

**SEMINOLE COUNTY GOVERNMENT  
AGENDA MEMORANDUM**

**SUBJECT:** FY 2006/2007 Contract Between the State of Florida Department of Health and Seminole County

**DEPARTMENT:** Community Services      **DIVISION:** Administration

**AUTHORIZED BY:** Dr. David Medley      **CONTACT:** Mike Napier      **EXT.** 3200

<b>Agenda Date</b> <u>09/26/06</u> Regular <input type="checkbox"/> Consent <input checked="" type="checkbox"/> Work Session <input type="checkbox"/> Briefing <input type="checkbox"/> Public Hearing – 1:30 <input type="checkbox"/> Public Hearing – 7:00 <input type="checkbox"/>
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**MOTION/RECOMMENDATION:**

Approval of the FY 2006/2007 contract between the State of Florida Department of Health and Seminole County and authorization for the Chairman of the Board of County Commissioners to execute the contract in the amount of \$1,119,882.

**BACKGROUND:**

Each year Seminole County enters into a contract with the State of Florida Department of Health which specifies the funding and health services to be delivered to the residents of Seminole County. Appropriation by Seminole County FY 2006/2007 is an amount not to exceed \$1,119,882. This funding agreement has increased \$100,000 exceeding the amount that was appropriated FY 2005/2006 and is contingent upon the adoption of the proposed Budget FY 2006/2007.

226 5098

Reviewed by: <u>9-19-06</u> Co Atty: <u>[Signature]</u> DFS: _____ Other: _____ DCM: <u>[Signature]</u> CM: <u>[Signature]</u>  File No. <u>CCS04</u>
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**CONTRACT BETWEEN  
SEMINOLE COUNTY  
AND  
STATE OF FLORIDA DEPARTMENT OF HEALTH  
FOR OPERATION OF  
THE SEMINOLE COUNTY HEALTH DEPARTMENT  
CONTRACT YEAR 2006-2007**

This agreement ("Agreement") is made and entered into between the State of Florida, Department of Health ("State") and the Seminole County ("County"), through their undersigned authorities, effective October 1, 2006.

**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. Seminole 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, 2006, through September 30, 2007, 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 \$ 5,793,624 (*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 \$1,119,882 (*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.

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  
Seminole County  
400 W. Airport Blvd.  
Sanford, FL 32773

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 Health Profile" report located on the Office of Planning, Evaluation & Data Analysis Intranet site*).

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 Seminole 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 amount of the service specific variance between actual and planned expenditures does not exceed three percent of the total planned 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, 2007 for the report period October 1, 2006 through December 31, 2006;
- ii. June 1, 2007 for the report period October 1, 2006 through March 31, 2007;
- iii. September 1, 2007 for the report period October 1, 2006 through June 30, 2007; and
- iv. December 1, 2007 for the report period October 1, 2006 through September 30, 2007.

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.

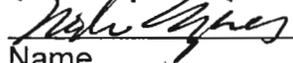
9. MISCELLANEOUS. The parties further agree:

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, 2007, 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. Contract Managers. The name and address of the contract managers for the parties under this Agreement are as follows:

For the State:

**Mike Napier**

  
\_\_\_\_\_

Name

Administrator

\_\_\_\_\_

Title

400 W. Airport Blvd.

\_\_\_\_\_

Sanford, FL 32773

\_\_\_\_\_

Address

407-665-3200

\_\_\_\_\_

Telephone

For the County:

**David Medley**

  
\_\_\_\_\_

Name

Acting Director, Dept. of Community Svcs.

\_\_\_\_\_

Title

400 W. Airport Blvd.

\_\_\_\_\_

Sanford, FL 32773

\_\_\_\_\_

Address

407-665-3202

\_\_\_\_\_

Telephone

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.

c. 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 39 page agreement to be executed by their undersigned officials as duly authorized effective the 1<sup>st</sup> day of October, 2006.

**BOARD OF COUNTY COMMISSIONERS  
FOR SEMINOLE COUNTY**

**STATE OF FLORIDA  
DEPARTMENT OF HEALTH**

SIGNED BY: \_\_\_\_\_

NAME: Carlton Henley

TITLE: Chairman, Board of County  
Commissioners

DATE: \_\_\_\_\_

ATTESTED TO:

SIGNED BY: \_\_\_\_\_

NAME: Maryanne Morse

TITLE: Clerk of the Circuit Court

DATE: \_\_\_\_\_

SIGNED BY: \_\_\_\_\_

NAME: M. Rony François, M.D., M.S.P.H., Ph.D.

TITLE: Secretary

DATE: \_\_\_\_\_

SIGNED BY: \_\_\_\_\_

NAME: Michael Napier

TITLE: CHD Director/Administrator

DATE: \_\_\_\_\_

## ATTACHMENT I

### SEMINOLE 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, F.S. 381 and F.S. 384 and the CHD Guidebook.
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 Statue 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

\_\_\_\_\_ SEMINOLE COUNTY HEALTH DEPARTMENT

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

	Estimated State Share of CHD Trust Fund Balance as of 09/30/06	Estimated County Share of CHD Trust Fund Balance as of 09/30/06	Total
1. CHD Trust Fund Ending Balance 09/30/06	\$1,235,387	\$679,942	1,915,329
2. Drawdown for Contract Year October 1, 2006 to September 30, 2007	\$257,051	\$141,477	398,528
3. Special Capital Project use for Contract Year October 1, 2006 to September 30, 2007	\$296,700	\$163,300	460,000
4. Balance Reserved for Contingency Fund October 1, 2006 to September 30, 2007	\$681,636	\$375,165	\$1,056,801

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

Special Capital Projects are new construction or renovation projects and new furniture or equipment associated with these projects, and mobile health vans.

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.

**Working Copy ATTACHMENT II.**

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

October 1, 2006 to September 30, 2007

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
<b>1. GENERAL REVENUE - STATE</b>					
015040	ALG/CESSPOOL IDENTIFICATION AND ELIMINATION	0	0	0	0
015040	ALG/CONTR TO CHDS-AIDS PATIENT CARE	100,000	0	100,000	0
015040	ALG/CONTR TO CHDS-AIDS PREV & SURV & FIELD STAFF	51,861	0	51,861	0
015040	ALG/CONTR TO CHDS-DENTAL PROGRAM	18,600	0	18,600	0
015040	ALG/CONTR TO CHDS-MIGRANT LABOR CAMP SANITATION	0	0	0	0
015040	ALG/CONTR. TO CHDS-IMMUNIZATION OUTREACH TEAMS	27,274	0	27,274	0
015040	ALG/CONTR. TO CHDS-INDOOR AIR ASSIST PROG	0	0	0	0
015040	ALG/CONTR. TO CHDS-MCH HEALTH - FIELD STAFF COST	0	0	0	0
015040	ALG/CONTR. TO CHDS-SOVEREIGN IMMUNITY	0	0	0	0
015040	ALG/CONTRIBUTION TO CHDS-PRIMARY CARE	10,087	0	10,087	0
015040	ALG/FAMILY PLANNING	84,871	0	84,871	0
015040	ALG/IPO - OUTREACH SOCIAL WORKERS CAT. 050707	0	0	0	0
015040	ALG/IPO HEALTHY START	0	0	0	0
015040	ALG/IPO HEALTHY START/IPO CAT 050707	0	0	0	0
015040	ALG/IPO-INFANT MORTALITY PROJECT CAT. 050707	0	0	0	0
015040	ALG/MCH HEALTHY START/IPO CAT 050870	0	0	0	0
015040	ALG/MCH-INFANT MORTALITY PROJECT CAT. 050870	0	0	0	0
015040	ALG/MCH-OUTREACH SOCIAL WORKERS CAT 050870	0	0	0	0
015040	ALG/PRIMARY CARE	130,525	0	130,525	0
015040	ALG/SCHOOL HEALTH/SUPPLEMENTAL	0	0	0	0
015040	CATE ESCAMBIA	0	0	0	0
015040	CHD SUPPORT SERVICES	0	0	0	0
015040	CLOSING THE GAP PROGRAM	0	0	0	0
015040	COMMUNITY SMILES - DADE	0	0	0	0
015040	COMMUNITY TB PROGRAM	64,379	0	64,379	0
015040	DENTAL SPECIAL INITIATIVE PROJECTS	0	0	0	0
015040	DUVAL TEEN PREGNANCY PREVENTION	0	0	0	0
015040	ENHANCED DENTAL SERVICES	0	0	0	0
015040	FL HEPATITIS & LIVER FAILURE PREVENTION/CONTROL	0	0	0	0
015040	HEALTH PROMOTION & EDUCATION INITIATIVES	29,411	0	29,411	0
015040	HEALTHY BEACHES MONITORING	0	0	0	0
015040	HEALTHY START - DATA COLLECTION PROJECT STAFF	0	0	0	0
015040	LA LIGA CONTRA EL CANCER	0	0	0	0
015040	MEDIVAN PROJECT	0	0	0	0
015040	METRO ORLANDO URBAN LEAGUE TEENAGE PREG PREV	0	0	0	0
015040	PRIMARY CARE SPECIAL DENTAL PROJECTS	25,000	0	25,000	0
015040	PRIMARY CARE SPECIAL PROJECTS	0	0	0	0
015040	SCHOOL HEALTH-SUPPLEMENT-TANF	0	0	0	0
015040	SPECIAL NEEDS SHELTER PROGRAM	76,803	0	76,803	0
015040	STD GENERAL REVENUE	0	0	0	0
015040	VOLUNTEER SCHOOL HEALTH NURSE GRANT	0	0	0	0
015050	ALG/CONTR TO CHDS	2,868,595	0	2,868,595	0
<b>GENERAL REVENUE TOTAL</b>		<b>3,487,406</b>	<b>0</b>	<b>3,487,406</b>	<b>0</b>
<b>2. NON GENERAL REVENUE - STATE</b>					
015010	ALG/CONTR TO CHDS-REBASING TOBACCO TF	83,175	0	83,175	0
015010	BASIC SCHOOL HEALTH - TOBACCO TF	272,851	0	272,851	0
015010	CHD SUPPORT SERVICES	0	0	0	0

