demographic data on persons tested for HIV in CHD clinics should be reported on Lab Request Form 1628 or Post-Test Counseling Form 1633. These reports are to be sent to the Headquarters HIV/AIDS office within 5 days of the initial post-test counseling appointment or within 90 days of the missed post-test counseling appointment.

ATTACHMENT I (Continued)

10. School Health Services

HRSM 150-25*, including the requirement for an annual plan as a condition for funding.

*or the subsequent replacement if adopted during the contract period.

ATTACHMENT II

LEE COUNTY HEALTH DEPARTMENT
PART I. PLANNED USE OF COUNTY HEALTH UNIT TRUST FUND BALANCES

	Estimated State Share of CHD Trust Fund Balance as of 09/30/03	Estimated County Share of CHD Trust Fund Balance as of 09/30/03	Total
1. CHD Trust Fund Ending Balance 09/30/03	1,161,056	527,987	1,689,043
2. Drawdown for Contract Year October 1, 2003 to September 30, 2004	-	-	-
3. Special Capital Project use for Contract Year October 1, 2003 to September 30, 2004	-	-	-
4. State Funding for Information Technology Infrastructure	(123,066)		(123,066)
5. Balance Reserved for Contingency Fund of October 1, 2003 to September 30, 2004	1,037,990	527,987	1,565,977
Contract Total	14,541,100		
Percentage of Trust Fund by Funding Source and to Total Contract	66.28%	33.72%	10.77%

Note: The total of items 2, 3, 4 and 5 must equal the ending balance in item 1.

Funds designated for Special Capital Projects must be used for capital projects and durable goods without significant recurring costs. Examples of projects meeting this criteria include construction and renovation of facilities and associated infrastructure; purchase of information system hardware/software and purchase of telecommunications equipment. Examples of items not meeting this criteria include grant funds for direct services such as tobacco prevention and provision of child safety seats; staff salaries; retirement obligations; rent/leases and funds held in anticipation of Medicaid paybacks and/or budget reductions. Special capital project amounts in "3" above should reflect the total amount of funds anticipated to be expended for special capital projects during the contract year. This includes funds to complete unfinished projects from previous years as well as for projects initiated during the contract year. More detailed Special Capital Project information, including description and cost by each project, must be listed in Attachment V.

Pursuant to 154.02, F.S., at a minimum, the trust fund shall consist of: an operating reserve, consisting of 8.5 percent of the annual operating budget, maintained to ensure adequate cash flow from nonstate revenue sources.

ATTACHMENT II

**LEE COUNTY HEALTH DEPARTMENT
Part II. Sources of Contributions to County Health Department**

October 1, 2003 to September 30, 2004

	State CHD Trust Fund (cash)	County CHD Trust Fund (cash)	Total CHD Trust Fund (cash)	Other Contributions	Total	
1. GENERAL REVENUE - STATE						
015011	ALG/CONTRIBUTION TO CHDS-PRIMARY CARE	40,668	0	40,668	0	40,668
015011	ALG/PRIMARY CARE	526,264	0	526,264	0	526,264
015011	PRIMARY CARE SPECIAL PROJECT	0	0	0	0	0
015012	G/A EPILEPSY SERVICES	0	0	0	0	0
015048	ALG/CONTR TO CHDS-STD PROGRAM	41,636	0	41,636	0	41,636
015050	ALG/CESSPOOL IDENTIFICATION AND ELIMINATION	0	0	0	0	0
015050	ALG/CONTR TO CHDS	3,108,644	0	3,108,644	0	3,108,644
015050	ALG/CONTR TO CHDS-MIGRANT LABOR CAMP SANITATION	10,566	0	10,566	0	10,566
015050	ALG/CONTR. TO CHDS-DENTAL PROGRAM	6,500	0	6,500	0	6,500
015050	ALG/CONTR. TO CHDS-IMMUNIZATION OUTREACH TEAMS	30,285	0	30,285	0	30,285
015050	ALG/CONTR. TO CHDS-INDOOR AIR ASSIST PROG	0	0	0	0	0
015050	ALG/CONTR. TO CHDS-SOVEREIGN IMMUNITY	0	0	0	0	0
015050	CITIZENS AGAINST TOXIC EXPOSURE (CATE)	0	0	0	0	0
015050	COMMUNITY TB PROGRAM	106,403	0	106,403	0	106,403
015050	CONTR TO CHDS - DUVAL TEEN PREGNANCY PREVENTION	0	0	0	0	0
015050	FIRST STEP - MOTHERS AND INFANTS PROGRAM	0	0	0	0	0
015050	HEALTHY BEACHES MONITORING	22,377	0	22,377	0	22,377
015050	INTERDISCIPLINARY MANAGED CARE INITIATIVE	0	0	0	0	0
015050	LA LIGA CONTRA EL CANCER	0	0	0	0	0
015050	MANATEE COUNTY RURAL HEALTH SERVICES	0	0	0	0	0
015050	MEDIVAN PROJECT - ELDERLY INTEREST	0	0	0	0	0
015050	METRO ORLANDO URBAN LEAGUE TEENAGE PREG PREV	0	0	0	0	0
015050	RED LEGISLATION - GAP GRANT (CAT 050310)	0	0	0	0	0
015050	SPECIAL NEEDS SHELTER PROGRAM	0	0	0	0	0
015065	ALG/CONTR TO CHDS-AIDS PATIENT CARE	289,337	0	289,337	0	289,337
015065	ALG/CONTR TO CHDS-AIDS PREV & SURV & FIELD STAFF	81,954	0	81,954	0	81,954
015115	VOLUNTEER SCHOOL HEALTH NURSE GRANT	0	0	0	0	0
015123	ALG/FAMILY PLANNING	96,565	0	96,565	0	96,565
015124	ALG/IPO - OUTREACH SOCIAL WORKERS CAT. 050707	0	0	0	0	0
015124	ALG/IPO HEALTHY START	0	0	0	0	0
015124	ALG/IPO HEALTHY START/IPO CAT 050707	0	0	0	0	0
015124	ALG/IPO-INFANT MORTALITY PROJECT CAT. 050707	0	0	0	0	0
015124	ALG/MCH HEALTHY START/IPO CAT 050870	0	0	0	0	0
015124	ALG/MCH-INFANT MORTALITY PROJECT CAT. 050870	0	0	0	0	0
015124	ALG/MCH-OUTREACH SOCIAL WORKERS CAT 050870	0	0	0	0	0
015137	ALG/CONTR. TO CHDS-MCH HEALTH - FIELD STAFF COST	0	0	0	0	0
015137	HEALTHY START - DATA COLLECTION PROJECT STAFF	0	0	0	0	0
015140	ALG/SCHOOL HEALTH/SUPPLEMENTAL	0	0	0	0	0
015050	HEALTH PROMOTION AND EDUCATION INITIATIVE	58,823	0	58,823	0	58,823
GENERAL REVENUE TOTAL		4,420,022	0	4,420,022	0	4,420,022
2. NON GENERAL REVENUE - STATE						
001009	Debit Memo-Bad Checks	0	0	0	0	0
010304	Stationary Pollutant Storage Tanks	0	0	0	0	0
015000	TRANSFER	0	0	0	0	0
015010	ALG/CONTR TO CHDS-REBASING TOBACCO TF	2,773	0	2,773	0	2,773
015010	PNEUMOCOCCAL VACCINE STIPEND	40,000	0	40,000	0	40,000
015010	FL HEPATITIS & LIVER FAILURE PREVENTION/CONTROL	77,420	0	77,420	0	77,420

