



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2024-2025

LFIR # 2705

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

4. **Project/Program Description**

This project is for the City of Port St. Lucie, Westport Wastewater Treatment Facility Nutrient Reduction Improvements. The Westport Wastewater Treatment Facility (WWTF) improvements includes the headworks, secondary treatment units, denitrification filters, electrical and other equipment, and will reduce Total Nitrogen to 3 mg/l and Total Phosphorus to 1 mg/l to provide Advanced Wastewater Treatment (AWT) standards and comply with Basin Management Action Plans (BMAP). The reduction of nutrients in reuse water used for irrigation in the local area will help reduce formation of harmful algal blooms in the North Fork and St. Lucie River estuary basin, a tributary to the Indian River Lagoon. It is required to provide AWT facilities to achieve an effluent quality of 3 mg/l total nitrogen and mg/l ppm phosphorus.

5. **State Agency to receive requested funds**

**State Agency contacted?**  No

6. **Amount of the Nonrecurring Request for Fiscal Year 2024-2025**

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	5,000,000
<b>Total State Funds Requested</b>	<b>5,000,000</b>

7. **Total Project Cost for Fiscal Year 2024-2025 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	5,000,000	10%
<b>Matching Funds</b>		
Federal	15,000,000	27%
State (excluding the amount of this request)	0	0%
Local	34,775,157	63%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2024-2025</b>	<b>54,775,157</b>	<b>100%</b>

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

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2023-24	0	0		No

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

a. **If yes, indicate nonrecurring amount per year.**

b. **Describe the source of funding that can be used in lieu of state funding.**

10. **Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?**



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

\$15,000,000 for construction of the Westport Wastewater Treatment Facility Nutrient Reduction Improvements. COVID-19 CDBG CV1& 3 \$1,184,482; emergency internet distance learning and mortgage assistance. ARPA \$24,432,532.74; vaccine distribution, mortgage assistance, fiber infrastructure, stormwater improvements, planned water and sewer infrastructure. ERA \$9,256,584.99; rental assistance. COVID Relief Fund \$2,436,071.16; PPE, PD payroll, rental and mortgage assistance.

## 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   
  N/A

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.**

City of Port St. Lucie, owner of the Westport Wastewater Treatment Facility

### 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	Construction of treatment facilities for advanced wastewater treatment (AWT) effluent quality.	5,000,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>5,000,000</b>

### 14. Program Performance

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



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The reduction of nutrients in reuse water used for irrigation in the local area will help reduce formation of harmful algal blooms in the St. Lucie River estuary basin, a tributary to the Indian River Lagoon. It is required to provide advanced wastewater treatment (AWT) facilities to achieve an effluent quality of 3 mg/l total nitrogen and 1 mg/l phosphorus.

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

The funds will be used for construction of treatment facilities to achieve the advanced wastewater treatment (AWT) quality for reuse water used for irrigation.

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

This project will improve the water quality in the St. Lucie River Estuary which will be a benefit for aquatic life and contribute to a healthier water for human contact.

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

This project will impact the fishing and water environment for boaters, and will enhance the environment. It has the potential to serve anyone in the City of Port St. Lucie who enjoys boating and nature, as well as those who come in contact with the St. Lucie River.

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

The total amount of nitrogen and phosphorus in the St. Lucie River will be reduced. This will be measured at the discharge of the advanced wastewater treatment (AWT) effluent from the Westport Wastewater Treatment Facility.

**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 funding to the state.

**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
- University or College
- Other (please specify)



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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

**Please complete the questions below for Water Projects only.**

**18. 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

**19. 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

**20. What is the status of construction?**

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

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