



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** City of LaBelle Zone J Septic Tank to Sewer Conversion project

2. **Senate Sponsor:** Kathleen Passidomo

3. **Date of Submission:** 11/17/2017

4. **Project/Program Description:**

The LaBelle Zone J Septic Tank Conversion to Central Sewer will complete the conversion of Zone J septic tanks to central sewer in the City of LaBelle. Water quality will potentially be improved in the Caloosahatchee River (C-43) for residents of the city and the region upon completion. This project mitigates river water quality issues

5. **State Agency Contacted?** No

a. If yes, which state agency?

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

Department of Environmental Protection

6. **Amount of Non-recurring Requested for fiscal year 2018-19:**

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
	908,500	908,500

7. **Type, amount and percent of matching funds available for this project for fiscal year 2018-19:**

Type	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	0	0.0%
Other	0	0.0%
TOTAL	0	0.0 %

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 908,500

9. **Previous Year Funding Details:**

a. Has funding been provided in a previous state budget for this activity? No

b. In the previous 5 fiscal years, how many years was funding provided? (Optional)

c. What is the most recent fiscal year the project was funded?

d. Were the funds provided in the most recent fiscal year subsequently vetoed?

e. Complete the following Worksheet.



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FY:	Input Prior FY Appropriation for this project for FY 2017-18 (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
Column:	A	B	C
Funds Description:	Prior Year Recurring Funds *	Prior Year Nonrecurring Funds *	Total Funds Appropriated (Column A + Column B)
Input Amounts:			

10. Is future-year funding likely to be requested?

No

11. Program Performance:

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

Water quality will be improved in the Caloosahatchee River (C-43) and users will move from using a septic tank to the city central sewer treatment facility.

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

N/A

c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
<input type="checkbox"/> Executive Director/Project Head Salary and Benefits		
<input type="checkbox"/> Other Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		
Operational Costs		
<input type="checkbox"/> Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		



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Fixed Capital Construction/Major Renovation		
<input checked="" type="checkbox"/> Construction/Renovation/Land/Planning Engineering	Construction of lift station and infrastructure associated with septic tank to sewer conversion.	908,500
TOTAL		908,500

d. What are the direct services to be provided to citizens by the appropriations project?

Allows for normal waste water services to all city customers in Zone J.

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

Zone J in the City of LaBelle and surrounding area, 2,500

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

Normal waste water services to all city customers in Zone J. Customer Utility Billing invoices.

g. 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 in the contract?

Cancel funding

12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.

City of LaBelle

13. Requestor Contact Information:

- a. **Name:** Dave Lyons
- b. **Organization:** City of LaBelle
- c. **Email:** davealyons@hotmail.com
- d. **Phone Number:** (863)228-0008

14. Recipient Contact Information:

- a. **Organization:** City of LaBelle
- b. **County:** Hendry
- c. **Organization Type:**
 - ☐ For Profit
 - ☐ Non Profit 501(c) (3)
 - ☐ Non Profit 501(c) (4)
 - ☒ Local Entity
 - ☐ University or College



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☐ Other (Please specify)

d. Contact Name: Ron Zimmerly

e. E-mail Address: rzimmerly@citylabelle.com

f. Phone Number: (863)675-2872

15. If there is a registered lobbyist, fill out the lobbyist information below.

a. Name: Joe Spratt

b. Firm: Spratt & Associates

c. Email: josephrspratt@yahoo.com

d. Phone Number: (863)517-0235

16. Have you applied for alternative state funding?

☐ Wastewater Revolving Loan

☐ Drinking Water Revolving Loan

☐ Small Community Wastewater Treatment Grant

☐ Other (Please describe)

☒ N/A

17. 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

18. What is the status of construction?

Planning Stage

19. What percentage of construction has been completed?

0%

20. What is the estimated completion date of construction?

July 2019