ATTACHMENT II

**LEE COUNTY HEALTH DEPARTMENT
Part II. Sources of Contributions to County Health Department**

October 1, 2003 to September 30, 2004

	State CHD Trust Fund (cash)	County CHD Trust Fund (cash)	Total CHD Trust Fund (cash)	Other Contributions	Total
2. NON GENERAL REVENUE - STATE					
015010	SUPER ACT PROGRAM ADM TF	0	0	0	0
015016	G/A EPILEPSY PREVENTION AND EDUCATION EPILEPSY TF	0	0	0	0
015020	FOOD AND WATERBORNE DISEASE PROGRAM ADM TF	0	0	0	0
015026	ALG/CONTR. TO CHDS-BIOMEDICAL WASTE/DEP ADM TF	54,627	0	54,627	54,627
015047	SUPER ACT PROGRAM (CAT 050329 OCA 9V000)ADMIN TF	0	0	0	0
015072	ALG/CONTR. TO CHDS-SAFE DRINKING WATER PRG/DEP ADM	37,205	0	37,205	37,205
015084	VARICELLA IMMUNIZATION REQUIREMENT TOBACCO TF	16,209	0	16,209	16,209
015170	TOBACCO COORDINATION	0	0	0	0
015172	FULL SERVICE SCHOOLS - TOBACCO TF	176,107	0	176,107	176,107
015174	BASIC SCHOOL HEALTH - TOBACCO TF	256,070	0	256,070	256,070
NON GENERAL REVENUE TOTAL	660,411	0	660,411	0	660,411
3. FEDERAL FUNDS - State					
007000	WINGATE DISEASE & SYMPTON PREVALENCE SURVEY	0	0	0	0
007000	CHDAD INDIRECT COST POOL	30,000	0	30,000	30,000
007000	COMPREHENSIVE CARDIOVASCULAR PROGRAM	0	0	0	0
007000	FEDERAL COASTAL BEACH MONITORING PROGRAM	21,126	0	21,126	21,126
007000	STATE PROGRAMS TO PREVENT OBESITY 2003-04	0	0	0	0
007030	PHBG/MIGRANT LABOR CAMP SANITATION	3,797	0	3,797	3,797
007044	PHBG/RAPE AWARENESS	0	0	0	0
007049	STD PROGRAM-CSPS	144,154	0	144,154	144,154
007049	STD PROGRAM-INFERTILITY PROJECT	0	0	0	0
007049	STD PROGRAM-MED & LAB SVCS TRNG CNTR	0	0	0	0
007049	STD PROGRAM-STD/PHY TRAINING CENTER	0	0	0	0
007049	STD PROGRAM-SYPHILIS ELIMINATION PROJECT	0	0	0	0
007051	FGTF/WIC ADMINISTRATION	1,384,947	0	1,384,947	1,384,947
007056	HEALTH PROGRAM FOR REFUGEES	0	0	0	0
007056	REFUGEE HEALTH TB TARGETED TESTING	0	0	0	0
007058	FGTF/DIABETES CONTROL	0	0	0	0
007062	FGTF/AIDS EPIDEMIOLOGICAL RESEARCH STUDY	0	0	0	0
007063	PHBG/COMPREHENSIVE COMM CARDIO HLTH PRGM	0	0	0	0
007064	AIDS SEROPREVALENCE	0	0	0	0
007064	EVAL INTEG HIV/AIDS SURV SYST PERFORMANCE	0	0	0	0
007064	FGTF/AIDS SURVEILLANCE	55,680	0	55,680	55,680
007065	AIDS PREVENTION	246,905	0	246,905	246,905
007066	FGTF/RYAN WHITE	142,845	0	142,845	142,845
007066	FGTF/RYAN WHITE - EMERGING COMMUNITIES	0	0	0	0
007066	FGTF/RYAN WHITE-AIDS DRUG ASSIST PROG-ADMIN	78,426	0	78,426	78,426
007066	FGTF/RYAN WHITE-CONSORTIA	0	0	0	0
007067	TUBERCULOSIS CONTROL - FEDERAL GRANT	256,967	0	256,967	256,967
007068	FGTF/AIDS INMATE INTERVENTION	0	0	0	0
007069	FGTF/AIDS MINORITY INVOLVEMENT IN HIV	0	0	0	0
007077	BIOTERR SURVEILLANCE & CAPACITY/US ATTACK 2002	18,011	0	18,011	18,011
007077	BIOTERR SURVEILLANCE & EPIDEMIOLOGY	91,001	0	91,001	91,001
007077	BIOTERRORISM NETWORK COMMUNICATIONS	0	0	0	0
007077	BIOTERRORISM PLANNING & READINESS	63,146	0	63,146	63,146
007084	FGTF/IMMUNIZATION ACTION PLAN	23,922	0	23,922	23,922
007084	FGTF/IMMUNIZATION-PROJECT FIELD STAFF	0	0	0	0

ATTACHMENT II

**LEE COUNTY HEALTH DEPARTMENT
Part II. Sources of Contributions to County Health Department**

October 1, 2003 to September 30, 2004

	State CHD Trust Fund (cash)	County CHD Trust Fund (cash)	Total CHD Trust Fund (cash)	Other Contributions	Total
3. FEDERAL FUNDS - State					
007084 FGTF/IMMUNIZATION-WIC LINKAGES	0	0	0	0	0
007084 IMMUNIZATION SPECIAL PROJECT	14,643	0	14,643	0	14,643
007084 IMMUNIZATION SUPPLEMENTAL - 2002	21,961	0	21,961	0	21,961
007084 SMALLPOX VACCINATION PROJECT	0	0	0	0	0
007085 FGTF/BREAST & CERVICAL CANCER-ADMIN/CASE MAN	0	0	0	0	0
007127 MCH BGTF-MCH/CHILD HEALTH	14,901	0	14,901	0	14,901
007127 MCH BGTF-MCH/CHILD HEALTH AGES 0-1 YR	0	0	0	0	0
007132 MCH BGTF-MCH/DENTAL PROJECTS	0	0	0	0	0
007133 FGTF/FAMILY PLANNING TITLE X SPECIAL INITIATIVES	0	0	0	0	0
007133 FGTF/FAMILY PLANNING-TITLE X	136,843	0	136,843	0	136,843
007134 MCH BGTF-GADSDEN SCHOOL CLINIC	0	0	0	0	0
007134 MCH BGTF-HEALTHY START IPO	0	0	0	0	0
007134 MCH BGTF-INFANT MORTALITY PROJECT	0	0	0	0	0
007134 MCH BGTF-OUTREACH SOCIAL WORKERS	0	0	0	0	0
007135 FGTF/ABSTINENCE EDUCATION PROGRAM	0	0	0	0	0
015021 MEDIPASS WAIVER-HLTHY STRT CLIENT SERVICES	0	0	0	0	0
015021 MEDIPASS WAIVER-SOBRA	0	0	0	0	0
015060 Entrant Reimbursement Transfer	0	0	0	0	0
015075 FULL SERVICE SCHOOLS-TANF	21,119	0	21,119	0	21,119
015075 KIDCARE OUTREACH REFUGEE-ENTRANT	0	0	0	0	0
015075 SCHOOL HEALTH-SUPPLEMENT-TANF	0	0	0	0	0
015075 DOT AND DOE GRANTS	8,686	0	8,686	0	8,686
015075 ENTRANT REIMBURSEMENT	14,000	0	14,000	0	14,000
FEDERAL FUNDS TOTAL	2,793,080	0	2,793,080	0	2,793,080

