



Florida Communities Trust Annual Stewardship Report



Pursuant to Rule 62-815.013, F.A.C. (P-2000 Projects) or Rule 62-818.013, F.A.C. (Florida Forever Projects), Recipients of FCT funds must submit an annual stewardship report. The purpose of the stewardship report is to verify that FCT recipients are following conditions imposed at the time of award. Please fill in all blanks to the best of your ability. When completed, return this form to:

The Florida Communities Trust
 Florida Department of Environmental Protection
 3900 Commonwealth Boulevard, Mail Station 550
 Tallahassee, Florida 32399
 Email: FloridaCommunitiesTrust@dep.state.fl.us
 ftp site address: <ftp://depftp.dep.state.fl.us/pub/incoming/FCT/>

Note – when submitting the report electronically, it is helpful to incorporate the FCT project number into the file name.

***All fields are required, please indicate N/A for those not applicable.**

General Information

Date Submitted	
Reporting Period	to
FCT Project Number	
Project Name	
Project Address	
Recipient	
Key Contact(s) – please include email address and phone number for each	

Project Detail

Acres acquired with FCT assistance		Additional Acres	
Total Acres of the project site			
Is the Project Site open to public?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Date Opened	
Is the entire Project Site acquired?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Date Acquired	
If no, what year was the Project Management Plan updated to delete parcels not acquired?			

Site Development			
According to the Project Management Plan, what percentage of the Project Site development is completed?			
Acknowledgement Sign			
Is the required acknowledgement sign stating that "Funding for the acquisition of this Project Site was provided by the Florida Communities Trust" installed?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes: Year installed
Please include a current photograph of sign			

Future Land Use	
Has the FLUM been amended to conservation, recreation, open space, or other similar category?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please provide the date the FLUM was amended	
Did you provide FCT with documentation of the change? If no, please attach to this report	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes please provide date submitted to FCT	
What is the current land use designation?	

Zoning	
Has zoning for the Project Site been amended to conservation, recreation, open space, or another similar category?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please provide year amended	
What is the current zoning designation?	

Physical Improvements	
What is the number of recreational facilities required in Special Management Conditions for this Project Site?	

Additional Funding	
Have you received any additional funding in the form of grants, loans, donations, etc. for the development, restoration or maintenance of the Project Site?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, provide the funding source	
Amount of Additional Funding	\$

Sidewalk Connection	
Is a sidewalk connection onto the Project Site included in the Special Management Conditions?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, what year was the sidewalk connection completed?	

Paddling Trail Connection	
Is a connection to a paddling trail included in the Special Management Conditions?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, what year was the paddling trail connection completed?	

Recreational Trail Connection	
Is a connection to a recreational trail included in the Special Management Conditions?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, what year was the recreational trail connection completed?	

Ecological Corridor	
Is a connection to an ecological corridor included in the Special Management Conditions?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, what year was the ecological corridor connection completed?	

Stormwater Facility	
Is a stormwater facility included in the Special Management Conditions?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, what year was the stormwater facility completed?	
What type of stormwater facility was completed?	

Key Management Activities

Archaeological Survey	
Has an archaeological survey been completed on the Project Site?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, what year was the survey completed?	
Was a copy of survey submitted to the FCT for the grant project file? If no, please attach a copy to this report	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please provide date submitted to FCT	
Existing features (Include Site File No.)	

New features (Include Site File No.)	
Management recommendations	

Wetland Restoration/Planting	
Is wetland restoration or planting included in the Special Management Conditions?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, what year was the restoration or planting started?	
If yes, what year was the restoration or planting completed	
Describe the proposed or completed work	

Upland Restoration/Planting	
Is upland restoration or planting included in the Special Management Conditions?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, what year was the restoration or planting started?	
If yes, what year was the restoration or planting completed	
Describe the proposed or completed work	

Prescribed Fire Plan Developed	
Is a prescribed fire plan included in the Special Management Conditions?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, what year was the prescribed fire plan implemented?	
If you answered Yes above, were prescribed fire activities conducted in the past year?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please indicate the number of acres burned and the outcome	

Plant and Animal Survey	
Is a plant and animal survey included in the Special Management Conditions?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, what year was the survey completed?	
Describe any work done in this regard during the past year	

Exotic Plant Removal (required for all sites)	
In what year was exotic plant control started?	
Please describe exotic plant work completed this year. Include measurable details such as number of acres treated, or number of stems pulled:	

Feral Animal Removal (required for all sites)	
In what year was feral animal removal started?	
Please describe feral animal removal work completed this year. Include measurable details such as species and number of animals removed:	

Education	
Is public education included in the Special Management Conditions?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, does this include interpretive programs?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, how many interpretive programs per year are required by the Special Management Conditions?	
Please describe the interpretive programs conducted this year. Include measurable details such as the number of programs, number of attendees, subject matter, etc.:	
Are interpretive facilities such as signs or kiosks included in the Special Management Conditions?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, in what year was the sign(s) or kiosk(s) installed?	
Please describe the proposed or completed signs/kiosks:	

Is a museum/nature center/recreation center included in the Special Management Conditions?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, in what year was the museum/nature center/recreation center built?	

Sovereign Submerged Lands Documentation (lease, consent of use, waiver)	
Are sovereign submerged lands present on the Project Site?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, what documentation is being kept on file?	
Provide the year(s) and describe the activity(ies):	

Easements, Leases or Concessions	
Are easements, leases or concessions active on the Project Site?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please provide the year(s), the Board of Trustees lease number (if applicable), and describe the activity(ies):	

Special Events				
Are any special events, such as weddings, conferences, receptions, etc. being held on the Project Site?	Yes <input type="checkbox"/> No <input type="checkbox"/>			
If yes, please provide the type of event held and date:				
Is this an annual event?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Was any revenue generated?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Amount: \$

Other Issues Unique to the Site	
Please describe the issue:	

Management Plan Changes	
In the coming year, do you anticipate needing to amend the Management Plan for the Project?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please describe in detail:	

Photos

Please attach current photographs of the Project Site (submit as an attachment to this report). Particularly, please include photos that clearly indicate the required FCT recognition sign as well as any new or newly renovated facilities.

List photographs here:

1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	

Revenue generated on FCT Project Sites should be reported annually for the period of July 1 – June 30. Please visit <https://floridadep.gov/lands/land-and-recreation-grants/content/fct-annual-revenue-report> for additional information.

Please include a new time line for completion of any facilities not completed at this time.