



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2020-2021

LFIR # 1832

1. **Project Title**
2. **Senate Sponsor**
3. **Date of Request**

4. **Project/Program Description**

The project will install a new signalized intersection at NW 82 Street and NW 114 Avenue in order to provide a safe route to the residential communities nearby and Doral Legacy Park. Currently the intersection is an all way stop, however an operational analysis and signal warrant was performed resulting in the approval from Miami-Dade County for the implementation of new traffic signals. As of August 2019 there have been 10 pedestrian and vehicular accidents at this location demonstrating the necessity of these new signals.

5. **State Agency to receive requested funds**
- State Agency contacted? Yes No

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

| Type of Funding | Amount |
|------------------------------------|--|
| Operations | <input style="width: 80%;" type="text" value="000"/> |
| Fixed Capital Outlay | <input style="width: 80%;" type="text" value="350,000"/> |
| Total State Funds Requested | 350,000 |

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) | <input style="width: 80%;" type="text" value="350000"/> | <input style="width: 80%;" type="text" value="50.0"/> % |
| Matching Funds | | |
| Federal | <input style="width: 80%;" type="text" value="00"/> | <input style="width: 80%;" type="text" value="0"/> % |
| State (excluding the amount of this request) | <input style="width: 80%;" type="text" value="00"/> | <input style="width: 80%;" type="text" value="0"/> % |
| Local | <input style="width: 80%;" type="text" value="350,000"/> | <input style="width: 80%;" type="text" value="50"/> % |
| Other | <input style="width: 80%;" type="text" value="00"/> | <input style="width: 80%;" type="text" value="0"/> % |
| Total Project Costs for Fiscal Year 2020-2021 | 700,000 | 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 | | |
| <input style="width: 80%;" type="text"/> | <input style="width: 80%;" type="text"/> | <input style="width: 80%;" type="text"/> | <input style="width: 80%;" type="text"/> | <input style="width: 80%;" type="text"/> |

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 | | <input style="width: 100%; height: 20px;" type="text"/> |
| Other Salary and Benefits | | <input style="width: 100%; height: 20px;" type="text"/> |
| Expense/Equipment/Travel/Supplies/Other | | <input style="width: 100%; height: 20px;" type="text"/> |
| Consultants/Contracted Services/Study | | <input style="width: 100%; height: 20px;" type="text"/> |
| Operational Costs: Other | | |
| Salary and Benefits | | <input style="width: 100%; height: 20px;" type="text"/> |
| Expense/Equipment/Travel/Supplies/Other | | <input style="width: 100%; height: 20px;" type="text"/> |
| Consultants/Contracted Services/Study | | <input style="width: 100%; height: 20px;" type="text"/> |
| Fixed Capital Construction/Major Renovation: | | |
| Construction/Renovation/Land/Planning Engineering | The funds will be allocated to the construction of the new signalized intersection which will include four new signal mast arms, pedestrian signals, signage, striping and marking, and pedestrian ADA crossings for Doral Legacy Park. | 350,000 |
| Total State Funds Requested (must equal total from question #6) | | 350,000 |



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11. Program Performance

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

The new traffic signals will improve operations at the intersection as well as increase safety for the pedestrian traffic in the surrounding residential communities and Doral Legacy Park.

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

The funds will be used for the construction of the proposed improvements.

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

The new signalized intersection will provide a safe route for pedestrian traffic to get to and from the Doral Legacy Park as well as surrounding schools and residential communities.

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

The residential communities, Doral Legacy Park, Ronald Reagan Doral Senior High, Dr. Toni Bilbao Preparatory Academy, Dr. Rolando Espinosa K-8 Center, and all other pedestrians and motorists that will be traversing the intersection of these two roadways.

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

Increase in safety, reduction in congestion, and an improvement in the level of service of the intersection is expected and will be measured by an operational analyses after the improvements are complete as well as a notice in the reduction of accidents.

- 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?

FDOT Liquidated Damages as per Section 8-10 of the FDOT Standard Specifications for Road and Bridge Construction.



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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.**

Miami-Dade County

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.