**Working Copy ATTACHMENT II.**

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

**October 1, 2006 to September 30, 2007**

		State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
<b>2. NON GENERAL REVENUE - STATE</b>						
015010	FL HEPATITIS & LIVER FAILURE PREVENTION/CONTROL	77,420	0	77,420	0	77,420
015010	FULL SERVICE SCHOOLS - TOBACCO TF	186,934	0	186,934	0	186,934
015010	ONSITE SEWAGE RESEARCH PROGRAM	0	0	0	0	0
015010	PACE EH	0	0	0	0	0
015010	PUBLIC SWIMMING POOL PROGRAM	0	0	0	0	0
015010	SUPER ACT PROGRAM ADM TF	0	0	0	0	0
015010	SUPPLEMENTAL/COMPREHENSIVE SCHOOL HEALTH - TOB TF	0	0	0	0	0
015010	VARICELLA IMMUNIZATION REQUIREMENT TOBACCO TF	14,598	0	14,598	0	14,598
015020	BIOMEDICAL WASTE/DEP ADM TF	12,258	0	12,258	0	12,258
015020	SAFE DRINKING WATER PRG/DEP ADM	0	0	0	0	0
015020	FOOD AND WATERBORNE DISEASE PROGRAM ADM TF/DACS	0	0	0	0	0
<b>NON GENERAL REVENUE TOTAL</b>		<b>647,236</b>	<b>0</b>	<b>647,236</b>	<b>0</b>	<b>647,236</b>
<b>3. FEDERAL FUNDS - State</b>						
007000	AIDS PREVENTION	0	0	0	0	0
007000	AIDS SEROPREVALENCE	0	0	0	0	0
007000	AIDS SURVEILLANCE	0	0	0	0	0
007000	BIOTERR SURVEILLANCE & EPIDEMIOLOGY	186,929	0	186,929	0	186,929
007000	BIOTERRORISM PLANNING & READINESS	83,370	0	83,370	0	83,370
007000	CDHPE PROGRAM	14,706	0	14,706	0	14,706
007000	CHD SUPPORT SERVICES	0	0	0	0	0
007000	CHILDHOOD LEAD POISONING PREVENTION	0	0	0	0	0
007000	COASTAL BEACH MONITORING PROGRAM	0	0	0	0	0
007000	COMPREHENSIVE CARDIOVASCULAR PROGRAM	0	0	0	0	0
007000	FGTF/AIDS MORBIDITY	0	0	0	0	0
007000	FGTF/BREAST & CERVICAL CANCER-ADMIN/CASE MAN	56,250	0	56,250	0	56,250
007000	FGTF/FAMILY PLANNING TITLE X SPECIAL INITIATIVES	0	0	0	0	0
007000	FGTF/FAMILY PLANNING-TITLE X	110,990	0	110,990	0	110,990
007000	FGTF/IMMUNIZATION ACTION PLAN	41,366	0	41,366	0	41,366
007000	FGTF/WIC ADMINISTRATION	956,542	0	956,542	0	956,542
007000	FLORIDA PANDEMIC INFLUENZA	27,848	0	27,848	0	27,848
007000	HEALTH PROGRAM FOR REFUGEES	14,759	0	14,759	0	14,759
007000	HOUSING OPPORTUNITIES FOR PEOPLE WITH AIDS (HOPWA)	0	0	0	0	0
007000	IMMUNIZATION SUPPLEMENTAL	0	0	0	0	0
007000	IMMUNIZATION-WIC LINKAGES	0	0	0	0	0
007000	MCH BGTF-GADSDEN SCHOOL CLINIC	0	0	0	0	0
007000	MCH BGTF-HEALTHY START IPO	0	0	0	0	0
007000	MCH BGTF-INFANT MORTALITY PROJECT	0	0	0	0	0
007000	MCH BGTF-MCH/CHILD HEALTH	14,971	0	14,971	0	14,971
007000	MCH BGTF-MCH/DENTAL PROJECTS	0	0	0	0	0
007000	MCH BGTF-OUTREACH SOCIAL WORKERS	0	0	0	0	0
007000	PHP-CITIES RESPONSE INITIATIVE	0	0	0	0	0
007000	RAPE PREVENTION & EDUCATION GRANT	0	0	0	0	0
007000	RISK COMMUNICATIONS	0	0	0	0	0
007000	RYAN WHITE	0	0	0	0	0
007000	RYAN WHITE - EMERGING COMMUNITIES	0	0	0	0	0
007000	RYAN WHITE-AIDS DRUG ASSIST PROG-ADMIN	35,000	0	35,000	0	35,000
007000	RYAN WHITE-CONSORTIA	0	0	0	0	0

**Working Copy ATTACHMENT II.**

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

**October 1, 2006 to September 30, 2007**

		State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
<b>3. FEDERAL FUNDS - State</b>						
007000	STD FEDERAL GRANT - CSPS	44,296	0	44,296	0	44,296
007000	STD PROGRAM - PHYSICIAN TRAINING CENTER	0	0	0	0	0
007000	STD PROGRAM INFERTILITY PREVENTION PROJECT (IPP)	0	0	0	0	0
007000	SYPHILIS ELIMINATION	0	0	0	0	0
007000	TESTING HIV SERONEGATIVE HEADQUARTERS	0	0	0	0	0
007000	TRAINING AND EDUCATION	0	0	0	0	0
007000	TUBERCULOSIS CONTROL - FEDERAL GRANT	42,636	0	42,636	0	42,636
007000	WEST NILE VIRUS & EPIDEMIOLOGY PROJECTS 2006	1,250	0	1,250	0	1,250
007000	WIC BREASTFEEDING PEER COUNSELING	19,135	0	19,135	0	19,135
007000	WIC BREASTFEEDING PEER COUNSELING PROG FFY 2005	8,934	0	8,934	0	8,934
007000	WIC INFRASTRUCTURE	0	0	0	0	0
015009	MEDIPASS WAIVER-HLTHY STRT CLIENT SERVICES	0	0	0	0	0
015009	MEDIPASS WAIVER-SOBRA	0	0	0	0	0
015075	TITLEXXI/SCHOOL HEALTH/SUPPLEMENTAL	0	0	0	0	0
015075		0	0	0	0	0
015075	NEW LINE	0	0	0	0	0
015075	NEW LINE	0	0	0	0	0
<b>FEDERAL FUNDS TOTAL</b>		<b>1,658,982</b>	<b>0</b>	<b>1,658,982</b>	<b>0</b>	<b>1,658,982</b>
<b>4. FEES ASSESSED BY STATE OR FEDERAL RULES - STATE</b>						
001020	MIGRANT HOUSING PERMIT	0	0	0	0	0
001020	MOBILE HOME AND PARKS	7,918	0	7,918	0	7,918
001020	FOOD HYGIENE PERMIT	43,466	0	43,466	0	43,466
001020	BIOHAZARD WASTE PERMIT	20,316	0	20,316	0	20,316
001020	SWIMMING POOLS	85,048	0	85,048	0	85,048
001020	PRIVATE WATER CONSTR PERMIT	0	0	0	0	0
001020	PUBLIC WATER ANNUAL OPER PERMIT	1,459	0	1,459	0	1,459
001020	PUBLIC WATER CONSTR PERMIT	0	0	0	0	0
001020	NON-SDWA SYSTEM PERMIT	0	0	0	0	0
001020	SAFE DRINKING WATER	1,296	0	1,296	0	1,296
001020	TANNING FACILITIES & INSPECTIONS	22,199	0	22,199	0	22,199
001020	BODY PIERCING	185	0	185	0	185
001092	NON SDWA LAB SAMPLE	0	0	0	0	0
001092	OSDS VARIANCE FEE	0	0	0	0	0
001092	ENVIRONMENTAL HEALTH FEES	263,419	0	263,419	0	263,419
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
001170	LAB FEE CHEMICAL ANALYSIS	0	0	0	0	0
001170	NONPOTABLE WATER ANALYSIS	0	0	0	0	0
001170	WATER ANALYSIS-POTABLE	0	0	0	0	0
010304	MQA INSPECTION FEE	5,670	0	5,670	0	5,670
<b>FEES ASSESSED BY STATE OR FEDERAL RULES TOTAL</b>		<b>450,976</b>	<b>0</b>	<b>450,976</b>	<b>0</b>	<b>450,976</b>
<b>5. OTHER CASH CONTRIBUTIONS - STATE</b>						