4. FEES ASSESSED BY STATE OR FEDERAL RULES - STATE

001026 Returned Check Ser Fees	0	0	0	0	0
001091 Communicable Disease Fees	191,650	0	191,650	0	191,650
001092 Environmental Health Fees	1,269,977	0	1,269,977	0	1,269,977
001092 OSDS Repair Permit	0	0	0	0	0
001092 OSDS Permit Fee	0	0	0	0	0
001092 I & M Zoned Operating Permit	0	0	0	0	0
001092 Aerobic Operating Permit	0	0	0	0	0
001092 Septic Tank Site Evaluation	0	0	0	0	0
001113 Mobile Home and Parks	45,763	0	45,763	0	45,763
001132 Food Hygiene Permit	38,475	0	38,475	0	38,475
001135 OSDS Variance Fee	4,550	0	4,550	0	4,550
001139 Migrant Housing Permit	2,175	0	2,175	0	2,175
001140 Biohazard Waste Permit	51,930	0	51,930	0	51,930
001142 Non SDWA Lab Sample	0	0	0	0	0
001144 Tanning Facilities	10,317	0	10,317	0	10,317
001145 Swimming Pools	162,000	0	162,000	0	162,000
001149 Body Piercing	3,150	0	3,150	0	3,150
001165 Private Water Constr Permit	0	0	0	0	0
001166 Public Water Annual Oper Permit	20,430	0	20,430	0	20,430
001166 Public Water Constr Permit	0	0	0	0	0
001166 Non-SDWA System Permit	0	0	0	0	0
001170 Lab Fee Chemical Analysis	0	0	0	0	0

ATTACHMENT II.

**LEE COUNTY HEALTH DEPARTMENT
Part II. Sources of Contributions to County Health Department**

October 1, 2003 to September 30, 2004

	State CHD Trust Fund (cash)	County CHD Trust Fund (cash)	Total CHD Trust Fund (cash)	Other Contributions	Total
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4. FEES ASSESSED BY STATE OR FEDERAL RULES - STATE

001211	Safe Drinking Water	96,000	0	96,000	0	96,000
010403	Fees-Copy of Public Doc	0	0	0	0	0
015052	Transfers-Mobile Home/RV Park	0	0	0	0	0

FEES ASSESSED BY STATE OR FEDERAL RULES TOTAL		1,896,417	0	1,896,417	0	1,896,417
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5. OTHER CASH CONTRIBUTIONS - STATE

090001	Draw down from Public Health Unit	0	0	0	0	0
015029	Transfers Intra Agency	56,550	0	56,550	0	56,550
015121	SUPER ACT REIMBURSEMENT	8,600	0	8,600	0	8,600
015139	Well Surveillance Reimbursement - Pesticide	600	0	600	0	600

OTHER CASH CONTRIBUTIONS TOTAL		65,750	0	65,750	0	65,750
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6. MEDICAID - STATE/COUNTY

001052	Medicaid Receipts - Part B	0	0	0	0	0
001056	CHD Incm:Medicaid-Pharmacy	184,815	265,185	450,000	0	450,000
001059	Medicaid EIP	0	0	0	0	0
001080	CHD Incm:Medicaid-Other	5,750	8,250	14,000	0	14,000
001081	CHD Incm:Medicaid-EPSDT	0	0	0	0	0
001082	CHD Incm:Medicaid-Dental	0	0	0	0	0
001083	CHD Incm:Medicaid-FP	8,784	79,056	87,840	0	87,840
001084	CHD Incm:Medicaid-Physician	2,875	4,125	7,000	0	7,000
001085	CHD Incm:Medicaid-Nursing	4,107	5,893	10,000	0	10,000
001086	CHD Incm:Co-Insurance	0	0	0	0	0
001087	CHD Incm:Medicaid-STD	0	0	0	0	0
001088	CHD Incm:Med Reimb AZT Disp Fee	0	0	0	0	0
001089	Medicaid AIDS	0	0	0	0	0
001147	Medicaid HMO Rate	0	0	0	0	0
001148	Medicaid-HMO Admin	0	0	0	0	0
001181	CHD Incm:Medicaid Transportation	0	0	0	0	0
001191	CHD Incm:Medicaid Maternity	0	0	0	0	0
001192	CHD Incm:Medicaid Comp. Child	0	0	0	0	0
001193	CHD Incm:Medicaid Comp. Adult	0	0	0	0	0
001194	CHD Incm:Medicaid Sonagram	0	0	0	0	0
001208	Medipass \$3.00 Adm. Fee	0	0	0	0	0

MEDICAID TOTAL		206,331	362,509	568,840	0	568,840
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7. ALLOCABLE REVENUE - STATE

018001	Refunds, Salary	500	0	500	0	500
018003	Refunds, other Personal Services	0	0	0	0	0
018004	Refunds, Expenses	200	0	200	0	200
018005	Refunds Grants to Local Gov't	0	0	0	0	0
018006	Refunds, Operating Capital Outlay	0	0	0	0	0
018010	Refunds, Special Category	0	0	0	0	0
018011	Refunds, Other	0	0	0	0	0
018013	DMS Refunds by Journal Transfer-65900	0	0	0	0	0
018099	Refunds, Certified Forward	0	0	0	0	0
029010	Sale of Fixed Assets	0	0	0	0	0

ATTACHMENT II.

**LEE COUNTY HEALTH DEPARTMENT
Part II. Sources of Contributions to County Health Department**

October 1, 2003 to September 30, 2004

	State CHD Trust Fund (cash)	County CHD Trust Fund (cash)	Total CHD Trust Fund (cash)	Other Contributions	Total
7. ALLOCABLE REVENUE - STATE					
037000 Prior Year Warrant	0	0	0	0	0
038000 12 Month Old Warrant	0	0	0	0	0
ALLOCABLE REVENUE TOTAL	700	0	700	0	700
8. OTHER STATE CONTRIBUTIONS NOT IN CHD TRUST FUND - STATE					
State Pharmacy Services	0	0	0	323,750	323,750
State Laboratory Services	0	0	0	535,290	535,290
State TB Services	0	0	0	0	0
State Immunization Services	0	0	0	556,312	556,312
State STD Services	0	0	0	0	0
State Construction/Renovation	0	0	0	0	0
WIC Food	0	0	0	5,570,176	5,570,176
AIDS Drug Assistance Program	0	0	0	1,446,523	1,446,523
Other (specify)	0	0	0	0	0
Other (specify)	0	0	0	0	0
Other (specify)	0	0	0	0	0
OTHER STATE CONTRIBUTIONS TOTAL	0	0	0	8,432,051	8,432,051
9. DIRECT COUNTY CONTRIBUTIONS - COUNTY					
008030 Grants-County Tax Direct	0	0	0	0	0
008034 Grants Cnty Commn Other	0	1,110,000	1,110,000	0	1,110,000
BOARD OF COUNTY COMMISSIONERS TOTAL	0	1,110,000	1,110,000	0	1,110,000
10. FEES AUTHORIZED BY COUNTY ORDINANCE OR RESOLUTION - COUNTY					
001004 Child Car Seat Prog	0	0	0	0	0
001060 Vital Statistics Fees Other	0	0	0	0	0
001062 Rabies Vaccine	0	20,000	20,000	0	20,000
001062 Rabies Vaccine	0	0	0	0	0
001074 Adult Enter. Permit Fees	0	0	0	0	0
001077 Primary Care Fees	0	230,000	230,000	0	230,000
001093 Communicable Disease Fees	0	40,000	40,000	0	40,000
001094 Environmental Health Fees	0	869,850	869,850	0	869,850
001114 New Birth Certificates	0	62,000	62,000	0	62,000
001115 Death Certificates	0	400,000	400,000	0	400,000
001116 Computer Access Fee	0	0	0	0	0
001117 Vital Stats-Adm. Fee 50 cents	0	4,500	4,500	0	4,500
001195 Primary Care Transfer Fees	0	0	0	0	0
001196 Water Analysis-Potable	0	0	0	0	0
FEES AUTHORIZED BY COUNTY TOTAL	0	1,626,350	1,626,350	0	1,626,350
11. OTHER CASH AND LOCAL CONTRIBUTIONS - COUNTY					
001000 Fees Other	0	0	0	0	0
001010 Recovery-Bad Checks	0	0	0	0	0
001026 Returned Check Fee	0	0	0	0	0
001029 Third Party Reimbursement	0	0	0	0	0
001072 Ryan White Title I	0	0	0	0	0

ATTACHMENT II.

