



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2024-2025

LFIR # 2082

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

**4. Project/Program Description**

Construction of a trailhead with related facilities including but not limited to restrooms, shade structures, parking, pathways, adjacent trail, and amenities such as benches, bike racks, water fountain, trash cans, and bike repair station. Public-Private Partnership between Golden Triangle YMCA, Lake County and City of Tavares. Trailhead supports the regional River to the Hills and Wekiva Trail systems which are part of the Office of Greenways Trails Priority Trail System.

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               | 500,000        |
| <b>Total State Funds Requested</b> | <b>500,000</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)       | 500,000          | 50%         |
| <b>Matching Funds</b>                                |                  |             |
| Federal  | 0                | 0%          |
| State (excluding the amount of this request)         | 0                | 0%          |
| Local  | 500,000          | 50%         |
| Other  | 0                | 0%          |
| <b>Total Project Costs for Fiscal Year 2024-2025</b> | <b>1,000,000</b> | <b>100%</b> |

8. **Has this project previously received state funding?**  No

| Fiscal Year<br>(yyyy-yy) | Amount    |              | Specific<br>Appropriation # | Vetoed |
|--------------------------|-----------|--------------|-----------------------------|--------|
|                          | Recurring | Nonrecurring |                             |        |
|                          |           |              |                             |        |

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

No



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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    
  N/A

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

No

c. What is the estimated start date of construction?

5/2025

d. What is the estimated completion date of construction?

12/2025

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.

Lake County Board of County Commissioners

### 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                                | Vehicle, fuel, printer, computer, phone   | 1,000          |
| Consultants/Contracted Services/Study                                  | Design, permitting, and construction bid documents.   | 79,000         |
| <b>Operational Costs: Other</b>  |   |                |
| Salary and Benefits  |   | 0              |
| Expense/Equipment/Travel/Supplies/Other                                | Vehicle, fuel, printer, computer, phone   | 3,000          |
| Consultants/Contracted Services/Study                                  | Materials, equipment, site inspection, and project close-out.   | 2,000          |
| <b>Fixed Capital Construction/Major Renovation:</b>                    |   |                |
| Construction/Renovation/Land/Planning Engineering                      | Design, permitting, construction bid documents, and construction of trailhead buildings and related structures and amenities. | 415,000        |
| <b>Total State Funds Requested (must equal total from question #6)</b> |   | <b>500,000</b> |

### 14. Program Performance

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

Construction of a trailhead with related facilities including but not limited to restrooms, shade structures, parking, pathways, adjacent trail, and amenities such as benches, bike racks, water fountain, trash cans, and bike repair station. Public-Private Partnership between Golden Triangle YMCA, Lake County and City of Tavares. Trailhead supports the regional River to the Hills and Wekiva Trail systems which are part of the Office of Greenways Trails Priority Trail System.

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



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This project will provide recreation opportunities for residents and visitors of Lake County in support of the River to the Hills and Wekiva Regional Trails. For example, those opportunities could include various cycling and running events, i.e. Mount Dora Bicycle Festival; Florida Freewheelers Horrible Hundred Ride; Bike 5 Cities Event; Family Fun Rides (1-, 3-, or 5-mile, family friendly rides); and Bike N'Bites (A day ride that includes stopping at local restaurants for breakfast and/or lunch).

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

This project will provide recreation opportunities for residents and visitors of Lake County in support of the River to the Hills and Wekiva Regional Trails. For example, those opportunities could include various cycling and running events, i.e. Mount Dora Bicycle Festival; Florida Freewheelers Horrible Hundred Ride; Bike 5 Cities Event; Family Fun Rides (1, 3, or 5 mile, family friendly rides); and Bike N'Bites (A day ride that includes stopping at local restaurants for breakfast and/or lunch).

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

This project will serve all citizens and greater than 800 people are expected to be served.

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

Project will provide benefits to Lake County residents and visitors by providing facilities to support increase in outdoor exercise such as cycling, jogging, roller-blading and walking. This can be measured by collecting data from bike, pedestrian and vehicle counters. The project will improve economic activity in the area through tourism by providing a focal point for hosting various events. This will be measured through monitoring scheduled events, hotel, restaurant and retail sales, in addition to data collected from counters.

**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?**

Lake County Office of Procurement Services in coordination with Lake County Office of Parks & Trails contracting officer will include the appropriate penalties (financial penalties including bond forfeiture) to ensure quality.

**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



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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