



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2024-2025

LFIR # 2912

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Expansion to the City of Lynn Haven Wastewater treatment plant capacity by constructing improvements to the headworks entering the plant. The purpose of the improvements is to prevent sanitary sewer overflows into the water of the state during storm events. The improvements will also reduce the chance of homes having sewer bakups during heavy rain events.

5. State Agency to receive requested funds

State Agency contacted?

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

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	4,000,000
<b>Total State Funds Requested</b>	<b>4,000,000</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)	4,000,000	100%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2024-2025</b>	<b>4,000,000</b>	<b>100%</b>

8. Has this project previously received state funding?

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2021-22	0	1,600,000		No

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.

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.



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\$58,782.24 used for PPE's, disinfecting, supplies, and COVID tests.

## 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)?

Yes

c. What is the estimated start date of construction?

January 2024

d. What is the estimated completion date of construction?

December 2024

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 Lynn Haven

### 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	NA - No expenses	0
Other Salary and Benefits	NA - No expenses	0
Expense/Equipment/Travel/Supplies/Other	NA - No expenses	0
Consultants/Contracted Services/Study	NA - No expenses	0
<b>Operational Costs: Other</b>		
Salary and Benefits	NA - No expenses	0
Expense/Equipment/Travel/Supplies/Other	NA - No expenses	0
Consultants/Contracted Services/Study	NA - No expenses	0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Construction and CEI services during construction	4,000,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>4,000,000</b>

### 14. Program Performance

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

Reducing the number of sanitary sewer overflows would limit the potential for exposure to any wastewater entering surface waters, resulting in cleaner waters within the bays.

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

Not completed.

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



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Potential overflows will minimize sanitary sewer backups into surrounding homes and roadways

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

800 +

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

Benefit of cleaner waters within the bays and reduction of homes having sewer backup into them. Methodology for outcome will be through monitoring the water quality in the state waters

**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?**

Loss of funding

**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)

**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**



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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?**

Ready

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

0

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

12/31/2025