Appropriations Project Request - Fiscal Year 2018-19

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Port St. Joe Long Avenue Water, Sewer, and Stormwater Redevelopment

2. Date of Submission: 11/14/2017

3. House Member Sponsor: Halsey Beshears

Members Copied:

4. DETAILS OF AMOUNT REQUESTED:

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

FY:	Input Prior Year Appropriation for this project for FY 2017-18 (If appropriated in 2017-18 enter the appropriated amount, even if vetoed.)			Develop New Funds Request for FY 2018-19 (Requests for additional RECURRING funds are prohibited.)		
Column:	Α	В	С	D	E	F
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated (Recurring plus Nonrecurring: column A + column B)	Recurring Base Budget (Will equal non- vetoed amounts provided in Column A)	Additional Nonrecurring Request	TOTAL Nonrecurring plus Recurring Base Funds (Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)
Input Amounts:					1,600,000	1,600,000

- 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 Environmental

Protection

- 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.

Daily fines

6. Requester:
a. Name: <u>Charlotte Pierce</u>
b. Organization: City of Port St. Joe
c. Email: cpierce@psj.fl.gov
d. Phone #: <u>(850)229-8261</u>
7. Contact for questions about specific technical or financial details about the project:
a. Name: Charlotte Pierce
b. Organization: <u>City of Port St. Joe</u>
c. Email: cpierce@psj.fl.gov
d. Phone #: (850)229-8261
d. 1 Holle II. <u>1050/225 0201</u>
8. Is there a registered lobbyist working to secure funding for this project?
a. Name: <u>None</u>
b. Firm: <u>None</u>
c. Email:
d. Phone #:
9. Organization or Name of entity receiving funds:
a. Name: <u>City of Port St. Joe</u>
b. County (County where funds are to be expended): Gulf
c. Service Area (Counties being served by the service(s) provided with funding): Gulf
10. What type of organization is the entity that will receive the funds? (Select one)
O For Profit
O Non Profit 501(c) (3)
O Non Profit 501(c) (4)
Local Government
O University or College
O Other (Please describe)
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11. What is the specific purpose or goal that will be achieved by the funds being requested?

Replacement of failing water, sewer, and stormwater within the roadway of Long Avenue

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:		
☐a. Executive Director/Project Head Salary and Benefits		
□b. Other Salary and Benefits		
□c. Expense/Equipment/Travel/Supplies/Other		
□d. Consultants/Contracted Services/Study		
Operational Costs:		
☐e. Salaries and Benefits		
☐f. Expenses/Equipment/Travel/Supplies/Other		
□g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
☑h. Construction/Renovation/Land/Planning Engineering	Replacement of the water, sewer, and stormwater main lines that service the entire community of 3,567. Currently, we have a \$1.4m match dedicated to the project.	1,600,000
TOTAL		1,600,000

	13. For the Fixed Capital Costs requested with this issue (In Question 12, will the facility be under when complete? (Select one correct option) OFor Profit	, category ?h. Fixed Capital Outl	ay? was selected), what type of ownershi
	ONon Profit 501(c) (3)		
	ONon Profit 501(c) (4)	a lacal reads ata \	
	 Local Government (e.g., police, fire or local government buildings OState agency owned facility (For example: college or university fa 		s roads in the state transportation system
et	etc.)	iemry, sandings for pushe serioon	s, rouds in the state transportation system
	OOther (Please describe)		
	14. Is the project request an information technology project? N/A		
orga	15. Is there any documented show of support for the requested project is organizational backing, or other expressions of support? Yes	in the community including publi	ic hearings, letters of support, major
	15a. Please Describe: Letter of support and CIP plan		
	 Has the need for the funds been documented by a study, completed Yes 	by an independent 3rd party, for	r the area to be served?
	16a. Please Describe: Engineered by Dewberry		
	17. Will the requested funds be used directly for services to citizens? N/A		
18.	18. What benefits or outcomes will be realized by the expenditure of fur		
	Benefit or Outcome Provid	le a specific measure of the benefit or outcome	Describe the method for measuring level of benefit

