

LFIR # 2899

| No | acoming time projet | or received ally le | aorai aosistante i Cia | | io panaomio: |
|-------------------------------------|-----------------------|----------------------|--|-----------------------|---|
| 10. Has the entity req | uesting this projec | ot received any fe | deral assistance rela | ated to the COVID- | 19 nandemic? |
| b. Describe the sou | urce of funding tha | at can be used in l | ieu of state funding. | | |
| a. If yes, indicate n | onrecurring amou | nt per year. | | | |
| 9. Is future funding lik | cely to be requeste | ed? | No | | |
| | | | | | |
| Fiscal Year (yyyy-yy) | Amo Recurring | ount Nonrecurring | Specific Appropriation # | Vetoed | |
| 8. Has this project pro | eviously received | state funding? | No | | |
| Total Project Costs | for Fiscal Year 20 |)23-2024 | 1,000,000 | 100% | |
| Other | | | 0 | 0% | |
| Local | | | | 50% | |
| State (excluding the | amount of this requ | uest) | 0 | 0% | |
| Federal | | | 0 | 0% | |
| Matching Funds | equesteu (IIOIII que | -SuUII #U <i>j</i> | 500,000 | 50% | |
| Type of Funding Total State Funds R | equested (from aug | estion #6) | Amount 500,000 | Percentage 50% | |
| 7. Total Project Cost f | or Fiscal Year 202 | 3-2024 (including | | | ect) |
| Total State Funds F | Requested | | | 500,000 | |
| Fixed Capital Outlay | | | | 500,000 | |
| Operations | | | | 0 | |
| Type of Funding | | | Amo | unt | |
| 6. Amount of the Nonr | recurring Request | for Fiscal Year 20 |)23-2024 | | |
| State Agency conta | | | | | |
| 5. State Agency to red | • | nds Departm | ent of Environmental | Protection | |
| treatment plant. Bac | kup generators and | SCADA technolog | ,, | of system failures du | ion to the County's ue to natural disasters. |
| furthers the Village's | goal of restoring its | s citywide wastewa | astewater Pump Station ter infrastructure to pr | event pollutants fro | m entering Biscayne |
| 4. Project/Program De | escription | | | | |
| 3. Date of Request | 03/09/2023 | | | | |
| 2. Senate Sponsor | Shevrin Jones | | | | |
| 1. Project Title | North Bay Village | e Inlet Wastewater | Pump Station Ph II | | |
| | | | | | |

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



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| Complete questions 11 and 12 f | or Fixed Capital Outlay Projects |
|--------------------------------|----------------------------------|

- 11. Status of Construction
 - a. What is the current phase of the project?

| Planning | Design | | |
|-------------------|----------------|------------------|--|
| b. Is the project | "shovel ready" | (i.e permitted)? | |

d. What is the estimated completion date of construction?

9/30/2025

Yes

7/1/2023

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.

North Bay Village owns and maintains the facilities.

c. What is the estimated start date of construction?

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

| Spending Category | Description | Amount |
|---|---|---------|
| Administrative Costs: | | |
| Executive Director/Project Head Salary and Benefits | | 0 |
| Other Salary and Benefits | | 0 |
| Expense/Equipment/Travel/Supplies/ Other | | 0 |
| Consultants/Contracted Services/Study | | 0 |
| Operational Costs: Other | | |
| Salary and Benefits | | 0 |
| Expense/Equipment/Travel/Supplies/ Other | | 0 |
| Consultants/Contracted Services/Study | | 0 |
| Fixed Capital Construction/Major | r Renovation: | |
| Construction/Renovation/Land/ Planning Engineering | Construction of Wastewater Pump Stations, Construction Engineering and Inspection | 500,000 |
| Total State Funds Requested (m | ust equal total from question #6) | 500,000 |

14. Program Performance

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

This project aims to increase the performance, efficiency, and operational safety of the Village's wastewater management system.

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

The project consists of retrofitting and expanding the citywide wastewater management system. This project is consistent with the US EPA Flood Resilience Guide as it protects vulnerable waters by fortifying "water and wastewater utilities to withstand a flooding event, minimize damage and rapidly recover from disruptions" (EPA Flood Resilience Guide).



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

The proposed project does not provide direct services to citizens; however, it enhances the quality of life for residents by improving public infrastructure.

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

The proposed citywide project improves stormwater management for the approximately 8,000 residents of North Bay Village, and protects Florida's natural resources.

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

The Village's mitigation measures include: (1) installing a new submersible pump station; (2) installing a new wet well and valve vault, and controls; (3) retrofitting the station's force main as necessary, (4) constructing a gravity sewer to accommodate the new submersible station; (5) installing a new portable generator to ensure continuity of operation during power outages; (6) abandon the current above-ground wastewater building; (7) create additional green space that is beneficial in managing stormwater runoff.

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?

The agency will not be reimbursed for project activities that do not meet the deliverables or performance measures.

| 15. Requester Contact Information | | | | |
|---------------------------------------|-----------------------------------|--|-----------|--------|
| a. First Name | Ralph | | Last Name | Rosado |
| b. Organization | North Bay Village | | | |
| c. E-mail Address | rrosado@nbvillage.com | | | |
| d. Phone Number | (305)978-6700 | | Ext. | |
| 16. Recipient Contact | 16. Recipient Contact Information | | | |
| a. Organization | North Bay Village | | | |
| b. Municipality and County Miami-Dade | | | | |
| c. Organization Ty | ре | | | |
| □For Profit Entity | □For Profit Entity | | | |
| □Non Profit 501(c)(3) | | | | |
| □Non Profit 501(c)(4) | | | | |
| ☑Local Entity | | | | |
| □University or College | | | | |
| □Other (please sp | pecify) | | | |
| d. First Name | Marlon | | Last Name | Lobban |
| e. E-mail Address | mlobban@nbvillage.com | | | |
| f. Phone Number | (305)978-6700 | | | |



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| 17. Lobbyist Conta | ct Information | | | |
|---|--|--|--|--|
| a. Name | Rana G. Brown | | | |
| b. Firm Name | . Firm Name Ronald L. Book PA | | | |
| c. E-mail Addre | . E-mail Address rana@rlbookpa.com | | | |
| d. Phone Numb | per (305)935-1866 | | | |
| • | lete the questions below for Water Projects only. | | | |
| | er Revolving Loan | | | |
| ☐ Drinking Wa | □ Drinking Water Revolving Loan | | | |
| ☐ Small Comr | ☐ Small Community Wastewater Treatment Grant | | | |
| ☐ Other (pleas | ☐ Other (please specify) | | | |
| □ N/A | | | | |
| 19. What is the pop | oulation economic status? | | | |
| ☐ Financially I | Disadvantaged Community (ch. 62-552, F.A.C) | | | |
| ☐ Financially I | ☐ Financially Disadvantaged Municipality (ch. 62-552, F.A.C) | | | |
| ☐ Rural Area | □ Rural Area of Economic Concern | | | |
| ☐ Rural Area of Opportunity (s. 288.0656, Florida Statutes) | | | | |
| ☑ N/A | | | | |
| 20. What is the sta | tus of construction? | | | |
| Ready | | | | |
| - | ge of the construction has been completed? | | | |
| 0% | in at all a smulation data of a sustance in 0 | | | |
| 09/30/2025 | imated completion date of construction? | | | |