

John O. Agwunobi, M.D., M.B.A. Secretary

October 7, 2003

Jeb Bush

Governor

J. M. "Chip" Oxley, Jr. Ex-Officio Clerk Board of County Commissioners Post Office Box 1010 Fernandina Beach, FL 32035-1010

Dear Mr. Oxley:

One original copy of the annual contract between the State and the County for the planned services provided by Nassau County Health Department is attached.

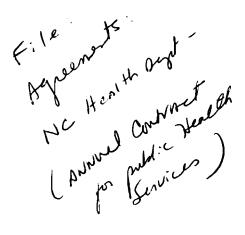
Your continued support of public health programs in Nassau County is appreciated. If you have any questions regarding the contract or any of our programs, please contact me at 277-7287, ext. 236.

Sincerely,

James A. Pearson

Business Manager

Attach



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

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

# RECITALS

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

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

C. Nassau 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. <u>RECITALS</u>. The parties mutually agree that the forgoing recitals are true and correct and incorporated herein by reference.

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

3. <u>SERVICES MAINTAINED BY THE CHD</u>. 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. <u>FUNDING</u>. 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 \$ 1,625,219.00 (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 \$891,007 (amount listed under the "Board of County Commissioners Annual Appropriations section of the revenue attachment).

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

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

- d. Either party may increase or decrease funding of this Agreement during the term hereof by notifying the other party in writing of the amount and purpose for the change in funding. If the State initiates the increase/decrease, the CHD will revise the Attachment II and send a copy of the revised pages to the County and the Department of Health, Bureau of Budget Management. If the County initiates the increase/decrease, the CHD will then revise the Attachment II and send a copy of the revised pages to the Department of Health, Bureau of Budget Management. If 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 Nassau County Post Office Box 517 Fernandina Beach, FL 32035-0517

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

6. <u>ADMINISTRATIVE POLICIES AND PROCEDURES</u>. 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 Nassau 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 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.

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

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

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

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

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

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

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

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

# 7. <u>FACILITIES AND EQUIPMENT</u>. 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 Countyowned 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. <u>TERMINATION</u>.

. . . . . .

a. <u>Termination at Will</u>. 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. <u>Termination Because of Lack of Funds</u>. 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. <u>Termination for Breach</u>. 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. <u>MISCELLANEOUS</u>. The parties further agree:

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

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

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

For the State:

For the County:

J. M. Oxley, Jr

Ex-Officio\_Clerk

P. O. Box 1010

Name

Title

Address

J. A. Pearson \_\_\_\_\_\_Name

Business Manager\_\_\_\_\_ Title

Nassau County Health Department P. O. Box 517 <u>Fernandina Beach, FL 32035-0517</u> Address

(904) 277-7287 x236\_\_\_\_\_ Telephone (904) 321-5700 Telephone

Fernandina Beach, FL 32035-1010

Board of County Commissioners

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

d. <u>Captions</u>. 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 35 page agreement to be executed by their undersigned officials as duly authorized effective the 1<sup>st</sup> day of October, 2003.

# BOARD OF COUNTY COMMISSIONERS FOR NASSAU COUNTY

# STATE OF FLORIDA

# DEPARTMENT OF HEALTH

SIGNED BY	Turke kins
NAME:	Vickie Samus
TITLE:	Board Chair
DATE:	9-22-03
ATTESTED	TO:
SIGNED BY	Molley
NAME:	J. M. Oxley, Jr.
TITLE:	Ex-Officio Clerk
DATE:	9-22-03

SIGNED BY	Bin q. Suser or
NAME: 🔗	John O. Agwunobi, M.D., M.B.A.
TITLE:	Secretary
DATE:	9.25.03
SIGNED BY	: The Sedel
NAME:	E. J. Ngo-Seidel, M.D., M.P.H.
TITLE:	CHD Director
DATE:	9/12/03

Approved as to form by the Nassau County Attorney:



# ATTACHMENT I

### NASSAU 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:

	Service	Requirement
1.	Sexually Transmitted Disease Program	Requirements as specified in FAC 64D-3 and F.S. 384 and the CHD Guidebook Internal Operating Policy STD 6 and 7.
2.	Dental Health	Monthly reporting on DH Form 1008*.
3.	Special Supplemental Nutrition Program for Women, Infants and Children.	Service documentation and monthly financial reports as specified in DHM 150-24* and all federal, state and county requirements detailed in program manuals and published procedures.
4.	Healthy Start/ Improved Pregnancy Outcome	Requirements as specified in the Healthy Start Standards and Guidelines 1998 and as specified by the Health Start Coalitions in contract with each county health department.
5.	Family Planning	Periodic financial and programmatic reports as specified by the program office and in the CHD Guidebook, Internal Operating Policy FAMPLAN 14*
6.	Immunization	Periodic reports as specified by the department regarding the surveillance/investigation of reportable vaccine preventable diseases, vaccine usage accountability, the assessment of various immunization levels and forms reporting adverse events following immunization and Immunization Module quarterly quality audits and duplicate data reports.
7.	Chronic Disease Program	Requirements as specified in the Community Intervention Program (CIP) and the CHD Guidebook.
8.	Environmental Health	Requirements as specified in DHP 50-4* and 50-21*
9.	HIV/AIDS Program	Requirements as specified in Florida Statue 384.25 and64D-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.
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

# NASSAU COUNTY HEALTH DEPARTMENT

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

	Estimated State Share of CHD Trust Fund Balance as of 09/30/03	Estimated County Share of CHD Trust Fund Balance as of 09/30/03	Total	ı
1. CHD Trust Fund Ending Balance 09/30/03	\$218,917	\$238,949	\$457,866	
2. Drawdown for Contract Year October 1, 2003 to September 30, 2004			\$0	I.
3. Special Capital Project use for Contract Year October 1, 2003 to September 30, 2004	\$71,209	\$53,719	\$124,928	
4. Balance Reserved for Contingency Fund October 1, 2003 to September 30, 2004	\$147,708	\$185,230	\$332,938	

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

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

Pursuant to 154.02, F.S., At a minimum, the trurst 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.

# TTACHMENT NASSAU COUNTY HEALTH DEPARTMENT Part II. Sources of Contributions to County Health Department ?

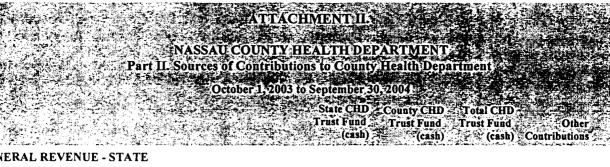
October 1, 2003 to September 30, 2004 State CHD County CHD State CHD, County CHD Trust Fund (cash) (cash) (cash) Contributions

Other

Total

#### 1. GENERAL REVENUE - STATE

015011	ALG/CONTRIBUTION TO CHDS-PRIMARY CARE	6,500	0	6,500	0	6,500
015011	ALG/PRIMARY CARE	123,500	0	123,500	0	123,500
015011	PRIMARY CARE SPECIAL PROJECT	0	0	0	0	0
015012	G/A EPILEPSY SERVICES	0	0	0	0	0
015048	ALG/CONTR TO CHDS-STD PROGRAM	0	0	0	0	0
015050	ALG/CESSPOOL IDENTIFICATION AND ELIMINATION	0	0	0	0	0
015050	ALG/CONTR TO CHDS	760,793	0	760,793	0	760,793
015050	ALG/CONTR TO CHDS-MIGRANT LABOR CAMP SANITATION	0	0	0	0	0
015050	ALG/CONTR. TO CHDS-DENTAL PROGRAM	27,900	0	27,900	0	27,900
015050	ALG/CONTR. TO CHDS-IMMUNIZATION OUTREACH TEAMS	4,423	0	4,423	0	4,423
015050	ALG/CONTR. TO CHDS-INDOOR AIR ASSIST PROG	0	0	0	0	0
015050	ALG/CONTR. TO CHDS-SOVEREIGN IMMUNITY	0	0	0	0	0
015050	CITIZENS AGAINST TOXIC EXPOSURE (CATE)	0	0	0	0	0
015050	COMMUNITY TB PROGRAM	11,155	0	11,155	0	11,155
015050	CONTR TO CHDS - DUVAL TEEN PREGNANCY PREVENTION	0	0	0	0	0
015050	FIRST STEP - MOTHERS AND INFANTS PROGRAM	0	0	0	0	0
015050	HEALTHY BEACHES MONITORING	18,935	0	18,935	0	18,935
015050	INTERDISCIPLINARY MANAGED CARE INITIATIVE	0	0	0	0	0
015050	LA LIGA CONTRA EL CANCER	0	0	0	0	0
015050	MANATEE COUNTY RURAL HEALTH SERVICES	0	0	0	0	0
015050	MEDIVAN PROJECT - ELDERLY INTEREST	0	0	0	0	0
015050	METRO ORLANDO URBAN LEAGUE TEENAGE PREG PREV	0	0	0	0	0
015050	RED LEGISLATION - GAP GRANT (CAT 050310)	0	0	0	0	0
015050	SPECIAL NEEDS SHELTER PROGRAM	0	0	0	0	0
015065	ALG/CONTR TO CHDS-AIDS PATIENT CARE	0	0	0	0	0
015065	ALG/CONTR TO CHDS-AIDS PREV & SURV & FIELD STAFF	0	0	ů 0	0	0
015115	VOLUNTEER SCHOOL HEALTH NURSE GRANT	70,000	0	70,000	0	70,000
015123	ALG/FAMILY PLANNING	35,440	0	35,440	0	35,440
015124	ALG/IPO - OUTREACH SOCIAL WORKERS CAT. 050707	0	0	0	0	0
015124	ALG/IPO HEALTHY START	0	0	0	0	0
015124	ALG/IPO HEALTHY START/IPO CAT 050707	0	0	0	0	0
015124	ALG/IPO-INFANT MORTALITY PROJECT CAT. 050707	0	0	0	0	0
015124	ALG/MCH HEALTHY START/IPO CAT 050870	0	0	0	0	0
015124	ALG/MCH-INFANT MORTALITY PROJECT CAT. 050870	0	0	0	0	0
015124	ALG/MCH-OUTREACH SOCIAL WORKERS CAT 050870	0	0	0	ů	0
015137	ALG/CONTR_TO CHDS-MCH HEALTH - FIELD STAFF COST	0 .	ů 0	0	Õ	0
015137	HEALTHY START - DATA COLLECTION PROJECT STAFF	0	0	0	ů 0	0
015140	ALG/SCHOOL HEALTH/SUPPLEMENTAL	0	0	0	õ	0
015050	Health Promotion and Education Initiative	0	0	0	0	0
		-		v	-	-
GENERAL	. REVENUE TOTAL	1,058,646	0	1,058,646	0	1,058,646
2. NON G	ENERAL REVENUE - STATE					
001009	Debit Memo-Bad Checks	0	0	0	0	0
010304	Stationary Pollutant Storage Tanks	65,548	0	65,548	0	65,548
015000	Transfer	0	0	0	0	0
015010	ALG/CONTR TO CHDS-REBASING TOBACCO TF	13,739	0	13,739	0	13,739
015010	ENHANCED DENTAL SERVICES TOBACCO TF	0	0	0	0	0
015010	FL HEPATITIS & LIVER FAILURE PREVENTION/CONTROL	0	0	0	0	0