□Improve physical health		
□Improve mental health		
□Enrich cultural experience		
□Improve agricultural production/promotion/education		
□Improve quality of education		
□Enhance/preserve/improve environmental or fish and wildlife quality		
☑Protect the general public from harm (environmental, criminal, etc.)	Reduction in the possibility of sewer leaks	Comparative between current sewer calls and calls after the pipe replacement
□Improve transportation conditions		
□Increase or improve economic activity		
□Increase tourism		
□Create specific immediate job opportunities		
□Enhance specific individual?s economic self sufficiency		
□Reduce recidivism		
□Reduce substance abuse		
□Divert from Criminal/Juvenile justice system		
☑Improve wastewater management	Reduction of I and I at the wastewater treatment plant	Monitor daily flows, especially during rain events and compare to current numbers
☑Improve stormwater management	Reduction of stormwater runoff containing possible sewer from aging	Comparatives between the current water quality of bay shores to the quality after the replacement of the

	pipes.	pipes.
☑Improve groundwater quality	Reduction of the possibility of sewer leaking into groundwater.	Groundwater monitoring before and after the pipes are replaces.
☑Improve drinking water quality	Replacement of the old metallic pipe that is the city's main trunk line	Review of samples before and after the pipe replacement.
☑Improve surface water quality	Reduction of the possibility of aging sewer lines leaking into our streams, ponds, and bay	Comparatives of water quality in our streams, ponds, and bay before and after the pipe replacement.
□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?
Amount Requested from the State in this Appropriations Project Request:	1,600,000	53.3%	N/A
2. Federal:	0	0.0%	No
State: (Excluding the requested Total Amount in #4d, Column F)	0	0.0%	No
4. Local:	1,400,000	46.7%	Yes
5. Other:	0	0.0%	No
TOTAL	3,000,000	100%	

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
O1-3M
O>3-10M
O>10M
20b. How many additional years of state support do you expect to need for this project?
⊙1 year
O2 years
O3 years
O4 years
O>= 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
O<1M
O1-3M
O>3-10M
O>10M
21. What is the revenue source of ongoing operating funds? City of Port St. Joe
22. Has local approval been given for ongoing operating funds? Yes
23. Have you applied for alternative state funding? □a. Wastewater Revolving Loan ☑b. Drinking Water Revolving Loan
☐c. Small Community Wastewater Treatment Grant
□c. Small confindintly wastewater freatment Grant □d. Other (Please describe)
□e. N/A
LE. N/A
24. Has project been addressed in a local, regional, or state plan? Yes

- 24a. If Yes, insert plan name and cite page numbers. City of Port St. Joe Capital Improvement Plan
- 25. Is the project for a financially disadvantaged community? (as defined in Chapter 62-552, F.A.C.) Yes
- 26. What is the population economic status?
 - Tinancially Disadvantaged Municipality
 - Ob. Rural Area of Critical Economic Concern
 - Oc. Rural Community Experiencing Economic Distress
 - Od. N/A
- 27. What is the status of planning?
 - ⊙a. Ready
 - Ob. Not Ready
- 28. What percentage of the planning process has been completed? 100%
- 29. What is the estimated planning completion date? 10/01/17
- 30. What is the status of design?
 - ⊙a. Ready
 - Ob. Not Ready
- 31. What percentage of design has been completed? 25%
- 32. What is the estimated design completion date? 6/30/18
- 33. List all required permits.

FDEP Water

- 34. What is the status of permitting?
 - Oa. Planned
 - Ob. Submitted
 - ⊙c. Received
- 35. What is the status of construction?
 - Oa. Ready
 - ⊙b. Not Ready
- 36. What percentage of construction has been completed? 0%
- 37. What is the estimated completion date of construction? 6/30/19