**LEE COUNTY HEALTH DEPARTMENT
Part II. Sources of Contributions to County Health Department**

October 1, 2003 to September 30, 2004

	State CHD Trust Fund (cash)	County CHD Trust Fund (cash)	Total CHD Trust Fund (cash)	Other Contributions	Total	
11. OTHER CASH AND LOCAL CONTRIBUTIONS - COUNTY						
001073	Ryan White Title II	0	23,000	23,000	0	23,000
001075	Ryan White Title III	0	0	0	0	0
001090	Medicare	0	88,000	88,000	0	88,000
001190	Health Maintenance Organ. (HMO)	0	0	0	0	0
005040	Interest Earned	0	25,001	25,001	0	25,001
005041	Interest Earned-State Investment Account	0	0	0	0	0
007010	U.S. Grants Direct	0	50,000	50,000	0	50,000
008010	Grants Contracts Frm Cities Direct	0	0	0	0	0
008031	County AIDS Education	0	0	0	0	0
008033	County Contributions For Facilities	0	0	0	0	0
008050	Grants-Cnty Sch Board Direct	0	0	0	0	0
008090	Grants other Local Govn't Direct	0	857,435	857,435	0	857,435
008094	Grnts/Contracts other Agencies Direct	0	0	0	0	0
008095	Grants Cnty Sect 403.102 Air Pol	0	0	0	0	0
008099	Reimb/Rebate Local Govn't	0	0	0	0	0
010300	Sale of Goods and Services	0	0	0	0	0
010301	Exp Witness Fee Consultnt Charges	0	0	0	0	0
010302	Sale of Goods and Services, to Other Agencies	0	0	0	0	0
010402	Recycle Paper Sales	0	0	0	0	0
010403	Fees-Copies of Documents	0	1,400	1,400	0	1,400
010405	Sale of pharmaceuticals	0	45,000	45,000	0	45,000
010408	Copy Fess Intra/Inter Agency	0	0	0	0	0
010409	Sale of Goods and Services Outside State Government	0	0	0	0	0
011001	Healthy Start Coalition Contributions	0	115,578	115,578	0	115,578
011007	Cash Donations Private	0	0	0	0	0
011098	Donation School Based Clinic	0	0	0	0	0
011099	Other Grants/Donations Direct	0	500	500	0	500
011522	Other Grant DOE	0	0	0	0	0
012020	Fines and Forfeitures	0	46,270	46,270	0	46,270
012021	Return Check Charge	0	200	200	0	200
028010	Insurance Recoveries-Fire Losses	0	0	0	0	0
028010	Insurance Recoveries-Fire Losses	0	0	0	0	0
028020	Insurance Recoveries-Other	0	0	0	0	0
090002	Draw down from Public Health Unit	0	0	0	0	0
001015	Recovery of Collection of Agency Placements	0	0	0	0	0
011066	Ryan White Local Revenues	0	0	0	0	0
011067	AIDS Insurance Continuation Project	0	0	0	0	0
OTHER CASH AND LOCAL CONTRIBUTIONS TOTAL		0	1,252,384	1,252,384	0	1,252,384
12. ALLOCABLE REVENUE - COUNTY						
018001	Refunds, Salary	0	0	0	0	0
018003	Refunds, other Personal Services	0	0	0	0	0
018004	Refunds, Expenses	0	0	0	0	0
018005	Refunds Grants to Local Gov't	0	0	0	0	0
018006	Refunds, Operating Capital Outlay	0	0	0	0	0
018010	Refunds, Special Category	0	0	0	0	0
018011	Refunds, Other	0	0	0	0	0
018013	DMS Refunds by Journal Transfer-65900	0	0	0	0	0

ATTACHMENT II.

**LEE COUNTY HEALTH DEPARTMENT
Part II. Sources of Contributions to County Health Department**

October 1, 2003 to September 30, 2004

	State CHD Trust Fund (cash)	County CHD Trust Fund (cash)	Total CHD Trust Fund (cash)	Other Contributions	Total
12. ALLOCABLE REVENUE - COUNTY					
018099 Refunds, Certified Forward	0	0	0	0	0
029010 Sale of Fixed Assets	0	0	0	0	0
037000 Prior Year Warrant	0	0	0	0	0
038000 12 Month Old Warrant	0	0	0	0	0
COUNTY ALLOCABLE REVENUE TOTAL	0	0	0	0	0
13. BUILDINGS - COUNTY					
Janitorial Services	0	0	0	90,000	90,000
Other Contractual Services	0	0	0	75,000	75,000
Annual Rental Equivalent Value	0	0	0	333,074	333,074
Electric (70,000) - Water and Sewer (18,000)	0	0	0	88,000	88,000
Trash, Garbage, and Sludge	0	0	0	5,000	5,000
Land, Building and Parking Rental - Danley	0	0	0	31,008	31,008
Internal Repair and Maintenance	0	0	0	25,000	25,000
BUILDINGS TOTAL	0	0	0	647,082	647,082
14. OTHER COUNTY CONTRIBUTIONS NOT IN CHD TRUST FUND - COUNTY					
Self-Insurance Assessment - Auto Insurance -1036	0	0	0	9,114	9,114
Self-Insurance Assessment - Property Insurance - 1037	0	0	0	13,996	13,996
Internal Phone Line and Phone Usage (IGS - Var)	0	0	0	6,646	6,646
Fleet Management - Vehicle Purchase	0	0	0	234,000	234,000
Other Grants and Aids - Healthy Kids	0	0	0	25,000	25,000
OTHER COUNTY CONTRIBUTIONS TOTAL	0	0	0	288,756	288,756
GRAND TOTAL CHD PROGRAM	10,042,711	4,351,243	14,393,954	9,367,889	23,761,843

ATTACHMENT II

LIFE COUNTY HEALTH DEPARTMENT

Part III, Planned Staffing, Clients, Services, And Expenditures By Program Service Area Within Each Level Of Service

October 1, 2003 to September 30, 2004

Quarterly Expenditure Plan

FFY's Clients	1st	2nd	3rd	4th	FFY's Services (0.00)	FFY's Clients	1st	2nd	3rd	4th	Grand Total
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(Whole dollars only)

County

State

Total

A. COMMUNICABLE DISEASE CONTROL:

Immunization (101)	15.82	13,881	50,000	258,618	219,387	258,618	309,386	573,869	472,140	1,046,009
STD (102)	11.06	2,103	22,070	141,223	121,049	141,223	121,049	172,444	352,100	524,544
A.I.D.S. (103)	14.95	458	5,999	354,434	303,800	354,434	303,896	204,502	1,112,062	1,316,564
TB Control Services (104)	15.26	577	15,901	262,046	224,610	262,045	224,610	104,463	868,848	973,311
Comm. Disease Surv. (106)	9.75	0	4,800	173,795	148,967	173,795	148,967	107,958	537,566	645,524
Hepatitis Prevention (109)	2.47	923	3,614	26,268	22,515	26,268	22,515	5,953	91,613	97,566
Public Health Preparedness and Response (116)	5.24	0	400	74,821	64,133	74,821	64,133	51,264	226,644	277,908
Vital Statistics (180)	4.45	0	0	48,366	51,457	48,366	51,457	200,111	0	200,111
COMMUNICABLE DISEASE SUBTOTAL	79.00	17,942	102,784	1,339,571	1,155,918	1,339,571	1,155,918	1,420,564	3,660,973	5,081,537