#### 2. NON GENERAL REVENUE - STATE

015010	SUPER ACT PROGRAM ADM TF	0	0	0	0	0
015016	G/A EPILEPSY PREVENTION AND EDUCATION EPILEPSY TF	0	0	0	0	0
015020	FOOD AND WATERBORNE DISEASE PROGRAM ADM TF	0	0	0	0	0
015026	ALG/CONTR. TO CHDS-BIOMEDICAL WASTE/DEP ADM TF	2,056	0	2,056	0	2,056
015047	SUPER ACT PROGRAM (CAT 050329 OCA 9V000)ADMIN TF	0	0	0	0	0
015072	ALG/CONTR. TO CHDS-SAFE DRINKING WATER PRG/DEP ADM	0	0	0	0	0
015084	VARICELLA IMMUNIZATION REQUIREMENT TOBACCO TF	2,367	0	2,367	0	2,367
015170	TOBACCO COORDINATION	0	0	0	0	0
015172	FULL SERVICE SCHOOLS - TOBACCO TF	63,977	0	63,977	0	63,977
015174	BASIC SCHOOL HEALTH - TOBACCO TF	70,862	0	70,862	0	70,862
NON GENI	ERAL REVENUE TOTAL	218,549	0	218,549	0	218,549
3. FEDER	AL FUNDS - State					
007000	WINGATE DISEASE & SYMPTON PREVALENCE SURVEY	0	0	0	0	0
007000	CHILDHOOD LEAD POISONING PREVENTION	0	0	0	0	0
007000	COMPREHENSIVE CARDIOVASCULAR PROGRAM	0	0	0	0	0
007000	FEDERAL COASTAL BEACH MONITORING PROGRAM	17,876	0	17,876	0	17,876
007000	STATE PROGRAMS TO PREVENT OBESITY 2003-04	0	0	. 0	0	0
007030	PHBG/MIGRANT LABOR CAMP SANITATION	0	0	0	0	0
007044	PHBG/RAPE AWARENESS	0	0	0	0	0
007049	STD PROGRAM-CSPS	0	0	0	0	0
007049	STD PROGRAM-INFERTILITY PROJECT	0	0	0	0	0
007049	STD PROGRAM-MED & LAB SVCS TRNG CNTR	0	0	0	0	0
007049	STD PROGRAM-STD/PHY TRAINING CENTER	0	0	0	0	0
007049	STD PROGRAM-SYPHILIS ELIMINATION PROJECT	0	0	0	0	0
007051	FGTF/WIC ADMINISTRATION	250,378	0	250,378	0	250,378
007056	HEALTH PROGRAM FOR REFUGEES	0	0	0	0	0
007056	REFUGEE HEALTH TB TARGETED TESTING	0	0	0	0	0
007058	FGTF/DIABETES CONTROL	0	0	0	0	0
007062	FGTF/AIDS EPIDEMIOLOGICAL RESEARCH STUDY	0	0	0	0	0
007063	PHBG/COMPREHENSIVE COMM CARDIO HLTH PRGM	0	0	0	0	0
007064	AIDS SEROPREVALENCE	0	0	0	0	0
007064	EVAL INTEG HIV/AIDS SURV SYST PERFORMANCE	0	0	0	0	0
007064	FGTF/AIDS SURVEILLANCE	0	0	0	0	0
007065	AIDS PREVENTION	0	0	0 0	0	0
007066	FGTF/RYAN WHITE	0	0	0	0	0
007066	FGTF/RYAN WHITE - EMERGING COMMUNITIES	0	0	ů 0	0	0
007066	FGTF/RYAN WHITE-AIDS DRUG ASSIST PROG-ADMIN	0	0	0	0	0
007066	FGTF/RYAN WHITE-CONSORTIA	0	0	0	0	0
007067	TUBERCULOSIS CONTROL - FEDERAL GRANT	0	0	0	0	0
007068	FGTF/AIDS INMATE INTERVENTION	0	0	0	ů 0	0
007069	FGTF/AIDS MINORITY INVOLVEMENT IN HIV	0	0	0	0	0
007077	BIOTERR SURVEILLANCE & CAPACITY/US ATTACK 2002	6,410	0	6,410	õ	6,410
007077	BIOTERR SURVEILLANCE & EPIDEMIOLOGY	32,357	0	32,357	õ	32,357
007077	BIOTERRORISM NETWORK COMMUNICATIONS	0	0	0	0	0
007077	BIOTERRORISM PLANNING & READINESS	0	0	0	0	0
007084	FGTF/IMMUNIZATION ACTION PLAN	3,494	0	3,494	0	3,494
007084	FGTF/IMMUNIZATION ACTION FLAN	0	0	3,494 0	0	0
VV/V04		v	Ŭ	U	v	v

# ATTACHMENT

# NASSAU COUNTY HEALTH DEPARTMENT Part II. Sources of Contributions to County Health Department October 1, 2003 to September 30, 2004 State CHD County CHD Total CHD Trust Fund, Trust Fund Trust Fund Other (cash) (cash) Courtibutions

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3.	FEDERAL	FUNDS -	State
υ.	LEDENU	FORDS-	State

007084	FGTF/IMMUNIZATION-WIC LINKAGES	0	0	0	0	0
007084	IMMUNIZATION SPECIAL PROJECT	2,138	0	2,138	0	2,138
007084	IMMUNIZATION SI LUIAL I NOILE I IMMUNIZATION SUPPLEMENTAL - 2002	2,150	0	2,138	0	2,150
007084	SMALLPOX VACCINATION PROJECT	0	0	0	0	ů 0
007085	FGTF/BREAST & CERVICAL CANCER-ADMIN/CASE MAN	0	0	0	0	0
007127	MCH BGTF-MCH/CHILD HEALTH	10,683	0	10,683	ů 0	10,683
007127	MCH BGTF-MCH/CHILD HEALTH AGES 0-1 YR	0	0	0	ů 0	0
007132	MCH BGTF-MCH/DENTAL PROJECTS	30,300	0	30,300	ů 0	30,300
007133	FGTF/FAMILY PLANNING TITLE X SPECIAL INITIATIVES	0	0	0	0	0
007133	FGTF/FAMILY PLANNING-TITLE X	52,920	0	52,920	0	52,920
007133	MCH BGTF-GADSDEN SCHOOL CLINIC	0	ů	0	0	0
007134	MCH BGTF-HEALTHY START IPO	0	ů	0	0	0
007134	MCH BGTF-INFANT MORTALITY PROJECT	0	ů 0	0	0	0
007134	MCH BGTF-OUTREACH SOCIAL WORKERS	0	0	0	0	0
007135	FGTF/ABSTINENCE EDUCATION PROGRAM	0	0	0	0	0
015021	MEDIPASS WAIVER-HLTHY STRT CLIENT SERVICES	0	0	0	0	0
015021	MEDIPASS WAIVER-NOTHT STRT CLIENT SERVICES	0	0	0	0	0
015060	Entrant Reimburement Transfer	0	0	0	0	0
015075	FULL SERVICE SCHOOLS-TANF	7,016		-	0	7,016
015075	KIDCARE OUTREACH REFUGEE-ENTRANT	,,010	0	1,010	0	0
015075	SCHOOL HEALTH-SUPPLEMENT-TANF	0	0	0 0	0	0
015075	TANF ABSTINENCE EDUCATION	0	0	0	0	0
015075	TANF ABSTINENCE EDUCATION TITLEXXI/SCHOOL HEALTH/SUPPLEMENTAL	0	0	0	0	0
015075	IIILEXXUSCHOOL HEALTH/SUPPLEMENTAL	v	v	0	v	v
FEDERAL	FUNDS TOTAL	413,572	0	413,572	0	413,572
4. FEES A	SSESSED BY STATE OR FEDERAL RULES - STATE					
001026	Returned Check Ser Fees	0	0	0	0	0
001091	Communicable Disease Fees	0	0	0	0	0
001092	Environmental Health Fees	135,768	0	135,768	0	135,768
001092	OSDS Repair Permit	0	0	0	0	0
001092	OSDS Permit Fee	0	0	0	0	0
001092	I & M Zoned Operating Permit	0	0	0	0	0
001092	Aerobic Operating Permit	0	0	0	0	0
001092	Septic Tank Site Evaluation	0	0	0	0	0
001113	Mobile Home and Parks	674	0	674	0	674
001132	Food Hygiene Permit	7,080	0	7,080	0	7,080
001135	OSDS Variance Fee	300	0	300	0	300
001139	Migrant Housing Permit	0	0	0	0	0
001140	Biohazard Waste Permit	5,215	0	5,215	0	5,215
001142	Non SDWA Lab Sample	615	0	615	0	615
001144	Tanning Facilities	4,005	0	4,005	0	4,005
001145	Swimming Pools	12,641	0	12,641	0	12,641
001149	Body Piercing	135	0	135	0	135
001165	Private Water Constr Permit	0	0	0	0	0
001166	Public Water Annual Oper Permit	0	0	0	0	0
001166	Public Water Constr Permit	0	0	0	0	0
001166	Non-SDWA System Permit	0	0	0	0	0
001170	Lab Fee Chemical Analysis	0	0	0	0	0
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# ATTACHMENTIL. NASSAU COUNTY: HEALTH DEPARTMENT Part II. Sources of Contributions to County Health Department October 1, 2003 to September 30, 2004 State CHD County CHD Total CHD Trust Fund Trust Fund Trust Fund Other (cash) (cash) (cash) (cash) Contributions

ATTACHMENT II.

Total

4. FEES A	SSESSED BY STATE OR FEDERAL RULES - STATE					an a
001211	Safe Drinking Water	0	0	0	0	0
010403	Fees-Copy of Public Doc	0	0	0	0	0
015052	Transfers-Mobile Home/RV Park	0	0	0	0	0
FEES ASSI	ESSED BY STATE OR FEDERAL RULES TOTAL	166,433	0	166,433	0	166,433
5. OTHER	CASH CONTRIBUTIONS - STATE					
090001	Draw down from Public Health Unit	0	0	0	0	0
015029	Tranfers Intra Agency	0	0	0	0	0
015121	Super Act Reimbursements	15,000	0	15,000	0	15,000
015139	Well Surveillance Reimbursement - Pesticide	0	0	0	0	0
OTHER C	ASH CONTRIBUTIONS TOTAL	15,000	0	15,000	0	15,000
6. MEDIC	AID - STATE/COUNTY					
001052	Medicaid Receipts - Part B	0	0	0	0	0
001052	CHD Incm:Medicaid-Pharmacy	0	0	0	0	ů 0
001050	Medicaid EIP	ů	0	0	0	ů 0
001080	CHD Incm:Medicaid-Other	ů 0	0	0	0	ů 0
001081	CHD Incm:Medicaid-BesDT	ů	0		0	ů 0
001082	CHD Incm:Medicaid-Dental	<b>93,967</b>	134,831	228,798	0	228,798
001082	CHD Incm:Medicaid-Pental	6,975	62,775	69,750	0	69,750
001084	CHD Incm:Medicaid-Physician	0	02,775	09,750	0	0
001085	CHD Incm:Medicaid-Nursing	0	0	0	0	0
001086	CHD Inem: Co-Insurance	0	0	0	0	0
001087	CHD Incm:Medicaid-STD	0	0	0 0	ů 0	0
001088	CHD Incm:Med Reimb AZT Disp Fee	0	0	0	0 0	0
001089	Medicaid AIDS	0	0	0	0	0
001147	Medicaid HMO Rate	0	0	0	0	0
001148	Medicaid-HMO Admin	0	0	0	0 0	0
001181	CHD Incm:Medicaid Transportation	0	0	0	0	0
001191	CHD Incm:Medicaid Maternity	0	0	0	0 0	0
001192	CHD Incm:Medicaid Comp. Child	2,238	3,212	5,450	0	5,450
001193	CHD Incm:Medicaid Comp. Adult	20,556	29,494	50,050	ů 0	50,050
001194	CHD Incm:Medicaid Sonagram	0	0	0	0	0
001208	Medipass \$3.00 Adm. Fee	821	1,179	2,000	0	2,000
MEDICAL		124,558	231,490	356,048	0	356,048
	CABLE REVENUE - STATE					
018001	Refunds, Salary	1,000	0	1,000	0	1,000
018003	Refunds, other Personal Services	0	0	1,000	0	0
018004	Refunds, Expenses	1,000	0	1,000	0	1,000
018005	Refunds, Expenses Refunds Grants to Local Gov't	0	0	1,000	0	0
018006	Refunds, Operating Capital Outlay	0	0	0	0	ů
018010	Refunds, Special Category	0	0	0	0	0
018011	Refunds, Other	0	ů 0	0	0	0
018013	DMS Refunds by Journal Transfer-65900	0	0	0	0	0
018099	Refunds, Certified Forward	0	ů 0	0	0	0
029010	Sale of Fixed Assets	0	0	0	0 0	0
			-	v	v	