**Working Copy ATTACHMENT II.**

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

**October 1, 2006 to September 30, 2007**

		State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
<b>5. OTHER CASH CONTRIBUTIONS - STATE</b>						
010304	STATIONARY POLLUTANT STORAGE TANKS	0	0	0	0	0
090001	DRAW DOWN FROM PUBLIC HEALTH UNIT	257,051	0	257,051	0	257,051
<b>OTHER CASH CONTRIBUTIONS TOTAL</b>		257,051	0	257,051	0	257,051
<b>6. MEDICAID - STATE/COUNTY</b>						
001056	MEDICAID PHARMACY	104,246	148,534	252,780	0	252,780
001076	MEDICAID TB	6,616	9,426	16,042	0	16,042
001078	MEDICAID ADMINISTRATION OF VACCINE	6,932	6,932	13,864	0	13,864
001079	MEDICAID CASE MANAGEMENT	0	0	0	0	0
001080	MEDICAID OTHER	0	0	0	0	0
001081	MEDICAID CHILD HEALTH CHECK UP	38,003	54,148	92,151	0	92,151
001082	MEDICAID DENTAL	278,370	396,630	675,000	0	675,000
001087	MEDICAID STD	5,311	7,567	12,878	0	12,878
001089	MEDICAID AIDS	27,425	39,076	66,501	0	66,501
001147	MEDICAID HMO RATE	0	0	0	0	0
001191	MEDICAID MATERNITY	203,123	289,417	492,540	0	492,540
001192	MEDICAID COMPREHENSIVE CHILD	77,450	110,353	187,803	0	187,803
001193	MEDICAID COMPREHENSIVE ADULT	19,702	28,073	47,775	0	47,775
001194	MEDICAID LABORATORY	0	0	0	0	0
001083	MEDICAID FAMILY PLANNING	4,662	41,957	46,619	0	46,619
001208	MEDIPASS \$3.00 ADM. FEE	9,165	9,165	18,330	0	18,330
<b>MEDICAID TOTAL</b>		781,006	1,141,277	1,922,283	0	1,922,283
<b>7. ALLOCABLE REVENUE - STATE</b>						
018000	REFUNDS	176	0	176	0	176
037000	PRIOR YEAR WARRANT	0	0	0	0	0
038000	12 MONTH OLD WARRANT	0	0	0	0	0
<b>ALLOCABLE REVENUE TOTAL</b>		176	0	176	0	176
<b>8. OTHER STATE CONTRIBUTIONS NOT IN CHD TRUST FUND - STATE</b>						
	PHARMACY SERVICES	0	0	0	80,476	80,476
	LABORATORY SERVICES	0	0	0	324,067	324,067
	TB SERVICES	0	0	0	0	0
	IMMUNIZATION SERVICES	0	0	0	474,994	474,994
	STD SERVICES	0	0	0	0	0
	CONSTRUCTION/RENOVATION	0	0	0	0	0
	WIC FOOD	0	0	0	4,449,320	4,449,320
	ADAP	0	0	0	693,305	693,305
	DENTAL SERVICES	0	0	0	0	0
	OTHER (SPECIFY)	0	0	0	0	0
	OTHER (SPECIFY)	0	0	0	0	0
<b>OTHER STATE CONTRIBUTIONS TOTAL</b>		0	0	0	6,022,162	6,022,162
<b>9. DIRECT COUNTY CONTRIBUTIONS - COUNTY</b>						
008030	GRANTS-COUNTY TAX DIRECT	0	0	0	0	0
008034	GRANTS CNTY COMMSN OTHER	0	1,119,882	1,119,882	0	1,119,882

**Working Copy ATTACHMENT II.**

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

October 1, 2006 to September 30, 2007

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
<b>BOARD OF COUNTY COMMISSIONERS TOTAL</b>	0	1,119,882	1,119,882	0	1,119,882
<b>10. FEES AUTHORIZED BY COUNTY ORDINANCE OR RESOLUTION - COUNTY</b>					
001060 VITAL STATISTICS FEES OTHER	0	0	0	0	0
001077 RABIES VACCINE	0	0	0	0	0
001077 STD & TB & EPI	0	51,227	51,227	0	51,227
001077 PERSONAL HEALTH FEES	0	498,047	498,047	0	498,047
001077 AIDS CO-PAYS	0	3,349	3,349	0	3,349
001094 LOCAL ORDINANCE FEES WELLS	0	117,281	117,281	0	117,281
001094 ADULT ENTER. PERMIT FEES	0	0	0	0	0
001114 NEW BIRTH CERTIFICATES	0	80,651	80,651	0	80,651
001115 DEATH CERTIFICATES	0	98,948	98,948	0	98,948
001117 VITAL STATS-ADM. FEE 50 CENTS	0	4,066	4,066	0	4,066
<b>FEES AUTHORIZED BY COUNTY TOTAL</b>	0	853,569	853,569	0	853,569
<b>11. OTHER CASH AND LOCAL CONTRIBUTIONS - COUNTY</b>					
001009 RETURNED CHECK ITEM	0	0	0	0	0
001029 THIRD PARTY REIMBURSEMENT	0	149,723	149,723	0	149,723
001029 HEALTH MAINTENANCE ORGAN. (HMO)	0	102,900	102,900	0	102,900
001054 MEDICARE PART D	0	0	0	0	0
001077 RYAN WHITE TITLE II	0	0	0	0	0
001090 MEDICARE PART B	0	67,944	67,944	0	67,944
005040 INTEREST EARNED	0	0	0	0	0
005041 INTEREST EARNED-STATE INVESTMENT ACCOUNT	0	15,782	15,782	0	15,782
007010 U.S. GRANTS DIRECT	0	0	0	0	0
010300 SALE OF GOODS AND SERVICES TO STATE AGENCIES	0	0	0	0	0
010301 EXP WITNESS FEE CONSULTNT CHARGES	0	0	0	0	0
010405 SALE OF PHARMACEUTICALS	0	48,177	48,177	0	48,177
010409 SALE OF GOODS OUTSIDE STATE GOVERNMENT	0	0	0	0	0
010500 SALES OF SERVICES OUTSIDE STATE GOVERNMENT	0	0	0	0	0
011000 GRANT-DIRECT	0	64,197	64,197	0	64,197
011000 GRANT-DIRECT	0	43,128	43,128	0	43,128
011000 GRANT-DIRECT	0	375,452	375,452	0	375,452
011000 GRANT-DIRECT	0	51,411	51,411	0	51,411
011000 GRANT-DIRECT	0	0	0	0	0
011000 GRANT-DIRECT	0	0	0	0	0
011000 GRANT-DIRECT	0	0	0	0	0
011000 GRANT-DIRECT	0	0	0	0	0
011001 HEALTHY START COALITION CONTRIBUTIONS	0	215,091	215,091	0	215,091
011007 CASH DONATIONS PRIVATE	0	38,308	38,308	0	38,308
012020 FINES AND FORFEITURES	0	0	0	0	0
012021 RETURN CHECK CHARGE	0	0	0	0	0
028020 INSURANCE RECOVERIES-OTHER	0	0	0	0	0
090002 DRAW DOWN FROM PUBLIC HEALTH UNIT	0	141,477	141,477	0	141,477
<b>OTHER CASH AND LOCAL CONTRIBUTIONS TOTAL</b>	0	1,313,590	1,313,590	0	1,313,590
<b>12. ALLOCABLE REVENUE - COUNTY</b>					
018000 REFUNDS	0	838	838	0	838
037000 PRIOR YEAR WARRANT	0	0	0	0	0

**Working Copy ATTACHMENT II.**

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

October 1, 2006 to September 30, 2007

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
<b>12. ALLOCABLE REVENUE - COUNTY</b>					
038000 12 MONTH OLD WARRANT	0	405	405	0	405
<b>COUNTY ALLOCABLE REVENUE TOTAL</b>	<b>0</b>	<b>1,243</b>	<b>1,243</b>	<b>0</b>	<b>1,243</b>
<b>13. BUILDINGS - COUNTY</b>					
ANNUAL RENTAL EQUIVALENT VALUE	0	0	0	787,169	787,169
BUILDING MAINTENANCE	0	0	0	75,442	75,442
INSURANCE	0	0	0	0	0
UTILITIES	0	0	0	0	0
GROUNDS MAINTENANCE	0	0	0	0	0
OTHER (SPECIFY)	0	0	0	0	0
OTHER (SPECIFY)	0	0	0	0	0
<b>BUILDINGS TOTAL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>862,611</b>	<b>862,611</b>
<b>14. OTHER COUNTY CONTRIBUTIONS NOT IN CHD TRUST FUND - COUNTY</b>					
EQUIPMENT/VEHICLE PURCHASES	0	0	0	0	0
VEHICLE INSURANCE	0	0	0	0	0
VEHICLE MAINTENANCE	0	0	0	0	0
OTHER COUNTY CONTRIBUTION (SPECIFY)	0	0	0	0	0
<b>OTHER COUNTY CONTRIBUTIONS TOTAL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>GRAND TOTAL CHD PROGRAM</b>	<b>7,282,833</b>	<b>4,429,561</b>	<b>11,712,394</b>	<b>6,884,773</b>	<b>18,597,167</b>

