



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2020-2021

LFIR # 1463

1. **Project Title** Havana Lift Station Upgrades

2. **Senate Sponsor** Bill Montford

3. **Date of Request** 11/06/2019

4. **Project/Program Description**

The Town of Havana is requesting funding for design, permitting, and construction of lift station upgrades. Replacing aging system components will ensure longevity of the lift station. These upgrades will allow the lift station to run efficiently and ensure uninterrupted service to the citizens of Havana.

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

State Agency contacted? ☐ Yes ☒ No

6. **Amount of the Nonrecurring Request for Fiscal Year 2020-2021**

Type of Funding	Amount
Operations	000
Fixed Capital Outlay	75,000
Total State Funds Requested	75,000

7. **Total Project Cost for Fiscal Year 2020-2021 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	75000	100.0 %
Matching Funds		
Federal	00	0 %
State (excluding the amount of this request)	00	0 %
Local	00	0 %
Other	00	0 %
Total Project Costs for Fiscal Year 2020-2021	75,000	100 %

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

If yes, provide the most recent instance:

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

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

If yes, indicate nonrecurring amount per year.



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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		
Consultants/Contracted Services/Study	Design, permitting, and construction of lift station upgrades.	5,000
Operational Costs: Other		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	Construction/Installation of upgrades.	70,000
Total State Funds Requested (must equal total from question #6)		75,000



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11. Program Performance

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

Replacing aging system components will ensure lift station longevity and efficiency.

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

Design, permitting, and construction of lift station upgrades will be provided to ensure lift station longevity.

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

An operational lift station with new system components to provide an uninterrupted and reliable service.

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

The citizens of the Town of Havana. An estimated 1750 individuals.

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

The benefit of this project is to have new lift station system components that will increase the life of the lift station. Upgrades to the lift station will ensure a better certainty of uninterrupted service.

- 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?

The Auditor General conducts audits for both Town and State agencies.



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12. **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.**

The Town of Havana owns the the facility.

13. **Requestor Contact Information**

- a. First Name Last Name
- b. Organization
- c. E-mail Address
- d. Phone Number Ext.

14. **Recipient Contact Information**

- a. Organization
- b. Municipality and County
- c. Organization Type
- ☐ For-profit Entity
 - ☐ Non-Profit 501(c) (3)
 - ☐ Non-Profit 501(c) (4)
 - ☒ Local Entity
 - ☐ University or College
 - ☐ Other (please specify)
- d. First Name Last Name
- e. E-mail Address
- f. Phone Number

15. **Lobbyist Contact Information**

- a. Name
- b. Firm Name
- c. E-mail Address
- d. Phone Number Ext.



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Please complete the questions below for Water Projects only.

16. **Have you applied for alternative state funding?**

- ☐ Waste Water Revolving Loan
- ☐ Drinking Water Revolving Loan
- ☐ Small Community Wastewater Treatment Grant
- ☐ Other (please specify)
- ☒ 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?**

19. **What percentage of the construction has been completed?**

20. **What is the estimated completion date of construction?**

The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.