B. PRIMARY CARE:

Chronic Disease Services (210)	3.51	8,298	9,291	40,979	35,125	40,979	35,124	79,498	72,709	152,207
Tobacco Prevention (212)	1.70	0	434	20,956	17,962	20,956	17,961	0	77,835	77,835
Home Health (215)	0.00	0	0	0	0	0	0	0	0	0
W.I.C. (221)	41.94	18,432	121,062	426,115	365,242	426,115	365,243	0	1,582,715	1,582,715
Family Planning (223)	28.50	5,506	17,088	316,397	270,483	316,397	270,482	247,343	926,416	1,173,759
Improved Pregnancy Outcome (225)	0.00	0	0	0	0	0	0	0	0	0
Healthy Start Prenatal (227)	7.96	1,568	17,088	110,672	94,862	110,672	94,862	328,901	82,167	411,068
Comprehensive Child Health (229)	1.75	275	693	78,130	66,969	78,130	66,969	51,876	238,322	290,198
Healthy Start Infant (231)	6.67	1,040	13,083	95,103	80,803	95,103	80,803	146,010	205,802	351,812
School Health (234)	9.00	0	800,000	145,243	124,494	145,243	124,493	93,405	446,068	539,473
Comprehensive Adult Health (237)	5.19	2,157	2,503	149,192	127,879	149,192	127,878	264,918	289,223	554,141
Dental Health (240)	0.00	0	50	2,395	2,053	2,395	2,052	0	8,895	8,895
PRIMARY CARE SUBTOTAL	106.22	37,276	981,292	1,385,182	1,185,872	1,385,182	1,185,867	1,211,951	3,930,152	5,142,103

C. ENVIRONMENTAL HEALTH:

Coastal Beach Monitoring (347)	0.58	0	250	4,904	4,204	4,904	4,204	43	18,173	18,216
Limited Use Public Water Systems (357)	9.05	1,732	19,197	124,182	106,442	124,182	106,443	157,417	303,832	461,249
Public Water System (358)	12.65	1,162	20,975	172,361	147,738	172,361	147,738	255,092	385,106	640,198
Private Water System (359)	0.00	0	0	0	0	0	0	0	0	0
Individual Sewage Disp. (361)	31.86	15,000	27,000	411,377	353,324	411,377	361,589	447,262	1,090,404	1,537,667
Group Total	54.14	17,894	67,422	712,824	611,708	712,824	619,974	859,815	1,797,515	2,657,330

Facility Programs

Food Hygiene (348)	2.49	263	1,172	34,294	29,395	34,294	29,395	45,625	81,753	127,378
Body Art (349)	0.05	10	20	950	887	950	887	3,674	0	3,674
Group Care Facility (351)	2.28	463	975	26,731	22,914	26,733	22,914	72,987	26,305	99,292
Migrant Labor Camp (352)	0.70	10	100	5,453	4,674	5,453	4,675	19,860	395	20,255
Housing, Public Bldg Safety, Sanitation (353)	0.01	0	4	300	300	300	300	600	600	1,200
Mobile Home and Parks Services (354)	1.35	154	392	10,492	8,993	10,492	8,993	2,601	36,369	38,970
Swimming Pools/Bathing (360)	7.77	1,925	6,100	107,367	92,030	107,367	92,029	166,137	232,656	398,793
Biomedical Waste Services (364)	3.06	1,500	1,875	51,133	43,829	51,133	43,829	31,438	158,486	189,924
Tanning Facility Services (369)	0.35	63	153	6,058	5,192	6,058	5,192	15,243	7,257	22,500

ATTACHMENT II

LEE COUNTY HEALTH DEPARTMENT

Part III. Planned Staffing, Clients, Services, And Expenditures By Program Service Area Within Each Level Of Service

October 1, 2003 to September 30, 2004

	FTE's (0.00)	Clients Units	Services	Quarterly Expenditure Plan				County	State	Grand Total
				1st	2nd (Whole dollars only)	3rd	4th			
C. ENVIRONMENTAL HEALTH:										
Group Total	18.06	4,388	10,791	242,778	208,214	242,780	208,214	358,165	543,821	901,986
Groundwater Contamination										
Storage Tank Compliance (355)	0.00	0	0	0	0	0	0	0	0	0
Super Act Service (356)	0.35	0	303	5,180	4,442	5,180	4,440	4,793	14,449	19,242
Group Total	0.35	0	303	5,180	4,442	5,180	4,440	4,793	14,449	19,242
Community Hygiene										
Occupational Health (344)	0.00	0	0	0	0	0	0	0	0	0
Consumer Product Safety (345)	0.00	0	0	0	0	0	0	0	0	0
Emergency Medical (346)	6.30	0	2,095	83,080	73,025	83,080	73,026	218,349	93,862	312,211
Lead Monitoring Services (350)	0.11	5	8	2,031	1,741	2,031	1,741	5,985	1,559	7,544
Public Sewage (362)	0.00	0	0	0	0	0	0	0	0	0
Solid Waste Disposal (363)	0.00	0	0	0	0	0	0	0	0	0
Sanitary Nuisance (365)	0.02	2	9	718	616	718	616	2,355	313	2,668
Rabies Surveillance/Control Services (366)	0.00	0	0	0	0	0	0	0	0	0
Arbovirus Surveillance (367)	0.00	0	0	0	0	0	0	0	0	0
Rodent/Arthropod Control (368)	0.00	0	0	0	0	0	0	0	0	0
Water Pollution (370)	0.02	0	0	482	413	482	413	1,730	60	1,790
Air Pollution (371)	0.30	0	4	2,210	1,894	2,210	1,894	8,208	0	8,208
Radiological Health (372)	0.01	0	0	248	212	248	211	912	7	919
Toxic Substances (373)	0.00	0	0	0	0	0	0	0	0	0
Group Total	6.76	7	2,116	88,769	77,901	88,769	77,901	237,539	95,801	333,340
ENVIRONMENTAL HEALTH SUBTOTAL	79.31	22,289	80,632	1,049,551	902,265	1,049,553	910,529	1,460,312	2,451,586	3,911,898
D. SPECIAL CONTRACTS:										
Special Contracts (599)	0.00	0	0	69,573	59,635	69,573	59,635	258,416	0	258,416
SPECIAL CONTRACTS SUBTOTAL	0.00	0	0	69,573	59,635	69,573	59,635	258,416	0	258,416
TOTAL CONTRACT	264.53	77,507	1,164,708	3,843,877	3,303,690	3,844,343	3,402,044	4,351,243	10,042,711	14,393,954

ATTACHMENT III

LEE COUNTY HEALTH DEPARTMENT

CIVIL RIGHTS CERTIFICATE

The applicant provides this assurance in consideration of and for the purpose of obtaining federal grants, loans, contracts (except contracts of insurance or guaranty), property, discounts, or other federal financial assistance to programs or activities receiving or benefiting from federal financial assistance. The provider agrees to complete the Civil Rights Compliance Questionnaire, DH Forms 946 A and B (or the subsequent replacement if adopted during the contract period), if so requested by the department.

