

The Florida Senate Local Funding Initiative Request Fiscal Year 2023-2024

1. Project Title Hallandale Beach Rehabilitation of Lift Stations #10, #11 and #15

2. Senate Sponsor Jason Pizzo

3. Date of Request 03/22/2023

4. Project/Program Description

Funding support is being requested to assist with the rehabilitative construction of lift stations #10, #11, and #15, servicing the Golden Isles Safe Neighborhood District. These lift stations are approximately 30 years old, exceeding their engineered life cycle of approximately 20 years by approximately 10 years. The project aims to upgrade the lift stations by replacing and rehabilitating the existing can-style lift station with a dual submersible lift station.

5. State Agency to receive requested funds

Department of Environmental Protection

State Agency contacted? Yes

6. Amount of the Nonrecurring Request for Fiscal Year 2023-2024

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	945,000
Total State Funds Requested	945,000

7. Total Project Cost for Fiscal Year 2023-2024 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	945,000	32%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	2,055,000	68%
Other	0	0%
Total Project Costs for Fiscal Year 2023-2024	3,000,000	100%

8. Has this project previously received state funding? No

Fiscal Year	Amo	ount Specific		Vetoed	
(уууу-уу)	Recurring	Nonrecurring	Appropriation #		

9. Is future funding likely to be requested?

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

The City is always looking for grant funding and additional partners to support the City's efforts.

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

No

If yes, indicate the amount of funds received and what the funds were used for.



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Complete questions 11 and 12 for Fixed Capital Outlay Projects

11. Status of Construction

a. What is the current phase of the project?

OPlanning ODesign OConstruction

- b. Is the project "shovel ready" (i.e permitted)?
- c. What is the estimated start date of construction?
- d. What is the estimated completion date of construction?
- 12. List the owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

Yes

10/01/2023

09/30/2024

The City of Hallandale Beach.

13. Details on how the requested state funds will be expended

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/ Other		0
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/ Other		0
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering	Construction - rehabilitative construction of lift stations #10, #11, and #15, servicing the Golden Isles Safe Neighborhood District. These lift stations are approximately 30 years old, exceeding their engineered life cycle of approximately 20 years by approximately 10 years. The project aims to upgrade the lift stations by replacing and rehabilitating the existing canstyle lift stations	945,000
Total State Funds Requested (m	ust equal total from question #6)	945,000

14. Program Performance

a. What specific purpose or goal will be achieved by the funds requested?

Funding support is being requested to assist with the rehabilitative construction of lift stations #10, #11, and #15, servicing the Golden Isles Safe Neighborhood District. These lift stations are approximately 30 years old, exceeding their engineered life cycle of approximately 20 years by approximately 10 years. The project aims to upgrade the lift stations by replacing and rehabilitating the existing can-style lift station with a dual submersible lift station.



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b. What activities and services will be provided to meet the intended purpose of these funds?

Rehabilitative construction of lift stations #10, #11, and #15, servicing the Golden Isles Safe Neighborhood District.

c. What direct services will be provided to citizens by the appropriation project?

The project will upgrade the lift stations by replacing and rehabilitating the existing canstyle lift stations

d. Who is the target population served by this project? How many individuals are expected to be served?

All residents of the Golden Isles Safe Neighborhood District. Greater than 800.

e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?

Benefit - Improve the level of operational efficiency of the sewer lift station noted by a reduction in sewer spills into the community.

Methodology - Day to day operational monitoring will allow us to know that the stations are functioning appropriately.

f. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for the contract?

Failing to meet the deliverables will make compliance with environmental statutes for sewage collection and treatment extremely difficult to maintain. DEP could hold back funding or request refund.

15. Requester Contact Information

-					
a. First Name	Jeremy		Last Name	Earle	
b. Organization	City of Hallandale Beach				
c. E-mail Address	jearle@co	jearle@cohb.org			
d. Phone Number	(954)457	-1460	Ext.		
16. Recipient Contact	6. Recipient Contact Information				
a. Organization	City of Ha	allandale Beach			
b. Municipality and	d County	Broward			
c. Organization Ty	c. Organization Type				
Ger Profit Entity	□For Profit Entity				
□Non Profit 501(c	□Non Profit 501(c)(3)				
□Non Profit 501(c	□Non Profit 501(c)(4)				
☑Local Entity	☑Local Entity				
□University or College					
□Other (please specify)					
d. First Name	Noemy		Last Name	Sandoval	
e. E-mail Address	nsandova	al@cohb.org			
f. Phone Number	(954)457-1300				



17. Lobbyist Contact Information

a. Name	Mathew Forrest	
b. Firm Name	Ballard Partners	
c. E-mail Address	mat@ballardpartners.com	
d. Phone Number	(561)253-3232	

Please complete the questions below for Water Projects only.

18. Have you applied for alternative state funding?

- □ Waste Water Revolving Loan
- Drinking Water Revolving Loan
- □ Small Community Wastewater Treatment Grant
- ☑ Other (please specify) The City is researching all funding opportunities and intends to apply to all applicable resource
- D N/A

19. What is the population economic status?

- ☑ Financially Disadvantaged Community (ch. 62-552, F.A.C)
- □ Financially Disadvantaged Municipality (ch. 62-552, F.A.C)
- □ Rural Area of Economic Concern
- □ Rural Area of Opportunity (s. 288.0656, Florida Statutes)
- D N/A

20. What is the status of construction?

Ready

- 21. What percentage of the construction has been completed?
 - 0

22. What is the estimated completion date of construction?

09/30/2024