**Working Copying ATTACHMENT II.**  
**SEMINOLE COUNTY HEALTH DEPARTMENT**

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

**October 1, 2006 to September 30, 2007**

	FTE's (0.00)	Clients		Quarterly Expenditure Plan				State	County	Grand Total
		Units	Services	1st	2nd (Whole dollars only)	3rd	4th			
<b>A. COMMUNICABLE DISEASE CONTROL:</b>										
VITAL STATISTICS (180)	1.30	0	0	27,051	30,888	26,733	31,523	74,946	41,249	116,195
IMMUNIZATION (101)	15.20	15,573	36,611	356,758	407,360	352,560	415,758	988,421	544,015	1,532,436
STD (102)	13.14	1,812	9,313	162,373	185,404	160,463	189,226	449,866	247,600	697,466
A.I.D.S. (103)	9.07	192	6,616	142,663	162,898	140,984	166,255	395,256	217,544	612,800
TB CONTROL SERVICES (104)	7.04	1,803	9,108	94,865	108,320	93,748	110,554	262,829	144,658	407,487
COMM. DISEASE SURV. (106)	0.02	0	0	104	119	103	120	288	158	446
HEPATITIS PREVENTION (109)	3.95	1,302	3,400	37,127	42,393	36,690	43,266	102,862	56,614	159,476
PUBLIC HEALTH PREP AND RESP (116)	7.91	0	4,163	128,697	146,951	127,183	149,981	356,564	196,248	552,812
<b>COMMUNICABLE DISEASE SUBTOTAL</b>	<b>57.63</b>	<b>20,682</b>	<b>69,211</b>	<b>949,638</b>	<b>1,084,333</b>	<b>938,464</b>	<b>1,106,683</b>	<b>2,631,032</b>	<b>1,448,086</b>	<b>4,079,118</b>
<b>B. PRIMARY CARE:</b>										
CHRONIC DISEASE SERVICES (210)	9.13	333	483	84,494	96,478	83,499	98,467	234,095	128,843	362,938
TOBACCO PREVENTION (212)	0.00	0	0	0	0	0	0	0	0	0
HOME HEALTH (215)	0.00	0	0	0	0	0	0	0	0	0
W.I.C. (221)	19.50	11,622	73,612	301,949	344,777	298,395	351,884	836,568	460,437	1,297,005
FAMILY PLANNING (223)	9.26	3,301	10,399	123,033	140,483	121,585	143,379	340,870	187,610	528,480
IMPROVED PREGNANCY OUTCOME (225)	17.75	1,312	11,501	196,087	223,900	193,780	228,516	543,273	299,010	842,283
HEALTHY START PRENATAL (227)	6.57	2,902	35,639	164,827	188,205	162,887	192,085	456,663	251,341	708,004
COMPREHENSIVE CHILD HEALTH (229)	7.58	4,272	11,997	86,984	99,321	85,960	101,369	240,994	132,640	373,634
HEALTHY START INFANT (231)	10.48	1,408	16,402	86,649	98,939	85,629	100,979	240,066	132,130	372,196
SCHOOL HEALTH (234)	2.60	0	603,012	119,807	136,800	118,397	139,621	331,933	182,692	514,625
COMPREHENSIVE ADULT HEALTH (237)	16.82	2,031	3,400	159,634	182,276	157,755	186,033	442,275	243,423	685,698
DENTAL HEALTH (240)	5.05	4,701	17,987	204,377	233,366	201,972	238,176	566,240	311,651	877,891
<b>PRIMARY CARE SUBTOTAL</b>	<b>104.74</b>	<b>31,882</b>	<b>784,432</b>	<b>1,527,841</b>	<b>1,744,545</b>	<b>1,509,859</b>	<b>1,780,509</b>	<b>4,232,977</b>	<b>2,329,777</b>	<b>6,562,754</b>
<b>C. ENVIRONMENTAL HEALTH:</b>										
<b>Water and Onsite Sewage Programs</b>										
COASTAL BEACH MONITORING (347)	0.00	0	0	0	0	0	0	0	0	0
LIMITED USE PUBLIC WATER SYSTEMS (357)	3.59	58	166	21,095	24,087	20,847	24,585	58,446	32,168	90,614
PUBLIC WATER SYSTEM (358)	0.55	2	15	3,536	4,038	3,495	4,121	9,798	5,392	15,190
PRIVATE WATER SYSTEM (359)	0.08	33	58	1,355	1,547	1,340	1,580	3,755	2,067	5,822
INDIVIDUAL SEWAGE DISP. (361)	0.78	1,321	5,433	95,484	109,027	94,360	111,273	264,543	145,601	410,144
<b>Group Total</b>	<b>5.00</b>	<b>1,414</b>	<b>5,672</b>	<b>121,470</b>	<b>138,699</b>	<b>120,042</b>	<b>141,559</b>	<b>336,542</b>	<b>185,228</b>	<b>521,770</b>
<b>Facility Programs</b>										
FOOD HYGIENE (348)	0.87	263	1,100	16,563	18,913	16,368	19,303	45,890	25,257	71,147
BODY ART (349)	0.45	13	26	2,365	2,701	2,337	2,757	6,553	3,607	10,160
GROUP CARE FACILITY (351)	0.19	521	718	15,252	17,416	15,073	17,774	42,257	23,258	65,515
MIGRANT LABOR CAMP (352)	0.07	0	0	757	865	748	883	2,098	1,155	3,253
HOUSING,PUBLIC BLDG SAFETY,SANITATION (353)	0.00	0	0	0	0	0	0	0	0	0
MOBILE HOME AND PARKS SERVICES (354)	1.51	34	79	7,219	8,243	7,134	8,412	20,000	11,008	31,008
SWIMMING POOLS/BATHING (360)	0.49	571	1,201	19,365	22,112	19,137	22,567	53,651	29,530	83,181
BIOMEDICAL WASTE SERVICES (364)	0.33	345	350	6,951	7,937	6,870	8,101	19,259	10,600	29,859
TANNING FACILITY SERVICES (369)	0.00	70	189	3,083	3,520	3,046	3,592	8,540	4,701	13,241

**Working Copying ATTACHMENT II.  
SEMINOLE COUNTY HEALTH DEPARTMENT**

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

**October 1, 2006 to September 30, 2007**

	FTE's (0.00)	Clients Units	Services	Quarterly Expenditure Plan				State	County	Grand Total
				1st	2nd (Whole dollars only)	3rd	4th			
<b>C. ENVIRONMENTAL HEALTH:</b>										
<b>Group Total</b>	3.91	1,817	3,663	71,555	81,707	70,713	83,389	198,248	109,116	307,364
<b>Groundwater Contamination</b>										
STORAGE TANK COMPLIANCE (355)	0.00	0	0	0	0	0	0	0	0	0
SUPER ACT SERVICE (356)	3.74	237	693	26,184	29,897	25,875	30,514	72,543	39,927	112,470
<b>Group Total</b>	3.74	237	693	26,184	29,897	25,875	30,514	72,543	39,927	112,470
<b>Community Hygiene</b>										
RADIOLOGICAL HEALTH (372)	0.00	0	0	459	524	453	534	1,271	699	1,970
TOXIC SUBSTANCES (373)	0.00	0	0	460	526	455	536	1,276	701	1,977
OCCUPATIONAL HEALTH (344)	0.67	0	278	5,642	6,442	5,575	6,575	15,631	8,603	24,234
CONSUMER PRODUCT SAFETY (345)	0.00	0	0	0	0	0	0	0	0	0
INJURY PREVENTION (346)	0.00	0	0	0	0	0	0	0	0	0
LEAD MONITORING SERVICES (350)	0.00	0	0	468	534	462	544	1,295	713	2,008
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)	2.07	33	89	13,837	15,799	13,674	16,125	38,336	21,099	59,435
RABIES SURVEILLANCE/CONTROL SERVICES (366)	0.00	0	88	900	1,028	890	1,050	2,495	1,373	3,868
ARBOVIRUS SURVEILLANCE (367)	0.00	0	212	3,761	4,295	3,717	4,382	10,419	5,736	16,155
RODENT/ARTHROPOD CONTROL (368)	0.00	0	58	3,562	4,067	3,520	4,152	9,869	5,432	15,301
WATER POLLUTION (370)	0.00	0	0	462	528	457	538	1,280	705	1,985
AIR POLLUTION (371)	0.00	0	0	462	528	457	538	1,280	705	1,985
<b>Group Total</b>	2.74	33	725	30,013	34,271	29,660	34,974	83,152	45,766	128,918
<b>ENVIRONMENTAL HEALTH SUBTOTAL</b>	15.39	3,501	10,753	249,222	284,574	246,290	290,436	690,485	380,037	1,070,522
<b>D. SPECIAL CONTRACTS:</b>										
SPECIAL CONTRACTS (599)	0.00	0	0	0	0	0	0	0	0	0
<b>SPECIAL CONTRACTS SUBTOTAL</b>	0.00	0	0	0	0	0	0	0	0	0
<b>TOTAL CONTRACT</b>	177.76	56,065	864,396	2,726,701	3,113,452	2,694,613	3,177,628	7,554,494	4,157,900	11,712,394

## ATTACHMENT III

Seminole 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

\_\_\_\_\_Seminoles\_\_\_\_\_ COUNTY HEALTH DEPARTMENT  
FACILITIES UTILIZED BY THE COUNTY HEALTH DEPARTMENT

<u>Facility Description</u>	<u>Location</u>	<u>Owned By</u>
Main Facility Concrete Block Health Unit Design 50,269 Square Feet	400 W. Airport Blvd. Sanford, FL 32773	Seminole County
Satellite Facility Store Front in Shopping Ctr. 9,750 Square Feet	132 Sausalito Blvd. Casselberry, FL 32707	Leased by: Seminole County Owned by: The Greater Construction Corp. At Kensington Park 1105 Kensington Pk Altamonte Springs, FL 32714
Satellite Facility Apartment in an Apartment Building 600 Square Feet	1600 W. 5 <sup>th</sup> St. Apt 41 Sanford, FL 32771	Donated by: Seminole Gardens Apartments

**ATTACHMENT V**  
**SEMINOLE COUNTY HEALTH DEPT**  
**SPECIAL PROJECTS SAVINGS PLAN**

IDENTIFY THE AMOUNT OF CASH THAT IS ANTICIPATED TO BE SET ASIDE ANNUALLY FOR THE PROJECT.