The applicant assures that it will comply with:

1. Title VI of the Civil Rights Act of 1964, as amended, 42 U.S.C., 2000 Et seq., which prohibits discrimination on the basis of race, color or national origin in programs and activities receiving or benefiting from federal financial assistance.
2. Section 504 of the Rehabilitation Act of 1973, as amended, 29 U.S.C. 794, which prohibits discrimination on the basis of handicap in programs and activities receiving or benefiting from federal financial assistance.
3. Title IX of the Education Amendments of 1972, as amended, 20 U.S.C. 1681 et seq., which prohibits discrimination on the basis of sex in education programs and activities receiving or benefiting from federal financial assistance.
4. The Age Discrimination Act of 1975, as amended, 42 U.S.C. 6101 et seq., which prohibits discrimination on the basis of age in programs or activities receiving or benefiting from federal financial assistance.
5. The Omnibus Budget Reconciliation Act of 1981, P.L. 97-35, which prohibits discrimination on the basis of sex and religion in programs and activities receiving or benefiting from federal financial assistance.
6. All regulations, guidelines and standards lawfully adopted under the above statutes. ~~The applicant agrees that compliance with this assurance constitutes a condition of continued receipt of or benefit from federal financial assistance, and that it is binding upon the applicant, its successors, transferees, and assignees for the period during which such assistance is provided.~~ The applicant further assures that all contracts, subcontractors, subgrantees or others with whom it arranges to provide services or benefits to participants or employees in connection with any of its programs and activities are not discriminating against those participants or employees in connection with any of its programs and activities are not discriminating against those participants or employees in violation of the above statutes, regulations, guidelines, and standards. In the event of failure to comply, the applicant understands that the grantor may, at its discretion, seek a court order requiring compliance with the terms of this assurance or seek other appropriate judicial or administrative relief, to include assistance being terminated and further assistance being denied.

ATTACHMENT IV
LEE COUNTY HEALTH DEPARTMENT
FACILITIES UTILIZED BY THE COUNTY HEALTH DEPARTMENT

<u>Facility Description</u>	<u>Location</u>	<u>Owned By</u>
Michigan Clinic	3920 Michigan Avenue Fort Myers, FI 33916	County
Lehigh Clinic	391 Lee Boulevard #200 Lehigh Acres, FI 33936	Leased
Environmental Engineering	60 Danley Drive, Unit 1 Fort Myers, FI 33907	County
WIC and Nutrition	3691 Evans Avenue Fort Myers, FI 33901	Leased
North Annex Clinic	83 Pondella Road North Fort Myers, FI 33903	County
Environmental Engineering Environmental Health	1039 S. E. 9 th Place Cape Coral, FI 33990	Leased
WIC and Nutrition	4450 Bonita Beach Road Unit 15 Bonita Springs, FI 33923	Leased
McGregor Clinic Inc.	2506 Second Street Fort Myers, FI 33901	Leased

LEE COUNTY HEALTH DEPARTMENT

ATTACHMENT V

DESCRIPTION OF USE OF CHD TRUST FUND BALANCES
FOR SPECIAL PROJECTS, IF APPLICABLE
(From Attachment II, Part I)

None

DESCRIPTION OF SPECIAL CONTRACTS
(Please list separately)

Special contracts are contracts for services for which there are no comparable services in the county health department core programs; no service codes in Departmental coding manuals; projects that are locally designed and have no standard statewide set of services and therefore cannot be accounted for within existing county health department programs. These contracts are coded to SAMAS Level 599 and include some contracts formerly handled at the district offices such as Epilepsy, colposcopy, Project WARM, community planning and special family planning and teen mother projects.

The Lee County Health Department has created Medicaid Outreach positions at area medical facilities to aid uninsured people receive Medicaid eligibility coverage, and therefore provide a funding source for medical facilities and doctors to receive compensation for their care these individuals.

ATTACHMENT VI

LEE COUNTY HEALTH DEPARTMENT

ESTIMATE OF ENVIRONMENTAL HEALTH FEES FISCAL YEAR 2003 - 2004

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	ORG L4/L5	EO	OBJECT CODE	Est. Ann. Revenue Accruing to CHD Trust Fund
PUBLIC SWIMMING POOLS AND BATHING PLACES						162,000.00
1. Annual Permit - Up to (and including) 25,000 gallons	75.00	67.50	XX-360	DK	001145	
1a. Transfer to headquarters		7.50	99-910	SM	001205	
2. More than 25,000 gallons	160.00	144.00	XX-360	DK	001145	
2a. Transfer to headquarters		16.00	99-910	SM	001205	
3. Exempted Condo Pools (over 32 units)	50.00	45.00	XX-360	DK	001145	
3a. Transfer to headquarters		5.00	99-910	SM	001205	
OTHER FEES						
Collected by the 13 delegated counties						
Broward, Dade, Duval, Hillsborough, Lee, Manatee, Collier, Palm Beach, Pinellas, Polk, Sarasota, Volusia, Escambia. Permits and variances for Okaloosa, Santa Rosa, Walton, Bay, Homes, and Washington Counties are processed by Escambia County and variances and permits for Pasco County are processed by Pinellas County as follows:						
1. Plan review (new construction)	275.00	275.00	XX-360	DK	001092	
2. Plan review for modification of original construction	100.00	100.00	XX-360	DK	001092	
3. Plan/application review for bathing place development	275.00	275.00	XX-360	DK	001092	
4. Initial operating permit	125.00	125.00	XX-360	DK	001092	
5. Variance applications	240.00	216.00	XX-360	DK	001092	
5.a. Transfer to Headquarters		24.00	99-910	SM	001205	
All other counties are to send the fee to Bureau of Water Programs in Tallahassee or the Environmental Engineering section in Orlando as follows:						
1. Plan review (new construction)	275.00	275.00	00-000	SM	001044	
2. Plan review for modification of original construction	100.00	100.00	00-000	SM	001044	
3. Plan/application review for bathing place development	275.00	275.00	00-000	SM	001044	
4. Initial operating permit	125.00	125.00	00-000	SM	001044	
5. Variance applications	240.00	240.00	00-000	SM	001044	
MOBILE HOME & RECREATIONAL VEHICLE PARKS						45,763.00
(FEES ARE PRORATED ON A QUARTERLY BASIS)						
1. Annual permit for 5 to 14 spaces	50.00	45.00	XX-354	DK	001113	
1a. Transfer to headquarters		5.00	99-910	MP	001113	
2. Annual permit for 15 to 171 spaces	3.50 per space		XX-354	DK	001113	
2a. Transfer to headquarters		10%	99-910	MP	001113	
3. Annual permit for 172 and above spaces	600.00	540.00	XX-354	DK	001113	
3a. Transfer to headquarters		60.00	99-910	MP	001113	
MIGRANT LABOR CAMPS						2,175.00
1. Annual permit for facilities with 5-50 occupants	125.00	125.00	XX-352	DK	001139	
2. Annual permit for facilities with 51-100 occupants	225.00	225.00	XX-352	DK	001139	