# ATTACHMENT II. NASSAU COUNTY HEALTH DEPARTMENT Part II. Sources of Contributions to County Health Department

October 1, 2003 to September 30, 2004 State CHD - County CHD - Total CHD Trust Fund

Trust Fund Trust Fund Other (cash) (cash) Contributions

		(cash)	(cash)	(cash) C	ontributions	Total -
7. ALLOO	CABLE REVENUE - STATE	an pho ann an Sannaig na Guireanna an Sannaig	egianter af niveladara Seria din vari	n nagradaton nagrad	talan di sena da seria da da seria san di seria seria da da seria da seria da seria da seria da seria da seria	وي منهم منهم المراجع منهم المراجع منهم الم
037000	Prior Year Warrant	0	0	0	0	0
038000	12 Month Old Warrant	0	0	0	0	0
	BLE REVENUE TOTAL	2,000	0	2 000	0	2,000
		,	Ū	2,000	Ū	2,000
8. OTHE	R STATE CONTRIBUTIONS NOT IN CHD TRUST FUN	ND-STATE				
	State Pharmacy Services	0	0	0	36,242	36,242
	State Laboratory Services	0	0	0	69,784	69,784
	State TB Services	0	0	0	0	0
	State Immunization Services	0	0	0	30,514	30,514
	State STD Services	0	0	0	0	0
	State Construction/Renovation	0	0	0	0	0
	WIC Food	0	0	0	686,336	686,336
	AIDS Drug Assistance Program	0	0	0	60,544	60,544
	Other (specify)	0	0	0	0	0
	Other (specify)	0	0	0	0	0
	Other (specify)	0	0	0	0	0
OTHER S	TATE CONTRIBUTIONS TOTAL	0	0	0	883,420	883,420
9. DIREC	T COUNTY CONTRIBUTIONS - COUNTY					
008030	Grants-County Tax Direct	<b>۴</b>	891,007	891,007	0	891,007
008034	Grants Cnty Commsn Other	0	0	0	0	0
BOARD	OF COUNTY COMMISSIONERS TOTAL	0	891,007	891,007	0	891,007
	AUTHORIZED BY COUNTY ORDINANCE OR RESO	LUTION - COUNTY		0,1,00,		
001004		0	0	0	0	0
001060	Child Car Seat Prog Vital Statistics Fees Other	ů 0	0	0 0	0	0
001062	Rabies Vaccine	Û Û	0	0	0	0
001062	Rabies Vaccine	0	0	0	0	0
001002	Adult Enter. Permit Fees	ů 0	0	0	0	0
001077	Primary Care Fees	0	43,700	43,700	0	43,700
001093	Communicable Disease Fees	0	100	43,700 100	0	100
001095	Environmental Health Fees	0	56,845	56,845	ů	56,845
001114	New Birth Certificates	0	2,750	2,750	0	2,750
001115	Death Certificates	0	13,750	13,750	0	13,750
001116	Computer Access Fee	0	0	0	0	0
001117	Vital Stats-Adm. Fee 50 cents	0	175	175	0	175
001195	Primary Care Transfer Fees	0	0	0	0	0
001196	Water Analysis-Potable	0	0	0 0	0	0
	THORIZED BY COUNTY TOTAL	0	117,320	-	0	117,320
	ER CASH AND LOCAL CONTRIBUTIONS - COUNTY	° °	117,520	117,320	v	117,520
001000	Fees Other	0	0	0	0	0
001000	Recovery-Bad Checks	0	0	0	0	0
001010	Recovery-Bad Checks Returned Check Fee	0	25	0	0	25
001028	Third Party Reimbursement	0	36,100	25		36,100
001029	Print Party Reimbursement	0	50,100	36,100	0	50,100

0

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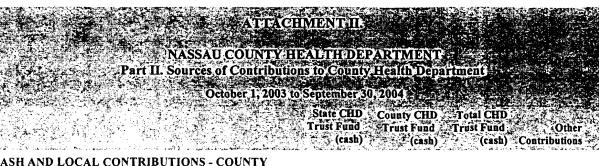
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001072

Ryan White Title I



#### 11. OTHER CASH AND LOCAL CONTRIBUTIONS - COUNTY

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001073	Ryan White Title II	0	0	0	0	0
001075	Ryan White Title III	0	0	0	0	0
001090	Medicare	0	20,000	20,000	0	20,000
001190	Health Maintenance Organ. (HMO)	0	0	0	0	0
005040	Interest Earned	0	0	0	0	0
005041	Interest Earned-State Investment Account	0	0	0	0	0
007010	U.S. Grants Direct	0	0	0	0	0
008010	Grants Contracts Frm Cities Direct	0	0	Q	0	0
008031	County AIDS Education	0	0	0	0	0
008033	County Contributions For Facilities	0	0	0	0	0
008050	Grants-Cnty Sch Board Direct	0	77,492	77,492	0	77,492
008090	Grants other Local Govn't Direct	0	0	0	0	0
008094	Grnts/Contracts other Agencies Direct	0	505,672	505,672	0	505,672
008095	Grants Cnty Sect 403.102 Air Pol	0	0	0	0	0
008099	Reimb/Rebate Local Govn't	0	0	0	0	0
010300	Sale of Goods and Services	0	0	0	0	0
010301	Exp Witness Fee Consultnt Charges	0	0	0	0	0
010302	Sale of Goods and Services, to Other Agencies	0	0	0	0	0
010402	Recycle Paper Sales	0	0	/ 0	0	0
010403	Fees-Copies of Documents	۰ 0	800	800	0	800
010405	Sale of pharmaceuticals	0	0	0	0	0
010408	Copy Fess Intra/Inter Agency	0	500	500	0	500
010409	Sale of Goods and Services Outside State Government	0	0	0	0	0
011001	Healthy Start Coalition Contributions	0	0	0	0	0
011007	Cash Donations Private	0	60	60	0	60
011098	Donation School Based Clinic	0	0	0	0	0
011099	Other Grants/Donations Direct	0	12	12	0	12
011522	Other Grant DOE	0	0	0	0	0
012020	Fines and Forfeitures	0	0	0	0	0
012021	Return Check Charge	0	0	0	0	0
028010	Insurance Recoveries-Fire Losses	0	0	0	0	0
028010	Insurance Recoveries-Fire Losses	0	0	0	0	0
028020	Insurance Recoveries-Other	0	0	0	0	0
090002	Draw down from Public Health Unit	0	0	ů	0	0
001015	Recovery of Collection of Agency Placements	0	0	0	0	0
011066	Ryan White Local Revenues	0	0	ů 0	ů 0	0
011067	AIDS Insurance Continuation Project	0	0	0	ů 0	0
	ASH AND LOCAL CONTRIBUTIONS TOTAL	0	640,661	640,661	ů 0	640,661
	CABLE REVENUE - COUNTY			040,001		
018001	Refunds, Salary	0	1,000	1,000	0	1,000
018003	Refunds, other Personal Services	0	0	0	0	0
018004	Refunds, Expenses	0	1,000	1,000	0	1,000
018005	Refunds Grants to Local Gov't	0	0	0	0	0
018006	Refunds, Operating Capital Outlay	0	0	0	0	0
018010	Refunds, Special Category	0	0	0	0	0
018011	Refunds, Other	0	0	0	0	0
018013	DMS Refunds by Journal Transfer-65900	0	0	0	0	0

# ATTACHMENT II. NASSAU COUNTY HEALTH DEPARTMENT Part II. Sources of Contributions to County Health Department October 1, 2003 to September 30, 2004 State CHD County CHD Total C

		State CH	D d	County CHD Trust Fund	Total C Trust F	HD	. Other	
							Contributions	Total
12. ALLO	CABLE REVENUE - COUNTY	an de linden en en die Friedelikerten schipmen ihn die streffelige schrieffeligen.		na se serio provinciana. Na seconda da seconda d				an an tha an ann an Anna an Anna Anna Anna Anna
018099	Refunds, Certified Forward		0	0		0	0	0
029010	Sale of Fixed Assets		0	0		0	0	0
037000	Prior Year Warrant		0	0		0	0	0
038000	12 Month Old Warrant		0	0		0	0	0
COUNTY	ALLOCABLE REVENUE TOTAL		0	2,000	2	,000	0	2,000
13. BUILI	DINGS - COUNTY							
	Annual Rental Equivalent Value		0	0		0	139,740	139,740
	Maintenance		0	0		0	19,926	19,926
	Other (specify)		0	0		0	0	0
	Other (specify)		0	0		0	0	0
	Other (specify)		0	0		0	0	0
	Other (specify)		0	0		0	0	0
	Other (specify)		0	0		0	0	0
BUILDING	5S TOTAL		0	0		0	159,666	159,666
14. OTHE	R COUNTY CONTRIBUTIONS NOT IN CHD TRU	ST FUND - COUN	ΤY					
	Other County Contribution of some unknow origin		0	0	/	0	0	0
	Other County Contribution (specify)	r`	0	0		0	0	0
	Other County Contribution (specify)		0	0		C	0 0	0
	Other County Contribution (specify)		0	0		C	) 0	0
	Other County Contribution (specify)		0	0		0	) 0	0
OTHER C	OUNTY CONTRIBUTIONS TOTAL		0	0		C	) 0	0
GRAND TO	DTAL CHD PROGRAM	1,998,7	758	1,882,478	3,881	,236	1,043,086	4,924,322

ATTACHMENT II.