<u>CONTRACT YEAR</u>	<u>STATE</u>	<u>COUNTY</u>	<u>TOTAL</u>
2004-2005	\$ _____	\$ _____	\$ _____ -
2005-2006	\$ _____	\$ _____	\$ _____ -
2006-2007	\$ <u>225,300</u>	\$ <u>234,700</u>	\$ <u>460,000</u>
2007-2008	\$ _____	\$ _____	\$ _____ -
2008-2009	\$ _____	\$ _____	\$ _____ -
<b>PROJECT TOTAL</b>	<b>\$ <u>225,300</u></b>	<b>\$ <u>234,700</u></b>	<b>\$ <u>460,000</u></b>

**SPECIAL PROJECT CONSTRUCTION/RENOVATION PLAN**

PROJECT NAME: Dental, Immunizations & Environmental Health Renovation Sanford Site  
 LOCATION/ ADDRESS: 400 W. Airport Blvd., Sanford, FL 32773  
 PROJECT TYPE: NEW BUILDING  ROOFING   
 RENOVIATION  PLANNING STUDY   
 NEW ADDITION  OTHER

SQUARE FOOTAGE: 4900

PROJECT SUMMARY: *Describe scope of work in reasonable detail.*

Expanding service areas within the current site in Dental, Immunizations and Environmental Health in order to increase services in the community.

ESTIMATED PROJECT INFORMATION:

START DATE (initial expenditure of funds): 10/1/2006  
 COMPLETION DATE: 7/30/2007

DESIGN FEES: \$ 85,000  
 CONSTRUCTION COSTS: \$ 375,000  
 FURNITURE/EQUIPMENT \$ \_\_\_\_\_ \*this was budgeted in OCO  
 TOTAL PROJECT COST: \$ 460,000  
 COST PER SQ FOOT: \$ 93.87755102

Special Capital Projects are new construction or renovation projects and new furniture or equipment associated with these projects and mobile health vans.

**ATTACHMENT VI**

**\_\_\_\_\_ Seminole\_ COUNTY HEALTH DEPARTMENT**

**PRIMARY CARE**

“Primary Care” as conceptualized for the county health departments and for the use of categorical Primary Care funds (revenue object code 015040) is defined as:

*“Health care services for the prevention or treatment of acute or chronic medical conditions or minor injuries of individuals which is provided in a clinic setting and may include family planning and maternity care.”*

Indicate below the county health department programs that will be supported at least in part with categorical Primary Care funds this contract year:

- Comprehensive Child Health (229/29)
- Comprehensive Adult Health (237/37)
- Family Planning (223/23)
- Maternal Health/IPO (225/25)
- Laboratory (242/42)
- Pharmacy (241/93)
- Other Medical Treatment Program (please identify) \_\_\_\_\_

Describe the target population to be served with categorical Primary Care funds.

Does the health department intend to contract with other providers for the delivery of primary health care services using categorical (015040) Primary Care funds? If so, please identify the provider(s), describe the services to be delivered, and list the anticipated contractual amount by provider. In addition, contract providers are required to provide data on patients served and the services provided so that the patients may be registered and the service data entered into HCMS.



