

Local Funding Initiative Request - Fiscal Year 2018-2019

1. Title of Project: Miami Gardens Neighborhood Stormwater Swale Re-grading Project

Senate Sponsor: Oscar Braynon
 Date of Submission: 12/06/2017

Project/Program Description:

Neighborhood Stormwater Swale Re-grading Project

- 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
	20,000	20,000

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

Туре	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	20,000	50.0%
Other	0	0.0%
TOTAL	20,000	50.0 %

8. Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds): 40,000

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:	Α	В	С
Funds Description: Input Amounts:	Prior Year Recurring Funds *	Prior Year Nonrecurring Funds *	Total Funds Appropriated (Column A + Column B)

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?

The goal is to minimize the existing flooding problems in the community so water can be collected from the water maintaining of the road that causes hydroplaning.

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

The funds will be used to construct and re-shape the swales along problem areas throughout the City.

c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
☐Executive Director/Project Head Salary and Benefits		
□Other Salary and Benefits		
□Expense/Equipment/Travel/Supplies/Other		
☐Consultants/Contracted Services/Study		
Operational Costs		
☐Salary and Benefits		
□Expense/Equipment/Travel/Supplies/Other		
☐Consultants/Contracted Services/Study		



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Fixed Capital Construction/Major Renovation		
☑Construction/Renovation/Land/Planning Engineering	Construction	40,000
TOTAL		40,000

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

There will be no direct services other than storm water drainage improvements along the swales.

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

The community and the through traffic that uses our City streets. Many individuals will be served that uses these roads.

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

Minimizing flooding problems along the flooding areas. The methodology is comparison of the amount of water staying on the roads on the project areas with the improvements of the re-grading of the swales, before and after the project is completed.

- 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?

 <u>Liquidated damages deducted from the Contract sum, and the contractor should have a bond for the completion of the project.</u>
- 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.

The project areas to be completed are under the City's jurisdiction and ownership.

13. Requestor Contact Information:

a. Name: O. Tom Ruiz

b. Organization: <u>City of Miami Gardens</u>
c. Email: <u>truiz@miamigardens-fl.gov</u>
d. Phone Number: (786)279-1260

14. Recipient Contact Information:

a. Organization: City of Miami Gardens

b. County: Miami-Dadec. Organization Type:

O For Profit

O Non Profit 501(c) (3)

O Non Profit 501(c) (4)



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- Local Entity
- O University or College
- O Other (Please specify)
- d. Contact Name: O. Tom Ruiz
- e. E-mail Address: truiz@miamigardens-fl.gov
- f. Phone Number: (786)279-1260
- 15. If there is a registered lobbyist, fill out the lobbyist information below.
 - a. Name: Yolanda Cash
 - **b. Firm:** Becker-Poliakoff
 - c. Email: yjackson@becker-poliakoff.com
 - d. Phone Number: (954)985-4132
- 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?
 - Awaiting Plan completion by consultant
- 19. What percentage of construction has been completed?
 - 0% completed Estimated Completion Date of Project
- 20. What is the estimated completion date of construction?

Prior to September 30, 2019