NASSAU COUNTY: HEALTH DEPARTMENT Part III. Planned Staffing, Clients, Services, And Expenditures By Program Service Area Within Each Level Of Service October 1,2003 to September 30, 2004 Quarterly Expenditure Plan FTE's Clients lst 2nd 3rd 4th (0.00) Units Services (Whole dollars only) County State Total

. COMMUNICABLE DISEASE CONTRO							<b></b>			
Immunization (101)	1.90	1,441	3,550	36,058	16,540	24,715	21,547	47,528	51,332	98,860
STD (102)	0.24	85	119	6,173	6,174	6,173	6,174	9,172	15,522	24,694
A.I.D.S. (103)	1.32	175	556	17,485	17,485	17,485	17,485	58,478	11,462	69,940
TB Control Services (104)	0.34	42	244	3,467	3,467	3,467	3,467	2,713	11,155	13,868
Comm. Disease Surv. (106)	2.15	0	360	32,745	32,745	32,745	32,745	78,588	52,392	130,980
Hepatitis Prevention (109)	0.00	0	0	0	0	0	0	0	0	0
Public Health Preparedness and Response (116)	0.79	0	13	13,252	13,252	13,252	13,252	14,241	38,767	53,008
Vital Statistics (180)	0.28	0	0	3,198	3,198	3,198	3,198	12,792	0	12,792
COMMUNICABLE DISEASE SUBTOTAL	7.02	1,743	4,842	112,378	92,861	101,035	97,868	223,512	180,630	404,142
B. PRIMARY CARE:										
Chronic Disease Services (210)	0.18	3	203	13,514	3,514	3,514	3,514	12,028	12,028	24,056
Tobacco Prevention (212)	1.12	0	12	21,086	21,086	21,086	21,086	84,344	0	84,34-
Home Health (215)	0.00	0	0	0	0	0	0	0	0	(
W.1.C. (221)	6.82	3,681	21,473	75,742	75,742	75,742	75,745	0	302,971	302,97
Family Planning (223)	7.32	1,325	3,343	101,415	101,415	101,415	101,415	202,830	202,830	405,66
Improved Pregnancy Outcome (225)	0.16	61	157	2,272	2,272	2,272⁄	2,272	3,635	5,453	9,08
Healthy Start Prenatal (227)	3.18	413	5,345		42,752	42,752	42,752	102,605	68,403	171,00
Comprehensive Child Health (229)	6.72	108	2,424	85,148	85,148	85,148	85,148	272,474	68,118	340,59
Healthy Start Infant (231)	2.11	193	1,803	23,904	23,904	23,904	23,904	57,370	38,246	95,61
School Heaith (234)	5.53	0	81,495	110,521	110,521	110,521	110,521	265,250	176,834	442,08
Comprehensive Adult Health (237)	10.45	620	1,548	155,540	155,540	155,540	155,540	373,296	248,864	622,16
Dental Health (240)	3.75	6,676	14,805	65,691	65,691	65,691	65,691	34,553	228,211	262,76
RIMARY CARE SUBTOTAL	47.34	13,080	132,608	697,585	687,585	687,585	687,588	1,408,385	1,351,958	2,760,34
C. ENVIRONMENTAL HEALTH:										
Water and Onsite Sewage Programs										
Coastal Beach Monitoring (347)	0.15	0	589	9,571	9,571	9,571	9,571	1,473	36,811	38,28
Limited Use Public Water Systems (357)	0.69	97	556	10,555	10,555	10,555	10,555	12,666	29,554	42,22
Public Water System (358)	0.00	0	0	0	0	0	0	0	0	
Private Water System (359)	0.00	0	0	0	0	0	0	0	0	
Individual Sewage Disp. (361)	5.77	765	6,172	91,774	91,775	91,775	91,775	113,804	253,295	367,09
Group Total	6.61	862	7,317	111,900	111,901	111,901	111,901	127,943	319,660	447,60
Facility Programs										
Food Hygiene (348)	0.30	16	192	5,244	5,244	5,244	5,244	10,488	10,488	20,97
Body Art (349)	0.00	0	0	0	0	0	0	0	0	
Group Care Facility (351)	0.35	33	180	5,984	5,984	5,984	5,984	11,968	11,968	23,93
Migrant Labor Camp (352)	0.00	0	0	0	0	0	0	0	0	
Housing, Public Bldg Safety, Sanitation (353)	0.00	0	0	0	0	0	0	0	0	
Mobile Home and Parks Services (354)	0.22	24	120	3,290	3,290	3,290	3,290	6,580	6,580	13,16
Swimming Pools/Bathing (360)	0.45	139	519	4,713	4,713	4,713	4,713	5,656	13,196	18,85
Biomedical Waste Services (364)	0.09	0	28	1,428	1,428	1,428	1,428		3,998	5,71
Tanning Facility Services (369)	0.06	15	44	1,146	1,146	1,146	1,146		3,209	4,58

# ATTACHMENT II. NASSAU COUNTY HEALTH DEPARTMENT Part III. Planned Staffing, Clients, Services, And Expenditures By Program Service Area Within Each Level Of Service October 1, 2003 to September 30, 2004

					arterly Expen	diture Plan	त्रियः सन्दर्भः			
	FTE's	Clients		lst _	2nd	3rd	4th	e solo in sea		Grand
	(0.00)	Units	Services		(Whole dolla	rs only)		- County	State	Total
C. ENVIRONMENTAL HEALTH:										
Group Total	1.47	227	1,083	21,805	21,805	21,805	21,805	37,781	49,439	87,220
Groundwater Contamination										
Storage Tank Compliance (355)	1.71	109	432	28,744	28,744	28,744	28,744	34,493	80,483	114,976
Super Act Service (356)	0.43	0	200	5,924	5,924	5,924	5,924	7,109	16,587	23,696
Group Total	2.14	109	632	34,668	34,668	34,668	34,668	41,602	97,070	138,672
Community Hygiene										
Occupational Health (344)	0.00	0	0	0	0	0	0	0	0	0
Consumer Product Safety (345)	0.00	0	0	0	0	0	0	0	0	0
Emergency Medical (346)	0.00	0	0	0	0	0	0	0	0	0
Lead Monitoring Services (350)	0.00	0	0	0	0	0	0	0	0	0
Public Sewage (362)	0.00	0	0	0	0	0	0	0	0	0
Solid Waste Disposal (363)	0.00	0	0	0	0	0	0	0	0	0
Sanitary Nuisance (365)	0.03	12	31	515	515	515	515	2,060	0	2,060
Rabies Surveillance/Control Services (366)	0.04	0	12	691	691	691	691	2,764	0	2,764
Arbovirus Surveillance (367)	0.12	0	176	9,608	9,608	9,608	9,608	38,432	0	38,432
Rodent/Arthropod Control (368)	0.00	0	0	0	0	0	0	0	0	0
Water Pollution (370)	0.00	0	0	0	0	0 🖊	0	0	0	0
Air Pollution (371)	0.00	0	0	• 0	0	0	0	0	0	0
Radiological Health (372)	0.00	0	0	0	0	0	0	0	0	0
Toxic Substances (373)	0.00	0	0	0	0	0	0	0	0	0
Group Total	0.19	12	219	10,814	10,814	10,814	10,814	43,256	0	43,256
ENVIRONMENTAL HEALTH SUBTOTAL	10.41	1,210	9,251	179,187	179,188	179,188	179,188	250,582	466,169	716,751
D. SPECIAL CONTRACTS:										
Special Contracts (599)	0.00	0	0	0	0	0	0	0	0	0
SPECIAL CONTRACTS SUBTOTAL	0.00	0	0	0	0	0	0	0	0	0
TOTAL CONTRACT	64.77	16,033	146,701	989,150	959,634	967,808	964,644	1,882,479	1,998,757	3,881,236

ATTACHMENT V

# NASSAU COUNTY HEALTH DEPARTMENT

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

- Acquisition. Connect to County telephone system to provide voice mail and improved call management at all Nassau CHD facilities. 100 telephone units @ \$399.28 each. \$39,928 estimated. Anticipated completion date: November 30, 2003
- Renovation. Callahan Clinic: paint interior and install new carpet.
   \$15,000 estimated.
   Anticipated completion date: December 31, 2003
- Acquisition. Telemedicine. Initial set-up to link all clinic sites to promote telemedicine at remote/satellite facilities. DOH IT is assisting with system design/development.
   \$8,000 estimated, 1<sup>st</sup> year. Anticipated completion date: March 31, 2004
- 4. Renovation. Environmental Health: relocate to County Administration; purchase new furniture, move data circuits/IT systems.
   \$8,000 estimated.
   Anticipated completion date: March 31, 2004
- Vehicle Acquisition. Purchase one light truck for Env. Health Division field staff.
   \$24,000 estimated.
   Anticipated completion date: April 30, 2004
- Renovation. Hilliard Clinic: paint interior and install new carpet in area to be vacated by Hilliard Fire Department.
   \$8,000 estimated.
   Anticipated completion date: June 30, 2004
- Renovation. Fernandina Beach Clinic: install hurricane/storm shutters.
   \$22,000 estimated.
   Anticipated completion date: June 30, 2004

# DESCRIPTION OF SPECIAL CONTRACTS

(From Attachment II, Part III) Please list separately

Special contracts are contracts for services for which there are no comparable services in the county health department core programs; no service codes in Departmental coding manuals; projects that are locally designed and have no standard statewide set of services and therefore cannot be accounted for within existing county health department programs. These contracts are coded to FLAIR Level 5 of 599 and include some contracts formerly handled at the district offices such as epilepsy, Project WARM, community planning and special family planning and teen mother projects.

None.

