

The Florida House of Representatives
Appropriations Project Request - Fiscal Year 2022-23
For projects meeting the definition of House Rule 5.14

1. Title of Project: Marianna Market Street Water and Wastewater Upgrades
2. Date of Submission: 11/02/2021
3. House Member Sponsor: Brad Drake

4. Details of Amount Requested:

- a. Has funding been provided in a previous state budget for this activity? No
- 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 2021-22 <i>(If appropriated in 2021-22 enter the appropriated amount, even if vetoed.)</i> | | | Develop New Funds Request for FY 2022-23 <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 | Recurring Base Budget | Additional Nonrecurring Request | TOTAL Nonrecurring plus Recurring Base Funds |
| Input Amounts: | | | | | 1,000,000 | 1,000,000 |

- e. Provide the total cost of the project for FY 2022-23 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 | 1,000,000 | 99.0% | 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 | 10,000 | 1.0% | Yes |

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| | | | |
|--------------|------------------|-------------|----|
| 5. Other | 0 | 0.0% | No |
| TOTAL | 1,010,000 | 100% | |

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

No

6. Which is the most appropriate state agency to place an appropriation for the issue requested? Department of Environmental Protection

a. Has the appropriate state agency for administering the funding, if the request were appropriated, been contacted? No

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

The Contracting agency, City of Marianna will will establish a Critical path with date specific targets for pre-development. Once bids are received and awarded for the project, the contract will have specific contract completion dates, if not met contractor will be subject to Liquidated Damages, assessed on a daily basis.

7. Requester:

a. Name: James Dean

b. Organization: City of Marianna

c. Email: jdean@mariannafl.city

d. Phone #: (850)718-1000

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

a. Name: James Dean

b. Organization: City of Marianna

c. Email: jdean@mariannafl.city

d. Phone #: (850)718-1000

9. Registered lobbyist working to secure funding for this project.

a. Name: Patrick E. Bell

b. Firm: Capitol Solutions LLC

c. Email: pebell@earthlink.net

d. Phone #: (850)544-0784

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10. Organization or Name of entity receiving funds:

- a. Name: City of Marianna
- b. County (County where funds are to be expended): Jackson
- c. Service Area (Counties being served by the service(s) provided with funding): Jackson

11. What type of organization is the entity that will receive the funds?

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

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

This project will replace very old and deteriorated water lines, which require City to cut into pavement damaging the integrity of Market Street. The project also addresses water inflow and infiltration into the City's wastewater system. The existing sewer lines are over 80 years old and require repair and replacement.

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

| Spending Category | Description | Amount Requested (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 checked="" type="checkbox"/> d. Consultants/Contracted Services/Study | Architect / Engineer. | 90,000 |

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| | | |
|--|--|------------------|
| Operational Costs: | | |
| <input type="checkbox"/> e. Salaries and Benefits | | |
| <input type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other | | |
| <input type="checkbox"/> g. Consultants/Contracted Services/Study | | |
| Fixed Capital Construction/Major Renovation: | | |
| <input checked="" type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering | Replace very old and deteriorated water lines, which require City to cut into pavement damaging the integrity of Market Street. The project also addresses water inflow and infiltration into the City's wastewater system. The existing sewer lines are over 80 years old and require repair and replacement. | 910,000 |
| TOTAL | | 1,000,000 |

14. For Fixed Capital Costs requested in Question 13, what type of ownership will the facility be under when complete?
- 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)

15. Is the project request an information technology project?

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16. 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

a. Please Describe:

Yes, this project was identified in multiple planning documents that were prepared after Hurricane Michael. The concepts and designs were prepared in a planning document prepared by R2P2, funded by US Dept. of Environmental Protection and FEMA.

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

Yes

a. Please Describe:

Master Planning document completed.

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

19. 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 or outcome |
|--|---|--|
| <input checked="" type="checkbox"/> Improve physical health | City would improve water and sewer services to the business district. | Increased revenues for both City and State, increase number of businesses. |
| <input type="checkbox"/> Improve mental health | | |
| <input type="checkbox"/> Enrich cultural experience | | |
| <input type="checkbox"/> Improve agricultural production/promotion/education | | |

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| | | |
|--|---|--|
| <input type="checkbox"/> Improve quality of education | | |
| <input type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality | | |
| <input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.) | This improvement would reduce eliminate inflow and infiltration to the sewer system. Project would improve / reduce water loss. | Monitor water loss for city, monitor record flows of wastewater at the City's treatment plant. |
| <input type="checkbox"/> Improve transportation conditions | | |
| <input type="checkbox"/> Increase or improve economic activity | | |
| <input type="checkbox"/> Increase tourism | | |
| <input type="checkbox"/> Create specific immediate job opportunities | | |
| <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 | | |

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| | | |
|---|--|--|
| <input type="checkbox"/> Other (Please describe): | | |
|---|--|--|

20. Have you applied for alternative state funding?

- a. Wastewater Revolving Loan
- b. Drinking Water Revolving Loan
- c. Small Community Wastewater Treatment Grant
- d. Other (Please describe)
- e. N/A

21. What is the population economic status?

- a. Financially Disadvantaged Municipality
- b. Rural Area of Critical Economic Concern
- c. Rural Community Experiencing Economic Distress
- d. N/A

22. What is the status of construction?

- a. Ready
- b. Not Ready

23. What percentage of construction has been completed?

0

24. What is the estimated completion date of construction?

01/01/2024