

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

LFIR # 1871

MEADACE LIFTA		and Transfer II C	al. Cauda				
Project Title	New Smyrna Be	each Turnbull Cre	ek South				
Senate Sponsor	Tom Wright						
Date of Request	02/22/2023						
Project/Program De	escription						
Turnbull Creek Sou outfall to Turnbull Ba		al dating back to t	he late 1700's that runs	north and south pro			
State Agency to red	ceive requested fu	ınds Depar	tment of Environmental	Protection			
tate Agency conta	icted? No						
mount of the Nonr	recurring Request	for Fiscal Year	2023-2024				
Type of Funding			Amo	Amount			
Operations				2,250,000			
Fixed Capital Outlay				0			
Total State Funds F	Requested			2,250,000			
•	or Fiscal Year 202	23-2024 (includir	ng matching funds avai				
Type of Funding	//	ti #C)	Amount	Percentage			
Total State Funds Re	equestea (from que	estion #6)	2,250,000	100%			
Matching Funds			0	0%			
Matching Funds Federal	amount of this requ	uest)	0	0%			
Matching Funds Federal State (excluding the	amount of this requ	uest)	0 0	0%			
Matching Funds Federal State (excluding the Local	amount of this requ	uest)	0				
Matching Funds Federal State (excluding the Local Other			0	0% 0%			
Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project pre	s for Fiscal Year 20	023-2024	0 0 0 2,250,000	0% 0% 0% 100%			
Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project pre	s for Fiscal Year 20 eviously received Amo	023-2024	0 0 0 2,250,000 No	0% 0% 0%			
Matching Funds Federal State (excluding the Local Other Total Project Costs	s for Fiscal Year 20	023-2024 state funding?	0 0 0 2,250,000 No Specific	0% 0% 0% 100%			
Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project pre Fiscal Year (уууу-уу)	s for Fiscal Year 20 eviously received Amo Recurring	023-2024 state funding? ount Nonrecurring	0 0 0 2,250,000 No Specific	0% 0% 0% 100%			
Matching Funds Federal State (excluding the ocal Other Total Project Costs Has this project pre Fiscal Year (yyyy-yy) s future funding like	eviously received Amore Recurring	ount Nonrecurring	0 0 0 2,250,000 No Specific Appropriation #	0% 0% 0% 100%			
Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project pre Fiscal Year (yyyy-yy) Is future funding like a. If yes, indicate ne	eviously received Amore Recurring kely to be requested	state funding? ount Nonrecurring ed? unt per year.	0 0 0 2,250,000 No Specific Appropriation #	0% 0% 0% 100%			



11. Status of Construction

Planning

a. What is the current phase of the project?

ODesign

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

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LFIR # 1871

CDBG-CV Corona Virus Grant, \$50,000. This grant was used for low to moderate income families for food subsidy and delivery.

Complete questions 11 and 12 for Fixed Capital Outlay Projects

Construction

d. What is the estimated comple	etion date of construction?	
12. List the owners of the facility t relationship between the owners	to receive, directly or indirectly, any fixed capital outlay funding. Inclears of the facility and the entity.	ude the
13. Details on how the requested s	tate 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/Major	or Renovation:	
Construction/Renovation/Land/ Planning Engineering	The intended use for this Grant request will be for Design, Permitting, and Construction of a canal/water outfall Vegetation clearing and Dredging.	2,250,000
Total State Funds Requested (n	nust equal total from question #6)	2,250,000
14. Program Performance a. What specific purpose or go	pal will be achieved by the funds requested?	
To remove excess vegetation a	and sediment prohibiting clear flow of drainage canals within the city limits.	
b. What activities and services	s will be provided to meet the intended purpose of these funds?	
Design, Permitting and Constru	action/Dredging of canals and drainage outfalls.	
c. what direct services will be	provided to citizens by the appropriation project?	



c. E-mail Address

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

			Ju Ju.					LFIR # 1871
	Improved drainage and reduce flooding during extreme weather like Hurricanes and Heavy Rain fall events.							
d. Who is the targ	d. Who is the target population served by this project? How many individuals are expected to be served?							
Local residents ar	nd busines	ses located in ea	stern Volusia	a County	and New	Smyrna	Beach.	
e. What is the exp be measured?	e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?							
Improved drainag comparison of the	Improved drainage and watershed during extreme weather events. The methodology by which this will be measured is comparison of the vegetation and sediment removed before and after the construction avtivities.							will be measured is a
•								ts standard penaltie
for failing to meet	deliverab	les or performa	ince measur	es provi	ded for th	ne contra	act?	
Liquidated damag	ges will be	assigned to the p	project for fail	ure to pe	rform bas	ed on co	ontract time and	d deliverables.
15. Requester Contac	t Informat	ion						
a. First Name	Todd		Last Name	Alexano	der			
b. Organization		ew Smyrna Beac	-					
•	talexander@cityofnsb.com							
d. Phone Number		•	1	2613				
16. Recipient Contact	Information	on						
a. Organization		ew Smyrna Beac	:h					
b. Municipality and	d County	Volusia						
c. Organization Ty	pe							
□For Profit Entity	•							
□Non Profit 501(d								
•	, ,							
□Non Profit 501(d	C)(4)							
☑Local Entity								
□University or Co	ollege							
□Other (please sp	pecify)							
d. First Name	Khalid		Last Name	Reshei	dat			
e. E-mail Address	kresheida	at@cityofnsb.con	n					
f. Phone Number	(386)410	-2610						
17. Lobbyist Contact I	Informatio	n						
a. Name	a. Name None							
b. Firm Name	b. Firm Name None							



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

LFIR # 1871

C	d. Phone Number
Ple	ase complete the questions below for Water Projects only.
18. F	lave you applied for alternative state funding?
	☐ Waste Water Revolving Loan
	□ Drinking Water Revolving Loan
	☐ Small Community Wastewater Treatment Grant
	☐ Other (please specify)
	☑ N/A
19. V	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)
	☑ N/A
20. V	What is the status of construction?
	Not Started
21. V	What percentage of the construction has been completed?
	0%
22. V	What is the estimated completion date of construction?
	03/12/2025