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# ATTACHMENT VI

#### NASSAU COUNTY HEALTH DEPARTMENT

#### ESTIMATE OF ENVIRONMENTAL HEALTH FEES FISCAL YEAR 2003 - 2004

													Est. Ann. Revenue
DESCRIPTION	FEE	DEPOSIT	ORG	EO	OBJECT	REVENUE	SI	OCA	FUND	BUDGET	(B)	PROGRAM	Accruing to CHD
	AMOUNT	AMOUNT	L4/L5		CODE	CATEGORY			GF-SF-FID	ENTITY		COMPONENT	Trust Fund
PUBLIC SWIMMING POOLS AND BATHING PLACES													
1. Annual Permit - Up to (and including) 25,000 gallons	75.00	67.50	XX-360	DK	001145	000100	CD	8K000	20-2-141001	64200700	••	1306000000	2,093.00
1a. Transfer to headquarters		7.50	99- <u>9</u> 10	SM	001205	000100	RV	K3000	10-2-021042	64200600	00	1302000000	
2. More than 25,000 gallons	160.00	144.00	XX-360	DK	001145	000100	CD	8K000	20-2-141001	64200700	••	1306000000	<u>10,368.00</u>
2a. Transfer to headquarters		16.00	99-910	SM	001205	000100	RV	K3000	10-2-021042	64200600	00	1302000000	
3. Exempted Condo Pools (over 32 units)	50.00	45.00	XX-360	DK	001145	000100	CD	8K000	20-2-141001	64200700	**	1306000000	180.00
3a. Transfer to headquarters		5.00	99-910	SM	001205	000100	RV	K3000	10-2-021042	64200600	00	1302000000	
OTHER FEES													
Collected by the 13 delegated counties													
Broward, Dade, Duval, Hillsborough, Lee, Manatee,													
Collier, Palm Beach, Pinellas, Polk, Sarasota, Volusia, Escambia				Ι									
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:				Ι		1							
1. Plan review (new construction)	275.00	275.00	XX-360	DK	001 092	000100	CD	8K000	20-2-141001	64200700	••	1306000000	
2. Plan review for modification of original construction	100.00	100.00	XX-360	DK	001092	000100	CD	8K000	20-2-141001	64200700	••	1306000000	
3. Plan/application review for bathing place development	275.00	275.00	XX-360	DK	001 092	000100	CD	8K000	20-2-141001	64200700	••	1306000000	
4. Initial operating permit	125.00	125.00	XX-360	DK	001092	000100	CD	8K000	20-2-141001	64200700	••	1306000000	
5. Variance applications	240.00	216.00	XX-360	DK	001092	000100	CD	8K000	20-2-141001	64200700		1306000000	
5.a. Transfer to Headquarters		24.00	99-910	SM	001205	000100	RV	K3000	10-2-021042	64200600	00	1302000000	
All other counties are to send the fee to Bureau of Water													
Programs in Tallahassee or the Environmental Engineering											L		
section in Orlando as follows:													
1. Plan review (new construction)	275.00	275.00	00-000	SM	001044	000100	RV	K3000	10-2-020142	64200600	00	1302000000	
2. Plan review for modification of original construction	100.00	100.00	00-000	SM	001044	000100	RV	K3000	10-2-020142	64200600	00	1302000000	
3. Plan/application review for bathing place development	275.00	275.00	00-000	SM	001044	000100	RV	K3000	10-2-020142	64200600	00	1302000000	
4. Initial operating permit	125.00	125.00	00-000	SM	001044	000100	RV	K3000	10-2-020142	64200600	00	1302000000	
5. Variance applications	240.00	240.00	00-000	SM	001044	000100	RV	K3000	10-2-020142	64200600	00	1302000000	
MOBILE HOME & RECREATIONAL VEHICLE PARKS													
(FEES ARE PRORATED ON A QUARTERLY BASIS)													
1. Annual permit for 5 to 14 spaces	50.00	45.00	XX-354	DK	001113	000100	CD	8K000	20-2-141001	64200700	<b></b>	1306000000	630.00
1a. Transfer to headquarters		5.00	99-910	MP	001113	000100	RV	00000	10-2-021042	64200600	00	1302000000	
2. Annual permit for 15 to 171 spaces	3.50 pe space	r 2	XX-354	DK	001113	000100	CD	8K000	20-2-141001	64200700	<b>.</b>	1306000000	44.00
2a. Transfer to headquarters		10%	99-910	MP	001113	000100	RV	UQ000	10-2-021042	64200600	00	1 302000000	

													Est. Ann. Revenue
	FEE	DEPOSIT	ORG		OBJECT	REVENUE		OCA	FUND	BUDGET	IBI	PROGRAM	Accruing to CHD
DESCRIPTION	AMOUNT	AMOUNT	L4/L5	EO	CODE	CATEGORY	SI	UCA	GF-SF-FID	ENTITY	IDI	COMPONENT	Trust Fund
3. Annual permit for 172 and above spaces	600.00	540.00	XX-354	DK	001113	000100	CD	8K000	20-2-141001	64200700		1306000000	
3a. Transfer to headquarters		60.00	99-910	MP	001113	000100	RV	UQ000	10-2-021042	64200600	00	1302000000	
MIGRANT LABOR CAMPS													
1. Annual permit for facilities with 5-50 occupants	125.00	125.00	XX-352	DK	001139	000100	CD	8K000	20-2-141001	64200700	••	1306000000	
2. Annual permit for facilities with 51-100 occupants	225.00	225.00	XX-352	DK	001139	000100	CD	8K000	20-2-141001	64200700		1306000000	
3. Annual permit for facilities with over 100 occupants	500,00	500.00	XX-352	DK	001139	000100	CD	8K000	20-2-141001	64200700	••	1306000000	
BIOMEDICAL WASTE GENERATORS	1												
1. Initial permit	55,00	55.00	XX-364	DK	001140	000100	CD	8K000	20-2-141001	64200700	••	1306000000	165.00
2. Renewal of annual permit except physician office generating													
less than 25lbs/30 days) postmarked by October 1	55.00	55.00	XX-364	DK	001140	000100	CD	8K000	20-2-141001	64200700	**	1306000000	4,675.00
2. Renewal of annual permit except facilities generating													
(less than 25lbs/30 days) postmarked after October 1	75.00	75.00	XX-364	DK	001140	000100	CD	86000	20-2-141001	64200700	••	1306000000	375.00
3. Storage facilities permit postmarked by October 1	55.00	55.00	XX-364	DK	001140	000100	CD	8K000	20-2-141001	64200700		1306000000	
3. Storage facilities permit postmarked after October 1	75.00	75.00	XX-364	DK	001140	000100	CD	8K000	20-2-141001	64200700		1306000000	
4. Treatment facilities operating permit by October	55.00	55.00	XX-364	DK	001140	000100	CD	8K000	20-2-141001	64200700	••	1306000000	
4. Treatment facilities operating permit after October 1	75.00	75.00	XX-364	DK	001140	000100	СD	8K000	20-2-141001	64200700	••	1306000000	
5. Transporter registration (one vehicle) postmarked by 10/1	55.00	55.00	XX-364	DK	001140	000100	CD	8K000	20-2-141001	64200700	••	1306000000	
5. Transporter registration (one vehicle) atter 10/1	75.00	75.00	XX-364	DK	001140	000100	CD	8K000	20-2-141001	64200700	••	1306000000	
6. Transporter registration additional vehicle	10.00	10.00	XX-364	DK	001140	000100	CD	8K000	20-2-141001	64200700		1306000000	
TANNING FACILITIES													
1. Annual license fee	150.00	135.00	XX-369	DK	001144	000100	CD	8K000	20-2-141001	64200700	••	1306000000	2,025.00
1a. Transfer to headquarters		15.00	99-910	TN	001144	000100	Rν	R9000	10-2-021042	64200600	00	1302000000	
2. Fee for each additional device	55.00	49.50	XX-369	DK	001144	000100	CD	8K000	20-2-141001	64200700	••	1306000000	1,980.00
2.a. Transfer to headquarters		5.50	99-910	TN	001144	000100	RV	R9000	10-2-021042	64200600	00	1302000000	
3. Late fee	25.00	25.00	XX-369	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000	25.00
BODY PIERCING													
1. Annual License Fee	150.00	135.00	XX-349	DK	001149	000100	CD	вкооо	20-2-141001	64200700		1306000000	135.00
ta. Transfer to headquarters		15.00	99-910	iE	001149	000100	RV	PIERS	10-2-021042	64200600	00	1302000000	
2. Temporary Establishment	75.00	67.50	XX-349	DK	001149	000100	CD	8K000	20-2-141001	64200700	••	1306000000	
2a. Transfer to headquarters		7.50	99-910	iE	001149	000100	RV	PIERS	10-2-021042	64200600	00	1302000000	
3. Late fee	100.00	100.00	XX-349	DK	001149	000100	CD	8K000	20-2-141001	64200700	••	1306000000	
FOOD ESTABLISHMENTS													
1. Annual Permit for Fratemal/Civic	160.00	144.00	XX-348	DK	001132	000100	CD	8K000	20-2-141001	64200700		1306000000	480.00
1a. Transfer to headquarters		16.00	99-910	FP	001132	000100	RV	10000	10-2-021042	64200600	00	1302000000	
2. Annual Permit School Cateteria Operating for				1									
9 months or less	130.00	117.00	XX-348	DK	001132	000100	CD	8K000	20-2-141001	64200700		1306000000	2,080.00
2a. Transfer to headquarters		13.00	99-910	FP	001132	000100	RV	10000	10-2-021042	64200600	00	1 302000000	
3. Annual Permit School Cafeteria Operating for more													
than 9 months	160.00	144.00	XX-348	DK	001132	000100	CD	8K000	20-2-141001	64200700	••	1306000000	
3a. Transfer to headquarters		16.00	99-910	FP	001132	000100	RV	10000	10-2-021042	64200600	00	1302000000	
4. Annual Permit for Hospital/Nursing Food Service	210.00	189.00	XX-348	DK	001132	000100	CD	8K000	-20-2-141001	64200700	••	1 306000000	630.00
4a. Transfer to headquarters		21.00	99-910	FP	001132	000100	RV	10000	10-2-021042	64200600	00	1 302000000	

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													Est. Ann. Revenue
DESCRIPTION	FEE	DEPOSIT	ORG	EO	OBJECT	REVENUE	SI	OCA	FUND	BUDGET	IBI	PROGRAM	Accruing to CHD
	AMOUNT	AMOUNT	L4/L5		CODE	CATEGORY			GF-SF-FID	ENTITY		COMPONENT	Trust Fund
5. Annual Permit for Movie Theaters	160.00	144.00	XX-348	DK	001132	000100	CD	8K000	20-2-141001	64200700	••	1 306000000	160.00
5a. Transfer to headquarters		16.00	99-910	FP	001132	000100	RV	10000	10-2-021042	64200600	00	1 302000000	
6. Annual Permit for Jails/Prisons	210.00	189.00	XX-348	DK	001132	000100	CD	8K000	20-2-141001	64200700	••	1306000000	210.00
6a. Transfer to headquarters		21.00	99-910	FP	001132	000100	RV	10000	10-2-021042	64200600	00	1302000000	
7. Annual Permit for Bars/Lounges (Drink Service Only)	160.00	144.00	XX-348	DK	001132	000100	CD	8K000	20-2-141001	64200700	•••	1 306000000	1,160.00
7a. Transfer to headquarters		16.00	99-910	FP	001132	000100	RV	10000	10-2-021042	64200600	00	1302000000	
8. Annual Permit for Residential Facilities	110.00	99.00	XX-348	DK	001132	000100	CD	8K000	20-2-141001	64200700		1 306000000	220.00
8a. Transfer to headquarters		. 11.00	99-910	FP	001132	000100	RV	10000	10-2-021042	64200600	00	1302000000	
9. Annual Permit for Child Care Centers without C&F license	85.00	76.50	XX-348	DK	001132	000100	CD	8K000	20-2-141001	64200700		1306000000	1,020.00
9a. Transfer to headquarters		8.50	99-910	FP	001132	000100	RV	10000	10-2-021042	64200600	00	1302000000	
10. Annual Permit for Limited Food Service	85.00	76.50	XX-348	οк	001132	000100	CD	8K000	20-2-141001	64200700		1306000000	
10a. Transfer to headquarters		8.50	99-910	FP	001132	000100	RV	10000	10-2-021042	64200600	00	1 302000000	
11. Annual Permit Other Food Service	160.00	144.00	XX-348	DK	001132	000100	CD	8K000	20-2-141001	64200700	••	1306000000	1,120.00
11a. Transfer to headquarters		16.00	99-910	FP	001132	000100	RV	10000	10-2-021042	64200600	00	1302000000	
12. Plan Review	\$35/hour	\$35/hour	XX-348	DK	001092	000100	CD	8K000	20-2-141001	64200700	••	1306000000	70.00
13. Food Worker Training	10.00	10.00	XX-348	DK	001092	000100	CD	8K000	20-2-141001	64200700	••	1306000000	
14. Request for Inspection	40.00	40.00	XX-348	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000	80.00
15. Re-inspection (after the first reinspection)	30.00	30.00	XX-348	DK	001092	000100	CD	8K000	20-2-141001	64200700		1 306000000	
16. Late Renewal	25.00	25.00	XX-348	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000	50.00
17. Alcoholic Beverage Inspection Approval	30.00	30.00	XX-348	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000	60.00
ONSITE SEWAGE DISPOSAL PROGRAM (OSTDS)	•						1						
1. Application for permitting of an onsite sewage	25.00	23.00	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	. **	1 306000000	13,800.00
treatment and disposal system which includes													
application and plan review for new and repair permits													
1a. Transfer to headquarters		2.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000	
2. Application for permitting of a new Performance-based treatment system	125.00	115.00	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000	
2a. Transfer to headquarters		10.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000	
3. Site evaluation for a new system	60.00	55.20	XX-361	DK	001 092	000100	CD	8K000	20-2-141001	64200700		1 306000000	33,120.00
3a. Transfer to headquarters		4.80	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1 302000000	
4. Site evaluation for a system repair or modification of system	40.00	36.80	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	••	1306000000	3,680.00
4a. Transfer to headquarters		3.20	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000	
5. Site re-evaluation, new or repair or modification	40.00	36.80	XX-361	DK	001 092	000100	CD	8K000	20-2-141001	64200700		1306000000	552.00
5a. Transfer to headquarters		3.20	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000	
6. Permit for new systems, or modification to system	55.00	50.60	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	••	1306000000	30,360.00
6a. Transfer to headquarters		4.40	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000	
7. New system or system modification installation inspection	55.00	50,60	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	••	1306000000	27,830.00
7a. Transfer to headquarters		4.40	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000	
8. Research fee to be collected in addition, and concurrent with	5.00	5.00	99-910	RF	001201	000100	RV	B9000	10-2-021042	64200600	00	1302000000	
the permit for a new system installation fee.					<u> </u>				ļ	<u> </u>			
9. Repair permit issuance which includes inspection	50.00	41.40	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	••	1306000000	4,140.00
9a. Transfer to headquarters		3.60	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000	