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	ORG L4/L5	EO	OBJECT CODE	Est. Ann. Revenue Accruing to CHD Trust Fund
3. Annual permit for facilities with over 100 occupants	500.00	500.00	XX-352	DK	001139	
BIOMEDICAL WASTE GENERATORS						51,930.00
1. Initial permit	55.00	55.00	XX-364	DK	001140	
2. Renewal of annual permit except physician office generating less than 25lbs/30 days) postmarked by October 1	55.00	55.00	XX-364	DK	001140	
2. Renewal of annual permit except facilities generating (less than 25lbs/30 days) postmarked after October 1	75.00	75.00	XX-364	DK	001140	
3. Storage facilities permit postmarked by October 1	55.00	55.00	XX-364	DK	001140	
3. Storage facilities permit postmarked after October 1	75.00	75.00	XX-364	DK	001140	
4. Treatment facilities operating permit by October	55.00	55.00	XX-364	DK	001140	
4. Treatment facilities operating permit after October 1	75.00	75.00	XX-364	DK	001140	
5. Transporter registration (one vehicle) postmarked by 10/1	55.00	55.00	XX-364	DK	001140	
5. Transporter registration (one vehicle) after 10/1	75.00	75.00	XX-364	DK	001140	
6. Transporter registration additional vehicle	10.00	10.00	XX-364	DK	001140	
TANNING FACILITIES						10,317.00
1. Annual license fee	150.00	135.00	XX-369	DK	001144	
1a. Transfer to headquarters		15.00	99-910	TN	001144	
2. Fee for each additional device	55.00	49.50	XX-369	DK	001144	
2a. Transfer to headquarters		5.50	99-910	TN	001144	
3. Late fee	25.00	25.00	XX-369	DK	001092	
BODY PIERCING						3,150.00
1. Annual License Fee	150.00	135.00	XX-349	DK	001149	
1a. Transfer to headquarters		15.00	99-910	IE	001149	
2. Temporary Establishment	75.00	67.50	XX-349	DK	001149	
2a. Transfer to headquarters		7.50	99-910	IE	001149	
3. Late fee	100.00	100.00	XX-349	DK	001149	
FOOD ESTABLISHMENTS						38,475.00
1. Annual Permit for Fraternal/Civic	160.00	144.00	XX-348	DK	001132	
1a. Transfer to headquarters		16.00	99-910	FP	001132	
2. Annual Permit School Cafeteria Operating for 9 months or less	130.00	117.00	XX-348	DK	001132	
2a. Transfer to headquarters		13.00	99-910	FP	001132	
3. Annual Permit School Cafeteria Operating for more than 9 months	160.00	144.00	XX-348	DK	001132	
3a. Transfer to headquarters		16.00	99-910	FP	001132	
4. Annual Permit for Hospital/Nursing Food Service	210.00	189.00	XX-348	DK	001132	
4a. Transfer to headquarters		21.00	99-910	FP	001132	
5. Annual Permit for Movie Theaters	160.00	144.00	XX-348	DK	001132	
5a. Transfer to headquarters		16.00	99-910	FP	001132	
6. Annual Permit for Jails/Prisons	210.00	189.00	XX-348	DK	001132	
6a. Transfer to headquarters		21.00	99-910	FP	001132	
7. Annual Permit for Bars/Lounges (Drink Service Only)	160.00	144.00	XX-348	DK	001132	
7a. Transfer to headquarters		16.00	99-910	FP	001132	
8. Annual Permit for Residential Facilities	110.00	99.00	XX-348	DK	001132	
8a. Transfer to headquarters		11.00	99-910	FP	001132	
9. Annual Permit for Child Care Centers without C&F license	85.00	76.50	XX-348	DK	001132	
9a. Transfer to headquarters		8.50	99-910	FP	001132	

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	ORG L4/L5	EO	OBJECT CODE	Est. Ann. Revenue Accruing to CHD Trust Fund
10. Annual Permit for Limited Food Service	85.00	76.50	XX-348	DK	001132	
10a. Transfer to headquarters		8.50	99-910	FP	001132	
11. Annual Permit Other Food Service	160.00	144.00	XX-348	DK	001132	
11a. Transfer to headquarters		16.00	99-910	FP	001132	
12. Plan Review	\$35/hour	\$35/hour	XX-348	DK	001092	
13. Food Worker Training	10.00	10.00	XX-348	DK	001092	
14. Request for Inspection	40.00	40.00	XX-348	DK	001092	
15. Re-inspection (after the first reinspection)	30.00	30.00	XX-348	DK	001092	
16. Late Renewal	25.00	25.00	XX-348	DK	001092	
17. Alcoholic Beverage Inspection Approval	30.00	30.00	XX-348	DK	001092	
ONSITE SEWAGE DISPOSAL PROGRAM (OSTDS)						1,274,527.00
1. Application for permitting of an onsite sewage treatment and disposal system which includes application and plan review for new and repair permits	25.00	23.00	XX-361	DK	001092	
1a. Transfer to headquarters		2.00	99-910	ST	001203	
2. Application for permitting of a new Performance-based treatment system	125.00	115.00	XX-361	DK	001092	
2a. Transfer to headquarters		10.00	99-910	ST	001203	
3. Site evaluation for a new system	60.00	55.20	XX-361	DK	001092	
3a. Transfer to headquarters		4.80	99-910	ST	001203	
4. Site evaluation for a system repair or modification of system	40.00	36.80	XX-361	DK	001092	
4a. Transfer to headquarters		3.20	99-910	ST	001203	
5. Site re-evaluation, new or repair or modification	40.00	36.80	XX-361	DK	001092	
5a. Transfer to headquarters		3.20	99-910	ST	001203	
6. Permit for new systems, or modification to system	55.00	50.60	XX-361	DK	001092	
6a. Transfer to headquarters		4.40	99-910	ST	001203	
7. New system or system modification installation inspection	55.00	50.60	XX-361	DK	001092	
7a. Transfer to headquarters		4.40	99-910	ST	001203	
8. Research fee to be collected in addition, and concurrent with the permit for a new system installation fee.	5.00	5.00	99-910	RF	001201	
9. Repair permit issuance which includes inspection	50.00	41.40	XX-361	DK	001092	
9a. Transfer to headquarters		3.60	99-910	ST	001203	
9b. Transfer to headquarters for training center		5.00	99-910	TC	001067	
10. Inspection of system previously in use	50.00	46.00	XX-361	DK	001092	
10a. Transfer to headquarters		4.00	99-910	ST	001203	
11. Reinspection fee per visit for site inspections after system construction approval	25.00	23.00	XX-361	DK	001092	
11a. Transfer to headquarters		2.00	99-910	ST	001203	
12. Installation reinspection of non-compliant system per each site visit	25.00	23.00	XX-361	DK	001092	
12a. Transfer to headquarters		2.00	99-910	ST	001203	
13. System abandonment permit, includes permit issuance and inspection	40.00	36.80	XX-361	DK	001092	
13a. Transfer to headquarters		3.20	99-910	ST	001203	
14. Annual operating permit fee for systems in IM and equivalent areas, and for systems receiving commercial waste	150.00	138.00	XX-361	DK	001092	
14a. Transfer to headquarters		12.00	99-910	ST	001203	
15. Amendments or changes to the operating permit during	25.00	23.00	XX-361	DK	001092	

