



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2019-2020

LFIR#: 1855

1. **Title of Project:** West Miami Potable Water System

2. **Senate Sponsor:** Jose Rodriguez

3. **Date of Submission:** 02/20/2019

4. **Project/Program Description:**

Replacement of citywide potable water system service lines that will provide fire flow improvements, clean water compliance to our aged (70 plus years) water system.

5. **State Agency to receive requested funds :** Department of Environmental Protection

State Agency Contacted? No

6. **Amount of the Nonrecurring Request for Fiscal Year 2019-2020**

Type of Funding	Amount
Operations	
Fixed Capital Outlay	6,000,000
Total State Funds Requested	6,000,000

7. **Total Project Cost for Fiscal Year 2019-2020 (including matching funds available for this project)**

Type of Funding	Amount	Percent
Total State Funds Requested (from question #6)	6,000,000	100.00%
Federal		0.00%
State (excluding the amount of this request)		0.00%
Local		0.00%
Other		0.00%
Total Project Costs for Fiscal Year 2019-2020	6,000,000	100.0%

8. **Has this project previously received state funding?** No

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	NonRecurring		

9. **Is future-year funding likely to be requested?** No

10. **Details on how the requested state funds will be expended**

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		
Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		



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Consultants/Contracted Services/Study		
Operational Costs:		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning	n/a	6,000,000
Engineering		
Total State Funds Requested (must equal total from question #6)		6,000,000

11. Program Performance:

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

Provide clean water to our citizens, improve fire flow and addressing the welfare and public safety of our citizens.

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

Citywide potable water improvements will serve to provide clean water and fire flow improvements to our aged system and address the welfare and safety to homes, multifamily units and businesses located within our municipality.

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

Citywide improvements will be of great public welfare benefit to our citizens.

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

Approximately a community of 8,000 including elderly persons, persons with poor health mentally and physical disabilities, jobless persons, economically disadvantaged persons, preschool/elementary/high school/college students and everyone who lives in the city.

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

Our goal for the water project is to address the environment and public welfare and safety of the community. We will continue to do routine trimester testing and work with the Miami Dade County Health Department on continuous testing.

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 in the contract?

Unknown at this time.

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 water system is owned and operated by the City of West Miami.



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13. Requestor Contact Information:

- a. **Name:** Yolanda Aguilar
- b. **Organization:** City of West Miami
- c. **E-mail Address:** yolandaaguilar@cityofwestmiami.org
- d. **Phone Number:** (305)266-1122

14. Recipient Contact Information:

- a. **Organization:** City of West Miami
- b. **County:** Miami-Dade
- c. **Organization Type:**
 - For Profit
 - Non Profit 501(c) (3)
 - Non Profit 501(c) (4)
 - Local Entity
 - University or College
 - Other (Please specify) Municipality
- d. **Contact Name:** Yolanda Aguilar
- e. **E-mail Address:** yolandaaguilar@cityofwestmiami.org
- f. **Phone Number:** (305)266-1122

15. Lobbyist Contact Information

- a. **Name:** Fausto Gomez
- b. **Firm Name:** Gomez Barker Associates
- c. **E-mail Address:** fgomez@gomezbarker.com
- d. **Phone Number:** (305)905-9801

Please complete the questions below for Water Projects only

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



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Rural Area of Opportunity (s. 288-0656, Florida Statutes)

N/A

18. What is the status of construction? Not Ready

19. What percentage of construction has been completed? 0

20. What is the estimated completion date of construction? 12/30/2022