**ENVIRONMENTAL HEALTH FEE SCHEDULE**  
**FISCAL YEAR 2006-2007**  
**EFFECTIVE 07/01/2006**

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	ORG L4/L5	EO	OBJECT CODE	REVENUE CATEGORY	SI	OCA	FUND GF-SF-FID	BUDGET ENTITY	IBI	PROGRAM COMPONENT
<b>PUBLIC SWIMMING POOLS AND BATHING PLACES</b>												
1. Annual Permit - Up to (and including) 25,000 gallons	100.00	90.00	XX-360	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
1a. Transfer to headquarters		10.00	XX-910	SM	001206	000100	RV	K3000	10-2-021042	64200600	00	1302000000
2. More than 25,000 gallons	200.00	180.00	XX-360	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
2a. Transfer to headquarters		20.00	XX-910	SM	001206	000100	RV	K3000	10-2-021042	64200600	00	1302000000
3. Exempted Condo Pools (over 32 units)	50.00	45.00	XX-360	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
3a. Transfer to headquarters		5.00	XX-910	SM	001206	000100	RV	K3000	10-2-021042	64200600	00	1302000000
4. Plan Review Fee (one time only)	350.00	315.00	XX-360	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
4a. Transfer to headquarters		35.00	XX-910	SM	001206	000100	RV	K3000	10-2-021042	64200600	00	1302000000
5. Initial Operating Permit (one time only)	150.00	135.00	XX-360	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
5a. Transfer to headquarters		15.00	XX-910	SM	001206	000100	RV	K3000	10-2-021042	64200600	00	1302000000
<b>OTHER FEES</b>												
<b>Collected by the 13 delegated counties</b>												
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)	350.00	350.00	XX-360	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
2. Modification to a construction permit (permit issued and pool not finished	100.00	100.00	XX-360	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
with construction)												
3. Modification to a completed pool, one that has been in operation	150.00	150.00	XX-360	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
4. Plan/application review for bathing place development	275.00	275.00	XX-360	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
5. Initial operating permit	150.00	150.00	XX-360	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
6. Variance applications	240.00	216.00	XX-360	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
6a. Transfer to Headquarters		24.00	XX-910	SM	001206	000100	RV	K3000	10-2-021042	64200600	00	1302000000
<b>All other counties are to send the fee to Bureau of Water</b>												
<b>Programs in Tallahassee or the Environmental Engineering</b>												
<b>section in Orlando as follows:</b>												
1. Plan review (new construction)	350.00	350.00	XX-360	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000
2. Modification to a construction permit (permit issued and pool not finished	100.00	100.00	XX-360	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000
with construction)												
3. Modification to a completed pool, one that has been in operation	150.00	150.00	XX-360	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	ORG L4/L5	EO	OBJECT CODE	REVENUE CATEGORY	SI	OCA	FUND GF-SF-FID	BUDGET ENTITY	IBI	PROGRAM COMPONENT
4. Plan/application review for bathing place development	275.00	275.00	XX-360	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000
5. Initial operating permit	150.00	150.00	XX-360	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000
6. Variance applications	240.00	216.00	XX-360	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	ORG L4/L5	EO	OBJECT CODE	REVENUE CATEGORY	SI	OCA	FUND GF-SF-FID	BUDGET ENTITY	IBI	PROGRAM COMPONENT
<b>MOBILE HOME &amp; RECREATIONAL VEHICLE PARKS</b>												
(FEES ARE PRORATED ON A QUARTERLY BASIS)												
1. Annual permit for 5 to 14 spaces	50.00	45.00	XX-354	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
1a. Transfer to headquarters		5.00	XX-910	MP	001206	000100	RV	UQ000	10-2-021042	64200600	00	1302000000
2. Annual permit for 15 to 171 spaces	3.50 per space		XX-354	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
2a. Transfer to headquarters		10%	XX-910	MP	001206	000100	RV	UQ000	10-2-021042	64200600	00	1302000000
3. Annual permit for 172 and above spaces	600.00	540.00	XX-354	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
3a. Transfer to headquarters		60.00	XX-910	MP	001206	000100	RV	UQ000	10-2-021042	64200600	00	1302000000
<b>MIGRANT LABOR CAMPS</b>												
1. Annual permit for facilities with 5-50 occupants	125.00	125.00	XX-352	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
2. Annual permit for facilities with 51-100 occupants	225.00	225.00	XX-352	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
3. Annual permit for facilities with over 100 occupants	500.00	500.00	XX-352	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
<b>BIOMEDICAL WASTE GENERATORS</b>												
1. Initial permit (prorated after 3/31 for generator, storage and treatment)	55.00	55.00	XX-364	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
2. Renewal of annual permit except generator producing less than 25lbs/30 days) postmarked by October 1	55.00	55.00	XX-364	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
3. Renewal of annual permit except generator producing less than 25lbs/30 days) postmarked after October 1	75.00	75.00	XX-364	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
4. Initial Transporter Registration (prorated after 3/31, includes 1 truck)	55.00	55.00	XX-364	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
5. Initial Registration of Each Additional Truck	10.00	10.00	XX-364	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
6. Annual Registration Renewal (postmarked by 10/01, includes 1 truck)	55.00	55.00	XX-364	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
7. Annual Registration Renewal (postmarked after 10/01, includes 1 truck)	75.00	75.00	XX-364	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
8. Annual Registration of Each Additional Truck	10.00	10.00	XX-364	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
<b>TANNING FACILITIES</b>												
1. Annual license fee	150.00	135.00	XX-369	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
1a. Transfer to headquarters		15.00	XX-910	TN	001206	000100	RV	R9000	10-2-021042	64200600	00	1302000000
2. Fee for each additional device	55.00	49.50	XX-369	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
2.a. Transfer to headquarters		5.50	XX-910	TN	001206	000100	RV	R9000	10-2-021042	64200600	00	1302000000
3. Late fee	25.00	25.00	XX-369	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
<b>BODY PIERCING</b>												
1. Initial License (prorated quarterly)	150.00	135.00	XX-349	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
1a. Transfer to headquarters		15.00	XX-910	IE	001206	000100	RV	PIERS	10-2-021042	64200600	00	1302000000
2. Temporary Establishment	75.00	67.50	XX-349	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
2a. Transfer to headquarters		7.50	XX-910	IE	001206	000100	RV	PIERS	10-2-021042	64200600	00	1302000000
3. Annual Renewal License Fee	150.00	135.00	XX-349	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
3a. Transfer to headquarters		15.00	XX-910	IE	001206	000100	RV	PIERS	10-2-021042	64200600	00	1302000000
4. Late fee	100.00	100.00	XX-349	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	ORG L4/L5	EO	OBJECT CODE	REVENUE CATEGORY	SI	OCA	FUND GF-SF-FID	BUDGET ENTITY	IBI	PROGRAM COMPONENT
<b>FOOD ESTABLISHMENTS</b>												
1. Annual Permit for Fraternal/Civic	160.00	144.00	XX-348	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
1a. Transfer to headquarters		16.00	XX-910	FP	001206	000100	RV	1O000	10-2-021042	64200600	00	1302000000
2. Annual Permit School Cafeteria Operating for 9 months or less	130.00	117.00	XX-348	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
2a. Transfer to headquarters		13.00	XX-910	FP	001206	000100	RV	1O000	10-2-021042	64200600	00	1302000000
3. Annual Permit School Cafeteria Operating for more than 9 months	160.00	144.00	XX-348	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
3a. Transfer to headquarters		16.00	XX-910	FP	001206	000100	RV	1O000	10-2-021042	64200600	00	1302000000
4. Annual Permit for Hospital/Nursing Food Service	210.00	189.00	XX-348	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
4a. Transfer to headquarters		21.00	XX-910	FP	001206	000100	RV	1O000	10-2-021042	64200600	00	1302000000
5. Annual Permit for Movie Theaters	160.00	144.00	XX-348	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
5a. Transfer to headquarters		16.00	XX-910	FP	001206	000100	RV	1O000	10-2-021042	64200600	00	1302000000
6. Annual Permit for Jails/Prisons	210.00	189.00	XX-348	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
6a. Transfer to headquarters		21.00	XX-910	FP	001206	000100	RV	1O000	10-2-021042	64200600	00	1302000000
7. Annual Permit for Bars/Lounges (Drink Service Only)	160.00	144.00	XX-348	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
7a. Transfer to headquarters		16.00	XX-910	FP	001206	000100	RV	1O000	10-2-021042	64200600	00	1302000000
8. Annual Permit for Residential Facilities	110.00	99.00	XX-348	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
8a. Transfer to headquarters		11.00	XX-910	FP	001206	000100	RV	1O000	10-2-021042	64200600	00	1302000000
9. Annual Permit for Child Care Centers without C&F license	85.00	76.50	XX-348	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
9a. Transfer to headquarters		8.50	XX-910	FP	001206	000100	RV	1O000	10-2-021042	64200600	00	1302000000
10. Annual Permit for Limited Food Service	85.00	76.50	XX-348	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
10a. Transfer to headquarters		8.50	XX-910	FP	001206	000100	RV	1O000	10-2-021042	64200600	00	1302000000
11. Annual Permit Other Food Service	160.00	144.00	XX-348	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
11a. Transfer to headquarters		16.00	XX-910	FP	001206	000100	RV	1O000	10-2-021042	64200600	00	1302000000
12. Plan Review	\$35/hour	\$35/hour	XX-348	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
13. Food Worker Training (per person)	10.00	10.00	XX-348	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
14. Request for Inspection	40.00	40.00	XX-348	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
15. Re-inspection (after the first reinspection)	30.00	30.00	XX-348	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
16. Late Renewal	25.00	25.00	XX-348	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
17. Alcoholic Beverage Inspection Approval	30.00	30.00	XX-348	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	ORG L4/L5	EO	OBJECT CODE	REVENUE CATEGORY	SI	OCA	FUND GF-SF-FID	BUDGET ENTITY	IBI	PROGRAM COMPONENT
<b>ONSITE SEWAGE DISPOSAL PROGRAM (OSTDS)</b>												
1. Application for permitting of an onsite sewage treatment and disposal system which includes application and plan review for new and repair permits	50.00	46.00	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
1a. Transfer to headquarters		4.00	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
2. Application and approval for existing system, does not include system inspection	35.00	32.20	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
2a. Transfer to headquarters		2.80	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
3. Application for permitting of a new Performance-based treatment system	125.00	115.00	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
3a. Transfer to headquarters		10.00	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
4. Site evaluation for a new system	115.00	105.80	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
4a. Transfer to headquarters		9.20	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
5. Site evaluation for a system repair or modification of system	75.00	69.00	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
5a. Transfer to headquarters		6.00	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
6. Site re-evaluation, new or repair or modification	75.00	69.00	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
6a. Transfer to headquarters		6.00	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
7. Permit for new systems, or modification to system	55.00	50.60	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
7a. Transfer to headquarters		4.40	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
8. New system or system modification installation inspection	80.00	73.60	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
8a. Transfer to headquarters		6.40	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
8b. Research fee to be collected in addition, and concurrent with the permit for a new system installation fee.	5.00	5.00	XX-910	RF	001206	000100	RV	B9000	10-2-021042	64200600	00	1302000000
9. Repair permit issuance which includes inspection	50.00	41.40	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
9a. Transfer to headquarters		3.60	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
9b. Transfer to headquarters for training center		5.00	XX-910	TC	001206	000100	RV	SEWTN	10-2-021042	64200600	00	1302000000
10. Inspection of system previously in use	50.00	46.00	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
10a. Transfer to headquarters		4.00	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
11. Reinspection fee per visit for site inspections after system construction approval	50.00	46.00	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
11a. Transfer to headquarters		4.00	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
12. Installation reinspection of non-compliant system per each site visit	50.00	46.00	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
12a. Transfer to headquarters		4.00	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
13. System abandonment permit, includes permit issuance and inspection	40.00	36.80	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
13a. Transfer to headquarters		3.20	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
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	000121	CD	8K000	20-2-141001	64200700	**	1306000000
14a. Transfer to headquarters		12.00	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	ORG L4/L5	EO	OBJECT CODE	REVENUE CATEGORY	SI	OCA	FUND GF-SF-FID	BUDGET ENTITY	IBI	PROGRAM COMPONENT
15. Amendments or changes to the operating permit during the permit period per change or amendment	50.00	46.00	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
15a. Transfer to headquarters		4.00	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
16. Aerobic treatment unit operating permit (biennial)	100.00	92.00	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
16a. Transfer to headquarters		8.00	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
17. Biennial operating permit fee for performance-based treatment systems. A prorated fee is to be charged beginning with second year of operation.	100.00	92.00	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
17a. Transfer to headquarters		8.00	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
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	000121	CD	8K000	20-2-141001	64200700	**	1306000000
18a. Transfer to headquarters		6.00	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
19. Tank manufacturer's inspection per annum	100.00	50.00	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
19a. Transfer to headquarters		50.00	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
20. Septage disposal service permit per annum	75.00	69.00	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
20a. Transfer to headquarters		6.00	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
21. Additional charge per pump out vehicle	35.00	32.20	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
21a. Transfer to headquarters		2.80	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
22. Portable or temporary toilet service permit per annum	75.00	69.00	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
22a. Transfer to headquarters		6.00	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
23. Additional charge per pump out vehicle	35.00	32.20	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
23a. Transfer to headquarters		2.80	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
24. Septage stabilization facility inspection fee per annum	150.00	138.00	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
24a. Transfer to headquarters		12.00	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
24. Septage disposal site evaluation fee per annum	200.00	184.00	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
24a. Transfer to headquarters		16.00	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
24. Aerobic treatment unit maintenance entity permit per annum	25.00	23.00	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
24a. Transfer to headquarters		2.00	XX-910	ST	001206	000100	RV	1E000	10-2-021042	64200600	00	1302000000
25. Variance application for a single family residence per each lot or building site	150.00	75.00	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
25a. Transfer to headquarters		75.00	XX-910	CR	001206	000100	RV	BY000	10-2-021042	64200600	00	1302000000
26. Variance application for a multi-family or commercial building per each building site	200.00	100.00	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
26a. Transfer to headquarters		100.00	XX-910	CR	001206	000100	RV	BY000	10-2-021042	64200600	00	1302000000
27. Inspection for construction of an injection well (FL Keys)	125.00	125.00	XX-361	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
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

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	ORG L4/L5	EO	OBJECT CODE	REVENUE CATEGORY	SI	OCA	FUND GF-SF-FID	BUDGET ENTITY	IBI	PROGRAM COMPONENT
5. Certificate of authorization each two year period	250.00											For headquarters use only