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	ORG L4/L5	EO	OBJECT CODE	Est. Ann. Revenue Accruing to CHD Trust Fund
the permit period per change or amendment						
15a. Transfer to headquarters		2.00	99-910	ST	001203	
16. Aerobic treatment unit operating permit (biennial)	100.00	92.00	XX-361	DK	001092	
16a. Transfer to headquarters		8.00	99-910	ST	001203	
17. Biennial operating permit fee for performance-based treatment systems.	100.00	92.00	XX-361	DK	001092	
A prorated fee is to be charged beginning with second year of operation.						
17a. Transfer to headquarters		8.00	99-910	ST	001203	
18. Review of application due to proposed amendments or changes after initial operating permit issuance for a performance-based treatment system	75.00	69.00	XX-361	DK	001092	
18a. Transfer to headquarters		6.00	99-910	ST	001203	
19. Tank manufacturer's inspection per annum	100.00	50.00	XX-361	DK	001092	
19a. Transfer to headquarters		50.00	99-910	ST	001203	
20. Septage disposal service permit per annum	50.00	46.00	XX-361	DK	001092	
20a. Transfer to headquarters		4.00	99-910	ST	001203	
21. Additional charge per pump out vehicle	25.00	23.00	XX-361	DK	001092	
21a. Transfer to headquarters		2.00	99-910	ST	001203	
22. Portable or temporary toilet service permit per annum	50.00	46.00	XX-361	DK	001092	
22a. Transfer to headquarters		4.00	99-910	ST	001203	
23. Additional charge per pump out vehicle	25.00	23.00	XX-361	DK	001092	
23a. Transfer to headquarters		2.00	99-910	ST	001203	
24. Septage stabilization facility inspection fee per annum	150.00	138.00	XX-361	DK	001092	
24a. Transfer to headquarters		12.00	99-910	ST	001203	
24. Septage disposal site evaluation fee per annum	100.00	92.00	XX-361	DK	001092	
24a. Transfer to headquarters		8.00	99-910	ST	001203	
24. Aerobic treatment unit maintenance entity permit per annum	25.00	23.00	XX-361	DK	001092	
24a. Transfer to headquarters		2.00	99-910	ST	001203	
25. Variance application for a single family residence per each lot or building site	150.00	75.00	XX-361	DK	001135	
25a. Transfer to headquarters		75.00	99-910	CR	001204	
26. Variance application for a multi-family or commercial building per each building site	200.00	100.00	XX-361	DK	001135	
26a. Transfer to headquarters		100.00	99-910	CR	001204	
27. Inspection for construction of an injection well (FL Keys)	125.00	125.00	XX-361	DK	001092	
FEE COLLECTED AT HEADQUARTERS - Onsite Sewage Program						
1. Application for Innovative product approval	500.00					For headquarters use only
2. Application for registration including initial examination	75.00					For headquarters use only
3. Initial registration	100.00					For headquarters use only
4. Renewal registration	100.00					For headquarters use only
5. Certificate of authorization each two year period	250.00					For headquarters use only
DRINKING WATER						20,430.00
1. First Year Public Water Annual Operation Permit and Construction Permit - Limited Use	75.00	67.50	XX-357	DK	001166	
1a. Transfer to headquarters		7.50	99-910	64	001166	
2. Second Year Public Water Annual Operation Permit - Limited Use	70.00	63.00	XX-357	DK	001166	
2a. Transfer to headquarters		7.00	99-910	64	001166	
3. Multi-Family Water Construction Permit - serving 3 or 4	40.00	36.00	XX-357	DK	001165	

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	ORG L4/L5	EO	OBJECT CODE	Est. Ann. Revenue Accruing to CHD Trust Fund
non-rental residences						
3a. Transfer to headquarters		4.00	99-910	64	001165	
4. Initial Operating Permit Fee After March 31 of Any Year	35.00	31.50	XX-357	DK	001166	
4a. Transfer to headquarters		3.50	99-910	64	001166	
5. Non-SDWA Lab Sample (Sample Collection/Review of Analytical Results/Health Risk Interpretation):						
Bacterial Sample Collection	40.00	40.00	XX-357	DK	001142	
Chemical Sample Collection	50.00	50.00	XX-357	DK	001142	
Combined Chemical microbiological	55.00	55.00	XX-357	DK	001142	
6. Reinspection of Multi-family Water System	25.00	25.00	XX-357	DK	001092	
7. Reinspection of Public Water System	40.00	40.00	XX-357	DK	001092	
8. Delineated Area Clearance Fee	50.00	50.00	XX-357	DK	001092	
9. Limited Use Commercial Registered System	15.00	15.00	XX-357	DK	001092	
10. Limited Use Commercial Public Water System Operating Permit Family Day Care Establishment	25.00	25.00	XX-357	DK	001092	
11. Limited Use Commercial Public Water System Operating Permit Family Day Care Establishment After March 31 of Any Year.	15.00	15.00	XX-357	DK	001092	
Safe Drinking Water Act (Delegated Counties)						96,000.00
1. Construction permit for each Category I through III treatment plant, as defined in Rule 62-699.310, F.A.C., with treatment other than disinfection only.						
a. Treatment plant - 5 MGD and above	7,500.00	7,500.00	XX-358	WC	001211	
b. Treatment plant - 1 MGD up to 5 MGD	6,000.00	6,000.00	XX-358	WC	001211	
c. Treatment plant - 0.25 MGD up to 1 MGD	4,000.00	4,000.00	XX-358	WC	001211	
d. Treatment plant - 0.1 MGD up to .025 MGD	2,000.00	2,000.00	XX-358	WC	001211	
e. Treatment plant - up to 0.1 MGD	1,000.00	1,000.00	XX-358	WC	001211	
2. Construction permit for each Category IV treatment plant, as defined in Rule 62-699.310, F.A.C., with treatment other than disinfection only.						
a. Treatment plant - 5 MGD and above	7,500.00	7,500.00	XX-358	WC	001211	
b. Treatment plant - 1 MGD up to 5 MGD	6,000.00	6,000.00	XX-358	WC	001211	
c. Treatment plant - 0.25 MGD up to 1 MGD	4,000.00	4,000.00	XX-358	WC	001211	
d. Treatment plant - 0.1 MGD up to .025 MGD	2,000.00	2,000.00	XX-358	WC	001211	
e. Treatment plant - 0.01 up to 0.1 MGD	1,000.00	1,000.00	XX-358	WC	001211	
f. Treatment plant - up to 0.01 MGD	400.00	400.00	XX-358	WC	001211	
3. Construction permit for each Category V treatment plant, as defined in Rule 62-699.310, F.A.C., - Disinfection Only						
a. Treatment plant - 5 MGD and above	5,000.00	5,000.00	XX-358	WC	001211	
b. Treatment plant - 1 MGD up to 5 MGD	3,000.00	3,000.00	XX-358	WC	001211	
c. Treatment plant - 0.25 MGD up to 1 MGD	1,000.00	1,000.00	XX-358	WC	001211	
d. Treatment plant - 0.1 MGD up to .025 MGD	500.00	500.00	XX-358	WC	001211	
e. Treatment plant - up to 0.1 MGD	300.00	300.00	XX-358	WC	001211	
4. Distribution and transmission systems, including raw water lines into the plant, except those under general permit.						
a. Serving a community public water system	500.00	500.00	XX-358	WC	1211	
b. Serving a non-transient non-community public water systems	350.00	350.00	XX-358	WC	001211	
c. Serving a non-community public water system	250.00	250.00	XX-358	WC	001211	

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	ORG L4/L5	EO	OBJECT CODE	Est. Ann. Revenue Accruing to CHD Trust Fund
5. Construction permit for each public water supply well.						
a. Well located in a delineated area pursuant to Chapter 62-524, F.A.C..	500.00	500.00	XX-358	WC	001211	
b. Any other public water supply well.	250.00	250.00	XX-358	WC	001211	
6. Major modifications to systems that alter the existing treatment without expanding the capacity of the system and are not considered substantial changes pursuant to Rule 62-4.050(7) below.						
a. 1MGD and above	2,000.00	2,000.00	XX-358	WC	001211	
b. .1 MGD up to 1 MGD	1,000.00	1,000.00	XX-358	WC	001211	
c. 0.01 up to .1 MGD	500.00	500.00	XX-358	WC	001211	
d. Up to 0.01 MGD	100.00	100.00	XX-358	WC	001211	
e. Lead and Copper Corrosion Fee	100.00	100.00	XX-358	WC	001211	
7. Minor modifications to systems that result in no change in the treatment or capacity.						
a. .1 MGD and above	300.00	300.00	XX-358	WC	001211	
b. Up to 0.1 MGD	100.00	100.00	XX-358	WC	001211	
8. Fines and Forfeitures	Variable	Variable	XX-358	WC	012020	
9. General Permit Fee for any General Permit not specifically listed:	100.00	100.00	XX-358	WC	001211	
a. General Permits requiring Professional Engineer or Professional Geologist certification	250.00	250.00	XX-358	WC	001211	
a. General Permits not requiring Professional Engineer or Professional Geologist certification	100.00	100.00	XX-358	WC	001211	
Total Estimated Revenue Accruing to CHD Trust Fund						1,704,767.00