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													Est. Ann. Revenue
DESCRIPTION	FEE	DEPOSIT	ORG	EO	OBJECT	REVENUE	SI	OCA	FUND	BUDGET	IBI	PROGRAM	Accruing to CHD
DESCRIPTION	AMOUNT	AMOUNT	L4/L5	EU	CODE	CATEGORY	31	UCA	GF-SF-FID	ENTITY	103	COMPONENT	Trust Fund
9b. Transter to headquarters for training center		5.00	99-910	тс	001067	000100	RV	SEWTN	10-2-021042	64200600	00	1302000000	
0. Inspection of system previously in use	50.00	46.00	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	••	1306000000	9,200.00
10a. Transfer to headquarters		4.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000	
1. Reinspection fee per visit for site inspections after system	25.00	23.00	XX-361	DK	001092	000100	СD	8K000	20-2-141001	64200700		1306000000	1,150.00
construction approval													
1a. Transfer to headquarters		2.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000	
12. Installation reinspection of non-compliant system per	25.00	23.00	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	••	1306000000	115.00
each site visit													
12a. Transfer to headquarters		2.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000	
13. System abandonment permit, includes permit	40.00	36.80	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	••	1 306000000	920.00
ssuance and inspection													
13a. Transfer to headquarters		3.20	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000	
14. Annual operating permit fee for systems in IM and	150.00	138.00	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700		1 306000000	9,660.00
equivalent areas, and for systems receiving commercial waste													
4a. Transfer to headquarters		12.00	99-910	ST	001 203	000100	RV	1E000	10-2-021042	64200600	00	1302000000	
<ol> <li>Amendments or changes to the operating permit during</li> </ol>	25.00	23.00	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	••	1 306000000	
the permit period per change or amendment													
5a. Transfer to headquarters		2.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000	
6. Aerobic treatment unit operating permit (biennial)	100.00	92.00	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700		1306000000	
6a. Transfer to headquarters		8.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1 302000000	
7. Biennial operating permit fee for performance-based treatment systems.	100.00	92.00	XX-361	DK	001 092	000100	CD	8K000	20-2-141001	64200700		1306000000	
A prorated fee is to be charged beginning with second year of operation.													
7a. Transfer to headquarters		8.00	99-910	ST	001 203	000100	RV	1E000	10-2-021042	64200600	00	1 302000000	
18. Review of application due to proposed amendments or changes after	75.00	69.00	XX-361	DK	001 092	000100	СD	8K000	20-2-141001	64200700	••	1306000000	
nitial operating permit issuance for a performance-based treatment system													
8a. Transfer to headquarters		6.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000	
9. Tank manufacturer's inspection per annum	100.00	50.00	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700		1306000000	
9a. Transfer to headquarters		50.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000	
20. Septage disposal service permit per annum	50.00	46.00	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	••	1306000000	184.00
20a. Transfer to headquarters		4.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000	
21. Additional charge per pump out vehicle	25.00	23.00	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	••	1306000000	23.00
21a. Transfer to headquarters		2.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000	
2. Portable or temporary toilet service permit per annum	50.00	46.00	XX-361	DK	001 092	0,001.00	CD	8K000	20-2-141001	64200700	••	1306000000	46.00
2a. Transfer to headquarters		4.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000	
23. Additional charge per pump out vehicle	25.00	23.00	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000	23.00
23a. Transfer to headquarters		2.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1 302000000	
24. Septage stabilization facility inspection fee per annum	150.00	138.00	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	••	1306000000	138.00
24a. Transfer to headquarters		12.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000	
24. Septage disposal site evaluation fee per annum	100.00	92.00	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700		1306000000	92.00
24a. Transfer to headquarters		8.00	99-910	ST	001203	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	000100	CD	8K000	20-2-141001	64200700		1 306000000	

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DESCRIPTION	FEE	DEPOSIT	ORG	EO	OBJECT	REVENUE	SI	OCA	FUND	BUDGET	IBI	PROGRAM	Est. Ann. Revenue Accruing to CHD
	AMOUNT	AMOUNT	L4/L5		CODE	CATEGORY			GF-SF-FID	ENTITY		COMPONENT	Trust Fund
24a. Transfer to headquarters		2.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000	
25. Variance application for a single family residence per	1 50.00	75.00	XX-361	DK	001135	000100	CD	8K000	20-2-141001	64200700	••	1306000000	300.00
each lot or building site		•											
25a. Transfer to headquarters		75.00	99-910	CR	001204	000100	RV	BY000	10-2-021042	64200600	00	1302000000	
26. Variance application for a multi-family or commercial	200.00	100.00	XX-361	DK	_001135	000100	CD	8K000	20-2-141001	64200700	••	1 306000000	
building per each building site													
26a. Transfer to headquarters		100.00	99-910	CR	001204	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	000100	CD	8K000	20-2-141001	64200700	••	1306000000	
FEE COLLECTED AT HEADQUARTERS - Onsite Sewage Program													
1. Application for innovative product approval	500.00					For hea	dquar	ters use o	nly				
2. Application for registration including initial examination	75.00					For hea	dquar	ters use o	nly				
3. Initial registration	100.00					For hea	dquar	ters use o	nly				
4. Renewal registration	100.00					For hea	dquar	ters use o	nly				
5. Certificate of authorization each two year period	250.00					For hea	dquar	ters use o	nly				
DRINKING WATER													
1. First Year Public Water Annual Operation Permit and	75.00	67.50	XX-357	DK	001166	000100	CD	8K000	20-2-141001	64200700	••	1306000000	
Construction Permit - Limited Use													
1a. Transfer to headquarters		7.50	99-910	64	001166	000100	RV	M5000	10-2-021042	64200600	00	1 302000000	
2. Second Year Public Water Annual Operation Permit -													
Limited Use	70.00	63.00	XX-357	DK	001166	000100	CD	8K000	20-2-141001	64200700	**	1306000000	
2a. Transfer to headquarters		7.00	99-910	64	001166	000100	RV	M5000	10-2-021042	64200600	00	1302000000	
3. Multi-Family Water Construction Permit - serving 3 or 4	40.00	36.00	XX-357	DK	001165	000100	CD	8K000	20-2-141001	64200700	••	1 306000000	
non-rental residences													
3a. Transfer to headquarters		4.00	99-910	64	001165	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	001166	000100	CD	8K000	20-2-141001	64200700		1306000000	
4a. Transfer to headquarters		3.50	99-910	64	001166	000100	RV	M5000	10-2-021042	64200600	00	1302000000	
5. Non-SDWA Lab Sample (Sample Collection/Review													
of Analytical Results/Health Risk Interpretation):			1										
Bacterial Sample Collection	40.00	40.00	XX-357	DK	001142	000100	CD	8K000	20-2-141001	64200700	••	1 306000000	
Chemical Sample Collection	50.00	50.00	XX-357	DK	001142	000100	CD	8K000	20-2-141001	64200700	••	1306000000	450.00
Combined Chemical microbiological	55.00	55.00	XX-357	DK	001142	000100	CD	8K000	20-2-141001	64200700	•	1306000000	165.00
6. Reinspection of Multi-family Water System	25.00	25.00	XX-357	DK	001092	000100	CD	8K000	20-2-141001	64200700	••	1306000000	
7. Reinspection of Public Water System	40.00	40.00	XX-357	DK	001092	000100	CD	8K000	20-2-141001	64200700	••	1306000000	
8. Delineated Area Clearance Fee	50.00	50.00	XX-357	DK	001092	000100	CD		20-2-141001	64200700	**	1306000000	
9. Limited Use Commercial Registered System	15.00	15.00	XX-357	DK	001092	000100	CD		20-2-141001	64200700	••	1306000000	150.00
10. Limited Use Commercial Public Water System	25.00	25.00	XX-357	DK	001092	000100	CD	8K000	20-2-141001	64200700		1 306000000	300.00
Operating Permit Family Day Care Establishment								1					
11. Limited Use Commercial Public Water System Operating Permit	15.00	15.00	XX-357	DK	001092	000100	CD	8K000	20-2-141001	64200700	••	1306000000	
Family Day Care Establishment After March 31 of Any Year.													
Safe Drinking Water Act (Delegated Counties)													
1. Construction permit for each Category I through III treatment													