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	ORG L4/L5	EO	OBJECT CODE	REVENUE CATEGORY	SI	OCA	FUND GF-SF-FID	BUDGET ENTITY	IBI	PROGRAM COMPONENT
<b>DRINKING WATER</b>												
1. First Year Public Water Annual Operation Permit and Construction Permit - Limited Use	75.00	67.50	XX-357	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
1a. Transfer to headquarters		7.50	XX-910	64	001206	000100	RV	M5000	10-2-021042	64200600	00	1302000000
2. Second Year Public Water Annual Operation Permit - Limited Use	70.00	63.00	XX-357	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
2a. Transfer to headquarters		7.00	XX-910	64	001206	000100	RV	M5000	10-2-021042	64200600	00	1302000000
3. Multi-Family Water Construction Permit - serving 3 or 4 non-rental residences	40.00	36.00	XX-357	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
3a. Transfer to headquarters		4.00	XX-910	64	001206	000100	RV	M5000	10-2-021042	64200600	00	1302000000
4. Initial Operating Permit Fee After March 31 of Any Year	35.00	31.50	XX-357	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
4a. Transfer to headquarters		3.50	XX-910	64	001206	000100	RV	M5000	10-2-021042	64200600	00	1302000000
5. Non-SDWA Lab Sample (Sample Collection/Review of Analytical Results/Health Risk Interpretation):												
Bacterial Sample Collection	40.00	40.00	XX-357	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
Chemical Sample Collection	50.00	50.00	XX-357	DK	001020	000121	CD	8K000	20-2-141001	64200700	**	1306000000
Combined Chemical microbiological	55.00	55.00	XX-357	DK	001020	000121	CD	8K000	20-2-141001	64200700	*	1306000000
6. Reinspection of Multi-family Water System	25.00	25.00	XX-357	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
7. Reinspection of Public Water System	40.00	40.00	XX-357	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
8. Delineated Area Clearance Fee	50.00	50.00	XX-357	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
9. Limited Use Commercial Registered System	15.00	15.00	XX-357	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
10. Limited Use Commercial Public Water System Operating Permit Family Day Care Establishment	25.00	25.00	XX-357	DK	001092	000121	CD	8K000	20-2-141001	64200700	**	1306000000
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	000121	CD	8K000	20-2-141001	64200700	**	1306000000
<b>Safe Drinking Water Act (Delegated Counties)</b>												
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	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
b. Treatment plant - 1 MGD up to 5 MGD	6,000.00	6,000.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
c. Treatment plant - 0.25 MGD up to 1 MGD	4,000.00	4,000.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
d. Treatment plant - 0.1 MGD up to .25 MGD	2,000.00	2,000.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
e. Treatment plant - up to 0.1 MGD	1,000.00	1,000.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
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.												

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	ORG L4/L5	EO	OBJECT CODE	REVENUE CATEGORY	SI	OCA	FUND GF-SF-FID	BUDGET ENTITY	IBI	PROGRAM COMPONENT
a. Treatment plant - 5 MGD and above	7,500.00	7,500.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
b. Treatment plant - 1 MGD up to 5 MGD	6,000.00	6,000.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
c. Treatment plant - 0.25 MGD up to 1 MGD	4,000.00	4,000.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
d. Treatment plant - 0.1 MGD up to .025 MGD	2,000.00	2,000.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
e. Treatment plant - 0.01 up to 0.1 MGD	1,000.00	1,000.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
f. Treatment plant - up to 0.01 MGD	400.00	400.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
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	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
b. Treatment plant - 1 MGD up to 5 MGD	3,000.00	3,000.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
c. Treatment plant - 0.25 MGD up to 1 MGD	1,000.00	1,000.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
d. Treatment plant - 0.1 MGD up to .025 MGD	500.00	500.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
e. Treatment plant - up to 0.1 MGD	300.00	300.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
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	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
b. Serving a non-transient non-community public water systems	350.00	350.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
c. Serving a non-community public water system	250.00	250.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
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	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
b. Any other public water supply well.	250.00	250.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
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	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
b. .1 MGD up to 1 MGD	1,000.00	1,000.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
c. 0.01 up to .1 MGD	500.00	500.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
d. Up to 0.01 MGD	100.00	100.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
e. Lead and Copper Corrosion Fee	100.00	100.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
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	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
b. Up to 0.1 MGD	100.00	100.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
8. Fines and Forfeitures	Variable	Variable	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
9. General Permit Fee for any General Permit not specifically listed:	100.00	100.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
a. General Permits requiring Professional Engineer or Professional Geologist certification	250.00	250.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	ORG L4/L5	EO	OBJECT CODE	REVENUE CATEGORY	SI	OCA	FUND GF-SF-FID	BUDGET ENTITY	IBI	PROGRAM COMPONENT
a. General Permits not requiring Professional Engineer or Professional Geologist certification	100.00	100.00	XX-358	WC	001020	000121	CD	SDWCH	20-2-141001	64200700	**	1306000000
<b>Radioactive Materials Licenses - General</b>												
1. Annual fee: static elimination devices	\$25.00											For headquarters use only
2. Annual fee: measuring, gauging and control devices	\$25.00											For headquarters use only
3. Annual fee: in vivo testing license	\$125.00											For headquarters use only
4. Annual fee: in vitro testing license	\$125.00											For headquarters use only
5. Annual fee: depleted uranium license	\$125.00											For headquarters use only
<b>Radioactive Materials Licenses - Specific</b>												
<b>Application Fees</b>												
1. Source Material.												
a. Concentration of uranium from phosphate ores for the production of uranium as "yellow cake" or powdered solid;	\$6,907											For headquarters use only
b. Concentration of uranium from phosphate ores for the production of "green cake" or equivalent, moist or solid;	\$3,768											For headquarters use only
c. All other specific source material licenses excluding depleted uranium used as shielding and counterweights.	\$544											For headquarters use only
2. Special Nuclear Material (SNM).												
a. SNM in sealed sources contained in devices in measuring systems;	\$653											For headquarters use only
b. SNM not sufficient to form a critical mass, except as in 2.a., 2.c. and 5.e.	\$1,340											For headquarters use only
c. SNM to be used as calibration and reference sources.	\$205											For headquarters use only
3. Byproduct, naturally occurring or accelerator produced material.												
a. Processing or manufacturing for commercial distribution or industrial uses;	\$2,923											For headquarters use only
b. Processing or manufacturing and distribution of radiopharmaceuticals. This category includes radiopharmacies.	\$2,560											For headquarters use only
c. Industrial radiography performed only in an approved shielded radiography installation,	\$1,558											For headquarters use only
d. Industrial radiography performed only at the address indicated in the license, or at temporary job sites of the licensee;	\$1,643											For headquarters use only
e. Radioactive materials in sealed sources for irradiation of materials where the source is not removed from the shield and is less than 10,000 curies;	\$605											For headquarters use only
f.(l) Radioactive materials in sealed sources for irradiation of materials when the source is not removed from the shield and is greater than 10,000 curies and less than 100,000 curies, or where the source is less than 100,000 curies and is removed from the shield;	\$1,414											For headquarters use only

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	ORG L4/L5	EO	OBJECT CODE	REVENUE CATEGORY	SI	OCA	FUND GF-SF-FID	BUDGET ENTITY	IBI	PROGRAM COMPONENT
(II) Radioactive materials in sealed sources for irradiation of materials when the source is equal to or greater than 100,000 curies and less than 1,000,000 curies;	\$3,659											For headquarters use only
(III) Radioactive materials in sealed sources for irradiation of materials when the source is greater than 1,000,000 curies;	\$9,780											For headquarters use only
g. Distribution of items containing radioactive materials to persons under a general license;	\$1,643											For headquarters use only
h. Distribution of exempt quantities or items containing naturally occurring or accelerator produced material to persons exempt from licensing;	\$1,643											For headquarters use only
i. Well logging												
(I) Sealed sources or sub-surface tracer studies	\$1,135											For headquarters use only
(II) Sub-surface tracer studies and sealed sources	\$1,436											For headquarters use only
j. Nuclear Laundry;	\$3,200											For headquarters use only
k. Industrial or medical research and development;	\$1,184											For headquarters use only
l.(I) Fixed and portable gauging devices	\$605											For headquarters use only
(II) In Vitro and clinical laboratory	\$725											For headquarters use only
(III) Academic	\$978											For headquarters use only
IV) Possession of uranium or thorium, or their decay products, as a result of mining or processing	\$978											For headquarters use only
(V) All other specific licenses except as otherwise noted	\$725											For headquarters use only
m. Licenses of broad scope												
(I) Academic	\$3,200											For headquarters use only
(II) Medical	\$3,200											For headquarters use only
(III) Industrial or Research and Development	\$3,200											For headquarters use only
n. Gas chromatography devices;	\$434											For headquarters use only
o. Reference or calibration sources equal to or less than one millicurie total;	\$314											For headquarters use only
p. Nuclear service licenses, such as leak testing, instrument calibration, etc.;	\$518											For headquarters use only
4. Waste disposal or processing												
a. Commercial waste disposal or treatment facilities, including burial or incineration;	\$275,842											For headquarters use only
b. All other commercial facilities involving compaction, repackaging, storage or transfer;	\$27,084											For headquarters use only
c. Commercial treatment of radioactive materials for release to unrestricted areas.	\$5,760											For headquarters use only
5. Medical use												
a. Teletherapy or high dose rate remote after loading devices;	\$1,414											For headquarters use only

