

# Appropriations Project Request - Fiscal Year 2018-19

## For projects meeting the Definition of House Rule 5.14

1. Title of Project: Sarasota County - Englewood Interstate Connector

2. Date of Submission: 11/09/2017

3. House Member Sponsor: Julio Gonzalez

Members Copied:

### 4. DETAILS OF AMOUNT REQUESTED:

- Has funding been provided in a previous state budget for this activity? Yes  
***If answer to 4a is ?No? skip 4b and 4c and proceed to 4d, Col. E***
- What is the most recent fiscal year the project was funded? 2017-18
- Were the funds provided in the most recent fiscal year subsequently vetoed? No
- Complete the following Project Request Worksheet to develop your request:

FY:	Input Prior Year Appropriation for this project for FY 2017-18 <i>(If appropriated in 2017-18 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2018-19 <i>(Requests for additional RECURRING funds are prohibited.)</i>		
Column:	A	B	C	D	E	F
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated  <i>(Recurring plus Nonrecurring: column A + column B)</i>	Recurring Base Budget  <i>(Will equal non-vetoed amounts provided in Column A)</i>	<b>Additional Nonrecurring Request</b>	<b>TOTAL Nonrecurring plus Recurring Base Funds</b>  <i>(Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)</i>
Input Amounts:		3,000,000	3,000,000		5,000,000	5,000,000

5. Are funds for this issue requested in a state agency's Legislative Budget Request submitted for FY 2018-19? No

5a. If yes, which state agency?

5b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? Department of Transportation

5c. Has the appropriate state agency for administering the funding, if the request were appropriated, been contacted? Yes

5d. Describe penalties for failing to meet deliverables or performance measures which the agency should provide in its contract to administer the funding if appropriated.

No penalties are associated.

6. Requester:

- a. Name: Jonathan Lewis
- b. Organization: Sarasota County Board of County Commissioners
- c. Email: jrlewis@scgov.net
- d. Phone #: (941)861-5293

7. Contact for questions about specific technical or financial details about the project:

- a. Name: Spencer Anderson
- b. Organization: Sarasota County Board of County Commissioners
- c. Email: sanderso@scgov.net
- d. Phone #: (941)915-3421

8. Is there a registered lobbyist working to secure funding for this project?

- a. Name: Laura Boehmer
- b. Firm: Southern Strategy Group
- c. Email: boehmer@sostrategy.com
- d. Phone #: (813)563-4100

9. Organization or Name of entity receiving funds:

- a. Name: Sarasota County Board of County Commissioners
- b. County (County where funds are to be expended): Sarasota
- c. Service Area (Counties being served by the service(s) provided with funding): Charlotte, Lee, Sarasota

10. What type of organization is the entity that will receive the funds? (Select one)

- For Profit
- Non Profit 501(c) (3)
- Non Profit 501(c) (4)
- Local Government
- University or College
- Other (Please describe)

11. What is the specific purpose or goal that will be achieved by the funds being requested?

To construct the ultimate configuration of a main intersection of the Englewood Interstate Connector thereby protecting the health, safety and welfare of Florida residents by increasing capacity and improving resiliency of a flood-prone primary hurricane evacuation route for the Cape Haze Peninsula, including portions of Sarasota County, Charlotte County, Lee County and the City of North Port.

12. Provide specific details on how funds will be spent. (Select all that apply)

Spending Category	Description	Nonrecurring (Should equal 4d, Col. E) Enter ?0? if request is zero for the category
Administrative Costs:		
<input type="checkbox"/> a. Executive Director/Project Head Salary and Benefits		
<input type="checkbox"/> b. Other Salary and Benefits		
<input type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> d. Consultants/Contracted Services/Study		
Operational Costs:		
<input type="checkbox"/> e. Salaries and Benefits		
<input type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other		
<input checked="" type="checkbox"/> g. Consultants/Contracted Services/Study	\$200K Design Update \$450k Construction Engineering and Inspection	650,000
Fixed Capital Construction/Major Renovation:		
<input checked="" type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering	\$4.35M Construction of ultimate configuration intersection at River Road and Venice Ave.	4,350,000
<b>TOTAL</b>		<b>5,000,000</b>

13. For the Fixed Capital Costs requested with this issue (In Question 12, category ?h. Fixed Capital Outlay? was selected), what type of ownership will the facility be under when complete? (Select one correct option)

- For Profit
- Non Profit 501(c) (3)
- Non Profit 501(c) (4)
- Local Government (e.g., police, fire or local government buildings, local roads, etc.)
- State agency owned facility (For example: college or university facility, buildings for public schools, roads in the state transportation system, etc.)
- Other (Please describe)

14. Is the project request an information technology project?

No

15. Is there any documented show of support for the requested project in the community including public hearings, letters of support, major organizational backing, or other expressions of support?