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DESCRIPTION	FEE	DEPOSIT	0RG L4/L5	EO	OBJECT CODE	CATEGORY	SI	OCA	FUND GF-SF-FID	BUDGET	181	PROGRAM	Accruing to CHD Trust Fund
plant, as defined in Rule 62-699.310, F.A.C., with treatment													
other than disinfection only.													
a. Treatment plant - 5 MGD and above	7,500.00	7,500.00	XX-358	wc	001211	000100	СD	SDWCH	20-2-141001	64200700		1306000000	
b. Treatment plant - 1 MGD up to 5 MGD	6,000.00	6,000.00	XX-358	wc	001211	000100	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	001211	000100	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	001211	000100	CD	SDWCH	20-2-141001	64200700	••	1306000000	
e. Treatment plant - up to 0.1 MGD	1,000.00	1,000.00	XX-358	wc	001211	000100	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.		-			-								
a. Treatment plant - 5 MGD and above	7,500.00	7,500.00	XX-358	wc	001211	000100	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	001211	000100	CD	1		64200700		1306000000	
c. Treatment plant - 0.25 MGD up to 1 MGD	4,000.00	4,000.00	XX-358	wc	001211	000100	СD			64200700	••	1306000000	
d. Treatment plant - 0.1 MGD up to .025 MGD	2,000.00	2,000.00	XX-358	wc	001211	000100	CD	1		64200700	••	1306000000	
e. Treatment plant - 0.01 up to 0.1 MGD	1,000.00	1,000.00	XX-358	wc	001211	000100	CD		20-2-141001	64200700	••	1306000000	
Treatment plant - up to 0.01 MGD	400.00	400.00	XX-358	wc	001211	000100			20-2-141001	64200700	**	1306000000	
3. Construction permit for each Category V treatment plant, as		1											
defined in Rule 62-699.310, F.A.C., - Disinfection Only													
a. treatment plant - 5 MGD and above	5,000.00	5,000.00	XX-358	wc	001211	000100	CD	SDWCH	20-2-141001	64200700	••	1306000000	
b. Treatment plant - 1 MGD up to 5 MGD	3,000.00		XX-358	wc	001211	000100	CD		20-2-141001	64200700		1306000000	
c. Treatment plant - 0.25 MGD up to 1 MGD	1,000.00	1,000.00	XX-358	wc	001211	000100	CD	SDWCH	20-2-141001	64200700	•••	1306000000	
d. Treatment plant - 0.1 MGD up to .025 MGD	500.00	500.00	XX-358	wc	001211	000100		SDWCH		64200700	••	1306000000	
e. Treatment plant - up to 0.1 MGD	300.00	300.00	XX-358	wc	001211	000100	CD	SDWCH	20-2-141001	64200700		1306000000	
4. Distribution and transmission systems, including raw water						1							
lines into the plant, except those under general permit.					<u> </u>								
a. Serving a community public water system	500.00	500,00	XX-358	wc	1211	000100	CD	SDWCH	20-2-141001	64200700		1306000000	
b. Serving a non-transient non-community public water systems	350.00	350.00	XX-358	wc	001211	000100	CD	SDWCH	20-2-141001	64200700	**	1 306000000	
c. Serving a non-community public water system	250.00	250.00	XX-358	wc	001211	000100	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	001211	000100	CD	SDWCH	20-2-141001	64200700	••	1306000000	
b. Any other public water supply well.	250.00	250.00	XX-358	wc	001211	000100	СD		20-2-141001	64200700		1306000000	
6. Major modifications to systems that alter the existing treatment						1	1				$\square$		
without expanding the capacity of the system and are not											1		
considered substantial changes pursuant to											1		
Rule 62-4.050(7) below.					1		1						
a. 1MGD and above	2,000.00	2,000.00	XX-358	wc	001211	000100	CD	SDWCH	20-2-141001	64200700	**	1 306000000	
b. 1 MGD up to 1 MGD	1,000.00	1,000.00	XX-358	wc	001211	000100	CD	SDWCH	20-2-141001	64200700	**	1306000000	
c. 0.01 up to .1 MGD	500.00	500.00	XX-358	wc	001211	000100			20-2-141001	64200700	**	1306000000	
d. Up to 0.01 MGD	100.00	100.00	XX-358	wc	001211	000100			20-2-141001	64200700	••	1306000000	
e. Lead and Copper Corrosion Fee	100.00	100.00	XX-358	wc	001211	000100	CD	SDWCH	20-2-141001	64200700	**	1 306000000	

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													Est, Ann. Revenue
DESCRIPTION	FEE	DEPOSIT	ORG L4/L5	EO	OBJECT	REVENUE	SI	OCA	FUND GF-SF-FID	BUDGET	IBİ	PROGRAM	Accruing to CHD Trust Fund
<ol><li>Minor modifications to systems that result in no change in the</li></ol>													
treatment or capacity.													
a1 MGD and above	300.00	300.00	XX-358	wc	001211	000100	СD	SDWCH	20-2-141001	64200700	••	1306000000	
b. Up to 0.1 MGD	100.00	100.00	XX-358	wc	001211	000100				64200700	••	1306000000	
3. Fines and Forfeitures	Variable	Variable	XX-358	wc	012020	001200				64200700	••	1306000000	· ·
9. General Permit Fee for any General Permit not specifically listed:	100.00	100.00	XX-358	wc	001211	000100			20-2-141001	64200700	••	1306000000	
General Permits requiring Professional Engineer or Professional	250.00	250.00	XX-358	wc	001211	000100	CD		20-2-141001	64200700		1306000000	
Geologist certification													
General Permits not requiring Professional Engineer or	100.00	100.00	XX-358	wc	001211	000100	CD	SDWCH	20-2-141001	64200700	**	1306000000	
rofessional Geologist certification													
Radioactive Materials Licenses - General	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	h		1					~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	1		[	
. Annual fee: static elimination devices	\$25.00			·		. For head	quart	ers use o	nly	<u> </u>			
2. Annual fee: measuring, gauging and control devices	\$25.00							ers use o					
3. Annual fee: in vivo testing license	\$125.00							ers use o					
4. Annual fee: in vitro testing license	\$125.00					For head	Iquart	ers use o	nly				
5. Annual fee: depleted uranium license	\$125.00					For head	Iquari	ers use o	nly				
Radioactive Materials Licenses - Specific													
Application Fees													
I. Source Material.													
a. Concentration of uranium from phosphate ores for the													
roduction of uranium as "yellow cake" or powdered solid;	\$6,907					For head	Iquari	ters use o	only				
b. Concentration of uranium from phosphate ores for the													
production of "green cake" or equivalent, moist or solid;	\$3,768					For head	Iquar	ters use o	only				
c. All other specific source material licenses excluding depleted													
uranium used as shielding and counterweights.	\$544					For head	lquar	ters use o	only				
2. Special Nuclear Material (SNM).													
a. SNM in sealed sources contained in devices in measuring systems;	\$653					For head	iquari	ters use c	only				
b. SNM not sufficient to form a critical mass, except as in 2.a.,													
2.c. and 5.e.	\$1,340					For head	iquar	ters use c	only				
c. SNM to be used as calibration and reference sources.	\$205					For head	iquar	ters use c	only				
3. Byproduct, naturally occurring or accelerator produced material.					<u> </u>								
a. Processing or manufacturing for commercial distribution or		1											
industrial uses;	\$2,923					For head	iquar	ters use c	only				
p. Processing or manufacturing and distribution of				Τ			_						
adiopharmaceuticals. This category includes radiopharmacies.	\$2,560					For head	lquar	ters use o	only				
Industrial radiography performed only in an approved shielded													
adiography installation,	\$1,558					For head	lquar	ters use o	only				
d. Industrial radiography performed only at the address indicated													
in the license, or at temporary job sites of the licensee;	\$1,643					For head	dquar	ters use o	only				
e. Radioactive materials in sealed sources for irradiation of													
materials where the source is not removed from the shield and is				T					•				

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DESCRIPTION	FEE	DEPOSIT	ORG L4/L5	EO	OBJECT CODE	REVENUE	SI	OCA	FUND GF-SF-FID	BUDGET	181	PROGRAM	Accruing to CHD Trust Fund
less than 10,000 curies;	\$605					For head	quart	ers use o	nly				
(I) Radioactive materials in sealed sources for irradiation of													
naterials when the source is not removed from the shield and is													
reater than 10,000 curies and less than 100,000 curies, or where													
ne source is less than 100,000 curies and is removed from the													
nield;	\$1,414					For head	quart	ers use o	nly				
) Radioactive materials in sealed sources for irradiation of													
naterials when the source is equal to or greater than 100,000													
uries and less than 1,000,000 curies;	\$3,659					For head	quart	ers use a	nly				
II) Radioactive materials in sealed sources for irradiation of													
naterials when the source is greater than 1,000,000 curies;	\$9,780					For head	lquart	ers use o	nly				
Distribution of items containing radioactive materials to													
persons under a general license;	\$1,643					For head	Iquart	ers use c	nly				
b. Distribution of exempt quantities or items containing naturally													
occurring or accelerator produced material to persons exempt													
rom licensing;	\$1,643					For head	iquart	ers use c	nly				
Well logging													
) Sealed sources or sub-surface tracer studies	\$1,135				<u>.</u>	For head	Iquart	ers use d	only				
I) Sub-surface tracer studies and sealed sources	\$1,436					For head	iquart	ers use c	only				
Nuclear Laundry;	\$3,200					For head	Iquart	ers use a	only				
Industrial or medical research and development;	\$1,184					For head	iquart	ers use o	nly				
(I) Fixed and portable gauging devices	\$605					For head	iquart	ers use a	only				
I) In Vitro and clinical laboratory	\$725					For head	iquart	ers use a	only				
III) Academic	\$978					For head	iquart	ers use d	only				
V) Possession of uranium or thorium, or their decay products, as													
result of mining or processing	\$978					For head	iquart	ers use o	only				
V) All other specific licenses except as otherwise noted	\$725					For head	iquart	ers use o	only				
n. Licenses of broad scope													
(I) Academic	\$3,200					For head	lquart	ers use o	only				
II) Medical	\$3,200					For head	quar	ers use o	only				
III) Industrial or Research and Development	\$3,200					For head	lquar	ers use d	only				
. Gas chromatography devices;	\$434		_			For head	dquar	ers use d	oniy				
Reference or calibration sources equal to or less than one													
nillicurie total;	\$314					For head	dquar	ters use o	only				
Nuclear service licenses, such as leak testing, instrument											Γ		
alibration, etc.;	\$518					For head	dquar	ers use (	only				
4. Waste disposal or processing													
Commercial waste disposal or treatment facilities, including													
purial or incineration;	\$275,842					For head	dquar	ters use (	onty				
All other commercial facilities involving compaction,													
epackaging, storage or transfer;	\$27,084					For head	dquar	ters use (	only				

