



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 2936

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

**4. Project/Program Description**

This roadway is in need of rehabilitation for a multitude of reasons. The lack of longitudinal slope on the road, coupled with limited curbing, results in inefficient runoff collection and standing water within the travel lanes which presents driver safety concerns. Additionally, the roadway's base is nearing the end of its service life. Depressions within the roadway have been forming where the existing base material has failed. This also presents driver safety concerns. This project proposes the rehabilitation of the roadway's base and paving at the thickness needed to accommodate current and future traffic volumes. Curb reconstruction will improve function of the roadway by directing runoff to the appropriate location in a more efficient manner. These curb improvements will increase the resiliency of the roadway as the City looks to mitigate for projected storm intensification. Strategic sidewalk improvements will serve to increase mobility options along the corridor.

5. **State Agency to receive requested funds**
- State Agency contacted?**

**6. Amount of the Nonrecurring Request for Fiscal Year 2023-2024**

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	1,200,000
<b>Total State Funds Requested</b>	<b>1,200,000</b>

**7. Total Project Cost for Fiscal Year 2023-2024 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	1,200,000	75%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	400,000	25%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2023-2024</b>	<b>1,600,000</b>	<b>100%</b>

8. **Has this project previously received state funding?**

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

9. **Is future funding likely to be requested?**
- a. **If yes, indicate nonrecurring amount per year.**
- b. **Describe the source of funding that can be used in lieu of state funding.**
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10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

If yes, indicate the amount of funds received and what the funds were used for.

## Complete questions 11 and 12 for Fixed Capital Outlay Projects

11. Status of Construction

a. What is the current phase of the project?

Planning     Design     Construction

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

12. List 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.

13. Details on how the requested state funds will be expended

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Roadway reconstruction, curb construction to assist with drainage issues, sidewalks, handicap ramps.	1,200,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>1,200,000</b>

14. Program Performance

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



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Performing the roadway improvements will achieve the following: improving the structural capabilities of the roadway to accommodate current and projected traffic demands, improving roadway safety by improving runoff collection which inherently improves driver safety, addressing roadway vulnerabilities by preparing for the impacts of future storm intensification and improving mobility options throughout the corridor.

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

City would fund design services which will ensure that a complete construction bid package be prepared which addresses the above project goals. Directing State funds to roadway improvements will ensure that the intended purpose is met.

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

Roadway construction to improve driver safety and increase mobility options will be the direct service provided to citizens.

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

The working class citizens of District 18 is the target population for this project. As a designated collector roadway used by many in the City for north-south travel, all citizens are expected to be served by this project. Additionally, surrounding non-City citizens will receive a benefit from this project as many use this roadway. The projected target population is approximately 20,000 citizens.

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

Improved driver safety and mobility options are the expected project outcomes. This will be measured by the number of traffic incidents reported along the improved stretch of roadway after improvements have been performed.

**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 the contract?**

Return of funds

**15. Requester Contact Information**

a. First Name  Last Name

b. Organization

c. E-mail Address

d. Phone Number  Ext.

**16. 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



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University or College

Other (please specify)

**d. First Name**  **Last Name**

**e. E-mail Address**

**f. Phone Number**

#### 17. Lobbyist Contact Information

**a. Name**

**b. Firm Name**

**c. E-mail Address**

**d. Phone Number**