Yes

15a. Please Describe:

Congressman Vern Buchanan, U.S. House of Representatives; Sen. Greg Steube; Rep. Jim Boyd; Rep. Julio Gonzalez; Rep. Joe Gruters. State, Regional, and Local Government: Sarasota/Manatee MPO; Charlotte County; Charlotte-Punta Gorda MPO. Private Businesses/Economic Dev Agencies and Educational Inst.

16. Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served?

Yes

16a. Please Describe:

A Preliminary Design and Engineering study was completed prior to engineering design.

17. Will the requested funds be used directly for services to citizens?

No

18. What benefits or outcomes will be realized by the expenditure of funds requested? (Select each Benefit/Outcome that applies)

Benefit or Outcome	Provide a specific measure of the benefit or outcome	Describe the method for measuring level of benefit

<input type="checkbox"/> Improve physical health		
<input type="checkbox"/> Improve mental health		
<input type="checkbox"/> Enrich cultural experience		
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input type="checkbox"/> Improve quality of education		
<input checked="" type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality	Improved water quality in the Myakka River watershed through enhanced treatment and attenuation of stormwater runoff through modern stormwater design and management facilities.	Improved levels in regular water quality monitoring activities.
<input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)	Less traffic accidents through implementation of managed accesses, divided road lanes, raised road surface out of 100 year floodplain, proper lighting, marking, signage and signalization and state of the art pedestrian facilities.	Ratio of accidents to vehicles traveled compared to pre-project conditions.
<input checked="" type="checkbox"/> Improve transportation conditions	Provision of a reliable hurricane evaluation route for coastal areas of Sarasota, Charlotte and Lee Counties and the City of North Port. Construction of a modern design, divided, multi-lane evacuation route above the 100yr floodplain, replacing an undivided 2-lane, rural construction roadway subject to repetitive flooding.	Reduced travel times during required evacuations. Increased AADT and reduced accidents.
<input checked="" type="checkbox"/> Increase or improve economic activity	Increased access and traffic to	Monitoring of monthly economic

	economic establishments and businesses being served by the road. Development of new residential and commercial businesses and increased traffic to existing establishments.	indices's, # of local building permits, taxable values, etc.
<input checked="" type="checkbox"/> Increase tourism	With the Atlanta Braves relocating to the City of North Port from the much larger and logistically-positioned major metro area of Orlando, the EIC will serve to provide the necessary and complementary infrastructure to the stadium which will be constructed, and the direct and indirect increases in tourism.	Monitoring of tourist development tax revenues, taxable values, hotel room occupancy and \$/night rates, etc.
<input checked="" type="checkbox"/> Create specific immediate job opportunities	# of jobs created through award of consultant and contractor contracts for completion of the work. Model projections from similar projects completed in the area have generated an excess of 350 new jobs.	Development of employment output statistics for the awarded work.
<input type="checkbox"/> Enhance specific individual's economic self sufficiency		
<input type="checkbox"/> Reduce recidivism		
<input type="checkbox"/> Reduce substance abuse		
<input type="checkbox"/> Divert from Criminal/Juvenile justice system		
<input type="checkbox"/> Improve wastewater management		
<input type="checkbox"/> Improve stormwater management		

<input type="checkbox"/> Improve groundwater quality		
<input type="checkbox"/> Improve drinking water quality		
<input type="checkbox"/> Improve surface water quality		
<input type="checkbox"/> Other (Please describe):		

19. Provide the total cost of the project for FY 2018-19 from all sources of funding (Enter ?0? if amount is zero):

Type of Funding	Amount	Percent of Total	Are the other sources of funds guaranteed in writing?
1. Amount Requested from the State in this Appropriations Project Request:	5,000,000	58.8%	N/A
2. Federal:	0	0.0%	No
3. State: (Excluding the requested Total Amount in #4d, Column F)	0	0.0%	No
4. Local:	3,500,000	41.2%	Yes
5. Other:	0	0.0%	No
<b>TOTAL</b>	<b>8,500,000</b>	<b>100%</b>	

20. Is this a multi-year project requiring funding from the state for more than one year?

Yes

20a. How much state funding would be requested after 2018-19 over the next 5 years?

- <1M
- 1-3M
- >3-10M
- >10M

20b. How many additional years of state support do you expect to need for this project?

- 1 year
- 2 years
- 3 years
- 4 years
- ≥ 5 years

20c. What is the total project cost for all years including all federal, local, state, and any other funds? Select the single answer which best describes the total project cost. If funds requested are for ongoing services or for recurring activities, select ?ongoing activity?.

- Ongoing activity ? no total cost
- <1M
- 1-3M
- >3-10M
- >10M