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													Est. Ann. Revenue
DESCRIPTION	FEE	DEPOSIT	ORG	EO	OBJECT	REVENUE	SI	OCA	FUND	BUDGET	IBI	PROGRAM	Accruing to CHD
	AMOUNT	AMOUNT	L4/L5		CODE	CATEGORY			GF-SF-FID	ENTITY		COMPONENT	Trust Fund
c. Commercial treatment of radioactive materials for release to													
unrestricted areas.	\$5,760					For head	quart	ers use o	only	_			
5. Medical use.													
a. Teletherapy or high dose rate remote after loading devices;	\$1,414					For head	quart	ers use o	only				
b. Medical institutions including hospitals, except 5.a. and 5.e.;	\$1,643					For head	quart	ers use o	only				
c. Private practice physicians except 5.a. and 5.d.;	\$1,184					For head	quart	ers use o	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 head	quart	ers use o	only				
e. Nuclear powered pacemakers;	\$434					For head	quart	ers use a	only				
f. Mobile nuclear medicine services.	\$1,414					For head							
6, Civil defense.	\$544					For head			-				
7. Device, product, or sealed source safety evaluation.							Í						
a. Device evaluation, per device;	\$1,208					For head	quart	ers use c	only				
b. Sealed source design, per source.	\$528					For head							
Radioactive Materials Licenses - Specific						<i>.</i>	Ĺ						
Annual Fees													
1. Source Material													
a. Concentration of uranium from phosphate ores for the													
production of uranium as "yellow cake" or powdered solid;	\$11,942					For head	Iquart	iers use c	only				
b. Concentration of uranium from phosphate ores for the													
production of "green cake" or equivalent, moist or solid;	\$7,439					For head	iquart	ters use o	only				
c. All other specific source material licenses excluding depleted													
uranium used as shielding and counterweights.	\$229					For head	Iquart	ters use o	only				
2. Special Nuclear Material (SNM).	_												
a. SNM in sealed sources contained in devices used in													
measuring systems;	\$518					For head	iquart	lers use d	only				
b. SNM not sufficient to form a critical mass, except as in 2.a.,							ľ						
above, and 2.c. and 5.e., below;	\$1,944					For head	iquart	ters use o	only			<u>.</u>	
c. SNM to be used as calibration and reference sources.	\$109					For head	Iquart	ters use d	only				
3. Byproduct, naturally occurring or accelerator produced material.							ľ						
a. Processing or manufacturing for commercial distribution or							$\square$						
industrial uses;	\$2,802					For head	Iquar	ters use o	only			_	
b. Processing or manufacturing and distribution of													
radiopharmaceuticals. This category includes radiopharmacies.	\$3,840					For head	iquari	ters use o	only				
c. Industrial radiography performed only in an approved shielded	_												
radiography installation,	\$2,161					For head	Iquar	ters use o	only				
d. Industrial radiography performed only at the address indicated													
in the license, or at temporary job sites of the licensee;	\$2,657					For head	iquar	ters use o	only				
e. Radioactive materials in sealed sources for irradiation of													
materials where the source is not removed from the shield and is													

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													Est, Ann, Revenue
DESCRIPTION	FEE	DEPOSIT	ORG	EO		REVENUE	SI	OCA	FUND	BUDGET	IBI		Accruing to CHD
less than 10,000 curies;	AMOUNT \$605	AMOUNT	L4/L5	filling	CODE	Eor head		ters use o	GF-SF-FID	ENTITY	. <u></u>	COMPONENT	Trust Fund
f.(I) Radioactive materials in sealed sources for irradiation of		+			<b></b>			614 440 0		Τ	$\top$	1	+
materials when the source is not removed from the shield and is	1	++	′	+		+	+	<u> </u>	+	+	+	1	1
greater than 10,000 curies and less than 100,000 curies, or where	1	++		+		<u> </u>	+	<u> </u>	<u> </u>	<u> </u>	+	1	<u>+</u>
the source is less than 100,000 curies and is removed from	1	++		+		<u> </u>	+	1		+	+		1
the shield;	\$1,630	, <b>†</b> •		<u> </u>	<u> </u>	For hea	udauar	iters use o	only		_ <b></b>	· ·	1
(II) Radioactive materials in sealed sources for irradiation of	<del>•••••</del>	<b>†</b>	ſ				T				Τ	I	
materials when the source is equal to or greater than 100,000		+	(	<b>†</b> →		1	+				+		
curies and less than 1,000,000 curies;	\$3,961			<u> </u>	·	For her		rters use o	only			<u> </u>	
(III) Radioactive materials in sealed sources for irradiation of	*	·	ſ	<b>—</b>		Τ	T		1	T	$\square$	1	1
materials when the source is greater than 1,000,000 curies;	\$4,398	. '		<u>ـــــ</u>	·	For her	douar	rters use a	only		<u> </u>	<u> </u>	
g. Distribution of items containing radioactive materials to persons	<b>•</b> • • • • • •	·				T	T				$\top$	Τ	
under a general license;	\$2,150	, <del> </del>	·		L	Eor her		rters use o	only	<u> </u>	<u> </u>	<u> </u>	+
h. Distribution of exempt quantities or items containing naturally	ψε, του	· +		$\square$			1999			Τ	Τ	Т	
occurring or accelerator produced material to persons exempt		++	<b></b>	+	<u> </u>	+	+	$\vdash$	+	+	+	1	
from licensing;	\$2,150	, <del> </del> '	<u> </u>	1	L	For her	-dauar	rters use o		<u> </u>	<b></b>	<u> </u>	+
i. Well togging	¥=,	·,		$\square$	Γ		<u> </u>			Τ	$\top$	1	+
(I) Sealed sources or sub-surface tracer studies	\$1,498	. <del> </del>	·	<b>ــــ</b> ـ	<u> </u>	For her		rters use o	only			<u> </u>	
(II) Sub-surface tracer studies and sealed sources	\$1,594	-					•	rters use o					1
j. Nuclear Laundry;	\$5,651	-						rters use c	-				1
k. Industrial or medical research and development;	\$1,474							rters use c	-			·	1
I.(I) Fixed and portable gauging devices	\$966							rters use o					1
(II) In Vitro and clinical laboratory	\$918							rters use o					1
(III) Academic	\$1,171							rters use o					+
IV) Possession of uranium or thorium, or their decay products, as a	<b>V</b> • <b>7</b> • <b>6</b>	,		$\square$	$\square$	1	1			Τ	Τ	T	1
result of mining or processing	\$870	, <del> '</del>	<u> </u>		<u> </u>	For her	-dauar	rters use c			<u> </u>	<u> </u>	+
(V) All other specific licenses except as otherwise noted	\$870						•	rters use c			<u> </u>		1 1
m. Licenses of broad scope		1		T	Γ					T	$\top$	1	+
(I) Academic	\$7,346	. <u>+</u> '	<u> </u>		L	Eor her		rters use o	only		<u> </u>	1	+
(II) Medical	\$5,474					-	_	rters use o					+
(III) Industrial or Research and Development	\$4,568						•	rters use o					1
n. Gas chromatography devices;	\$314	_						rters use o					1
o. Reference or calibration sources equal to or less than one		+	<u> </u>	Τ	Γ		<u></u>			Т	Τ	Т	+
millicurie total;	\$132	, <del> </del> '	1		L	Eor her		rters use o			<u> </u>		+
p. Nuclear service licenses, such as, leak testing, instrument	ψισε	+	<u> </u>	Τ	1		<u></u>			Τ	$\top$	1	+
calibration, etc.;	\$410	, <del> </del> '	L		<u> </u>	For her		rters use o				1	+
4. Waste disposal or processing	<b>v</b>	+	T	T	Ι	T	1	1010 000		Т	<u> </u>	1	+
a. Commercial waste disposal or treatment facilities, including	+	+	<u> </u>	+	+	+	+	+	+	+	+	+	
burial or incineration;	\$250,555	. <del> </del>	<u> </u>	ىسىل	L	For her		rters use o		1			1
b. All other commercial facilities involving compaction,	<b>+-</b> ,			$\Box$	Γ		1	T		$\top$	$\top$	Т	1
repackaging, storage or transfer;	\$24,971	.+'	ı		L	For her	-daua/	rters use o	- orily				1

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													Est. Ann. Revenue
DESCRIPTION	FEE	DEPOSIT	ORG	EO	OBJECT	REVENUE	SI	OCA	FUND	BUDGET	IBI	PROGRAM	Accruing to CHD
UESGAP HON	AMOUNT	AMOUNT	L4/L5	- 20	CODE	CATEGORY	31	ULA	GF-SF-FID	ENTITY	IDI	COMPONENT	Trust Fund
c. Commercial treatment of radioactive materials for release to													
unrestricted areas.	\$5,735				L	For head	quarte	ers use c	only				
5. Medical use.													
a. Teletherapy or high dose rate remote after loading devices;	\$1,378				<b></b>	For head	quarte	ers use o	nly				
b. Medical institutions including hospitals, except category 5.a.							L I		Ĺ				
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	<b></b>		<u> </u>	L	For head	duarte	ers use d		· · · · ·			†
e. Nuclear powered pacemakers;	\$266	·	-			For head	· · ·		·				
f. Mobile nuclear medicine services.	\$1,625						-		· · · · · ·				<u> </u>
6. Civil defense.	\$821	For headquarters use only For headquarters use only For headquarters use only											
7. Device, product, or sealed source safety evaluation.					]					1			<u>+</u>
a. Device evaluation, per device;	NONE												
b. Sealed source design, per source.	NONE									-			
Reclamation Fee	5% of annual					For head				1			
	licensing fee					For neau	quart						
X-Ray Machine Annual Registration Fees	noor ioning roo			$\vdash$	<u> </u>								
Medical, chiropractic, osteopathic, or naturopathic machines				+					<u> </u>	-	+		
- First tube	\$145			<u> </u>		Ear boad							
Each additional tube	\$145	<u> </u>				For head							
2. Veterinary machines - First tube	\$65					For head	•		•				
Each additional tube			-			For head							<u> -</u>
	\$34					For head							
3. Educational or industrial machines - First tube	\$47					For head	•						<u> </u>
Each additional tube	\$23	<u> </u>				For head	•		<u> </u>				
4. Dental or podiatry machines - First tube	\$31	ł				For head							
Each additional tube	\$11					For head							
5. Medical accelerators	\$258					For head							
Each additional tube	\$148					For head							
6. Non-medical accelerators	\$81	<u> </u>				For head	· ·	-	- · ·				+
Each additional tube	\$48		Γ	-		For head	quart	ters use (	only		1		
Radiologic Technologist Certifications					<u> </u>								
Application and study guide (applicant also pays whatever fee		<u> </u>			L		<u> </u>				L	I	
he testing service charges)	\$75	ļ			r	For head	quart	ters use	only		-	-	<u></u>
2. Application without study guide (applicant also pays whatever						<u> </u>				<u> </u>			
ee the testing service charges)	\$50					For head							
3. Application through endorsement (no test needed)	\$45				_	For head	iquart	ters use	only				
4 Repeat examinations (applicant also pays whatever fee the			L		L			I	,	<u> </u>	<u> </u>		
esting service charges)	\$35												
5. Renewal - first category	\$55					For head	quart	ers use	only				

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	<b></b>														Est. Ann. Revenue,
DESCRIPTION	FEE	DEPOSIT AMOUNT	ORG L4/L5	EO	OBJECT CODE	REVENUE	SI	I OCA		JND SF-FID	BUDG		BI	PROGRAM COMPONENT	Accruing to CHD Trust Fund
Each additional category	\$40					For head	Iqua	arters use o	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	<u> </u>				For hear	iquar	arters use o	only						
10. Study guide	\$25					For hear	iqua	arters use o	only						
Pre and Post Mining Fees		<u> </u>		<u> </u>											
1. Gamma radiation exposure measurement (1 per acre)	\$7.50					For hear	lqua	arters use o	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												
Low-Level Radioactive Waste Inspection Fee		<u> </u>							T						
Cubic foot of waste shipped (minimum fee = \$50 per shipment)	\$1.95					For hear	dqua	arters use	only						
Low-Level Radioactive Waste Transport Fee				$\Box'$											
Annual transport permit	\$100					For hear	dqua	arters use	only						
Water Analysis Fees															
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. lodine 131	\$110	, [	For headquarters use only												
9. Photon emitters	\$128		For headquarters use only												
Laboratory Certification Fees				$\Box$											
1. Sate drinking water certification	\$500	, <u> </u>				For hear	dqua	arters 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	,					•	arters use							

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