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	ORG L4/L5	EO	OBJECT CODE	REVENUE CATEGORY	SI	OCA	FUND GF-SF-FID	BUDGET ENTITY	IBI	PROGRAM COMPONENT
b. Medical institutions including hospitals, except 5.a. and 5.e.;	\$1,643											For headquarters use only
c. Private practice physicians except 5.a. and 5.d.;	\$1,184											For headquarters use only
d. Private practice physicians using only strontium 90 eye applicators, materials authorized by Rule 64E-5.631, F.A.C., and materials authorized by Rule 64E-5.630; F.A.C.	\$605											For headquarters use only
e. Nuclear powered pacemakers;	\$434											For headquarters use only
f. Mobile nuclear medicine services.	\$1,414											For headquarters use only
6. Civil defense.	\$544											For headquarters use only
7. Device, product, or sealed source safety evaluation.												
a. Device evaluation, per device;	\$1,208											For headquarters use only
b. Sealed source design, per source.	\$528											For headquarters use only
<b>Radioactive Materials Licenses - Specific Annual Fees</b>												
1. Source Material.												
a. Concentration of uranium from phosphate ores for the production of uranium as "yellow cake" or powdered solid;	\$11,942											For headquarters use only
b. Concentration of uranium from phosphate ores for the production of "green cake" or equivalent, moist or solid;	\$7,439											For headquarters use only
c. All other specific source material licenses excluding depleted uranium used as shielding and counterweights.	\$229											For headquarters use only
2. Special Nuclear Material (SNM).												
a. SNM in sealed sources contained in devices used in measuring systems;	\$518											For headquarters use only
b. SNM not sufficient to form a critical mass, except as in 2.a., above, and 2.c. and 5.e., below;	\$1,944											For headquarters use only
c. SNM to be used as calibration and reference sources.	\$109											For headquarters use only
3. Byproduct, naturally occurring or accelerator produced material.												
a. Processing or manufacturing for commercial distribution or industrial uses;	\$2,802											For headquarters use only
b. Processing or manufacturing and distribution of radiopharmaceuticals. This category includes radiopharmacies.	\$3,840											For headquarters use only
c. Industrial radiography performed only in an approved shielded radiography installation,	\$2,161											For headquarters use only
d. Industrial radiography performed only at the address indicated in the license, or at temporary job sites of the licensee;	\$2,657											For headquarters use only
e. Radioactive materials in sealed sources for irradiation of materials where the source is not removed from the shield and is less than 10,000 curies;	\$605											For headquarters use only
f.(l) Radioactive materials in sealed sources for irradiation of												

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	ORG L4/L5	EO	OBJECT CODE	REVENUE CATEGORY	SI	OCA	FUND GF-SF-FID	BUDGET ENTITY	IBI	PROGRAM COMPONENT
materials when the source is not removed from the shield and is greater than 10,000 curies and less than 100,000 curies, or where the source is less than 100,000 curies and is removed from the shield;	\$1,630											For headquarters use only
(II) Radioactive materials in sealed sources for irradiation of materials when the source is equal to or greater than 100,000 curies and less than 1,000,000 curies;	\$3,961											For headquarters use only
(III) Radioactive materials in sealed sources for irradiation of materials when the source is greater than 1,000,000 curies;	\$4,398											For headquarters use only
g. Distribution of items containing radioactive materials to persons under a general license;	\$2,150											For headquarters use only
h. Distribution of exempt quantities or items containing naturally occurring or accelerator produced material to persons exempt from licensing;	\$2,150											For headquarters use only
i. Well logging												
(I) Sealed sources or sub-surface tracer studies	\$1,498											For headquarters use only
(II) Sub-surface tracer studies and sealed sources	\$1,594											For headquarters use only
j. Nuclear Laundry;	\$5,651											For headquarters use only
k. Industrial or medical research and development;	\$1,474											For headquarters use only
l.(I) Fixed and portable gauging devices	\$966											For headquarters use only
(II) In Vitro and clinical laboratory	\$918											For headquarters use only
(III) Academic	\$1,171											For headquarters use only
IV) Possession of uranium or thorium, or their decay products, as a result of mining or processing	\$870											For headquarters use only
(V) All other specific licenses except as otherwise noted	\$1,002											For headquarters use only
m. Licenses of broad scope												
(I) Academic	\$7,346											For headquarters use only
(II) Medical	\$5,474											For headquarters use only
(III) Industrial or Research and Development	\$4,568											For headquarters use only
n. Gas chromatography devices;	\$314											For headquarters use only
o. Reference or calibration sources equal to or less than one millicurie total;	\$132											For headquarters use only
p. Nuclear service licenses, such as, leak testing, instrument calibration, etc.;	\$410											For headquarters use only
4. Waste disposal or processing												
a. Commercial waste disposal or treatment facilities, including burial or incineration;	\$250,555											For headquarters use only
b. All other commercial facilities involving compaction, repackaging, storage or transfer;	\$24,971											For headquarters use only

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c. Commercial treatment of radioactive materials for release to unrestricted areas.	\$5,735											For headquarters use only
5. Medical use.												
a. Teletherapy or high dose rate remote after loading devices;	\$1,378											For headquarters use only
b. Medical institutions including hospitals, except category 5.a. and 5.e.;	\$1,908											For headquarters use only
c. Private practice physicians except category 5.a. and 5.d.;	\$1,340											For headquarters use only
d. Private practice physicians using only strontium 90 eye applicators, materials authorized by Rule 64E-5.631, F.A.C., and materials authorized by Rule 64E-5.630; F.A.C.	\$748											For headquarters use only
e. Nuclear powered pacemakers;	\$266											For headquarters use only
f. Mobile nuclear medicine services.	\$1,625											For headquarters use only
6. Civil defense.	\$821											For headquarters use only
7. Device, product, or sealed source safety evaluation.												
a. Device evaluation, per device;	NONE											
b. Sealed source design, per source.	NONE											
Reclamation Fee	5% of annual licensing fee											For headquarters use only
<b>X-Ray Machine Annual Registration Fees</b>												
1. Medical, chiropractic, osteopathic, or naturopathic machines												
- First tube	\$145											For headquarters use only
Each additional tube	\$85											For headquarters use only
2. Veterinary machines - First tube	\$50											For headquarters use only
Each additional tube	\$34											For headquarters use only
3. Educational or industrial machines - First tube	\$47											For headquarters use only
Each additional tube	\$23											For headquarters use only
4. Dental or podiatry machines - First tube	\$31											For headquarters use only
Each additional tube	\$11											For headquarters use only
5. Medical accelerators	\$258											For headquarters use only
Each additional tube	\$148											For headquarters use only
6. Non-medical accelerators	\$81											For headquarters use only
Each additional tube	\$48											For headquarters use only
<b>Radiologic Technologist Certifications</b>												

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	ORG L4/L5	EO	OBJECT CODE	REVENUE CATEGORY	SI	OCA	FUND GF-SF-FID	BUDGET ENTITY	IBI	PROGRAM COMPONENT
1. Application and study guide (applicant also pays whatever fee the testing service charges)	\$75											For headquarters use only
2. Application without study guide (applicant also pays whatever fee the testing service charges)	\$50											For headquarters use only
3. Application through endorsement (no test needed)	\$45											For headquarters use only
4. Repeat examinations (applicant also pays whatever fee the testing service charges)	\$35											For headquarters use only
5. Renewal - first category	\$55											For headquarters use only
Each additional category	\$40											For headquarters use only
6. Change in status from active to inactive	\$40											For headquarters use only
7. Late renewal fee	\$100											For headquarters use only
8. Duplicate certificate	\$10											For headquarters use only
9. Listings and mailing labels, per name	\$0.05											For headquarters use only
Setup charge	\$55											For headquarters use only
10. Study guide	\$25											For headquarters use only
<b>Pre and Post Mining Fees</b>												
1. Gamma radiation exposure measurement (1 per acre)	\$7.50											For headquarters use only
2. Soil characterization measurement (1 per 20 acres)	\$320											For headquarters use only
3. Air monitoring measurements	\$165											For headquarters use only
4. Surface and ground water measurements	\$300											For headquarters use only
<b>Low-Level Radioactive Waste Inspection Fee</b>												
Cubic foot of waste shipped (minimum fee = \$50 per shipment)	\$1.95											For headquarters use only
<b>Low-Level Radioactive Waste Transport Fee</b>												
Annual transport permit	\$100											For headquarters use only
<b>Water Analysis Fees</b>												
1. Gross alpha	\$28											For headquarters use only
2. Gross beta	\$28											For headquarters use only
3. Radium 226	\$110											For headquarters use only
4. Radium 228	\$110											For headquarters use only
5. Uranium	\$110											For headquarters use only
6. Tritium	\$40											For headquarters use only
7. Strontium 89, strontium 90	\$95											For headquarters use only
8. Iodine 131	\$110											For headquarters use only
9. Photon emitters	\$128											For headquarters use only
<b>Laboratory Certification Fees</b>												
1. Safe drinking water certification	\$500											For headquarters use only
2. Clean water certification	\$500											For headquarters use only
3. Resource conservation recovery	\$500											For headquarters use only
4. Field of testing application	\$200											For headquarters use only