

The Florida Senate Local Funding Initiative Request Fiscal Year 2023-2024

LFIR # 1634

1. Project Title	Miami Gardens Stormwater Repetitive Losses - Flooding Project				
2. Senate Sponsor	Bryan Avila				
3. Date of Request	02/20/2023				
4. Project/Program D	escription				
FEMA of continuous these repetitive are after the underground	er Drainage Project that will minimizes insurance claims of internal home a drainage projects will eliminate the drainage piping systems are corties causing the home damages.	e damages by water going lese flood damages and p	inside the home du otential loss of prop	ring storms. Therefore, erties and contents	
5. State Agency to re	ceive requested funds Department	artment of Environmental	Protection		
State Agency cont	acted? No				
6. Amount of the Non	recurring Request for Fiscal Yea	ar 2023-2024			
Type of Funding		Amo	unt		
Operations			0		
Fixed Capital Outla			1,500,000		
Total State Funds	Requested		1,500,000		
7. Total Project Cost	for Fiscal Year 2023-2024 (includ	ling matching funds avai	lable for this proje	ect)	
Type of Funding		Amount	Percentage		
Total State Funds Requested (from question #6) 1,500,000 50%					
Matching Funds		_			
Federal		0	0%		
State (excluding the amount of this request)		0	0%		
Local		1,500,000	50%		
Other		0	0%		
Total Project Cost	s for Fiscal Year 2023-2024	3,000,000	100%		
8. Has this project pr	reviously received state funding?	? No			
Fiscal Year	Amount	Specific	Vetoed		
(уууу-уу)	Recurring Nonrecurring	ng Appropriation #			
9. Is future funding li	kely to be requested?	No			
a. If yes, indicate r	nonrecurring amount per year.				
b. Describe the so	urce of funding that can be used	I in lieu of state funding.			
Private dollars and	Private dollars and/or various grants				
10 Has the entity rec					
To. Thas the entity rec	questing this project received any	y federal assistance rela	ted to the COVID-1	19 pandemic?	



11. Status of Construction

Planning

a. What is the current phase of the project?

ODesign

The Florida Senate Local Funding Initiative Request Fiscal Year 2023-2024

LFIR # 1634

0

0

0

1,500,000

1,500,000

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

The total amount received for federal assistance for COVID-19 was \$2,589,791 through Miami-Dade County. COVID related expenditure were for the following:cleaning, supplies (mask, gloves, etc.), Equipment (temperature testing, air purifiers, sanitizers, structural changes (partitions to separate personnel), COVID related sick time, Depart. Admin. Convenience Salary, Mortgage Assistance, Small Business Assistance, 1st Responder Hazard Pay, Food distribution, & Aide to Assisted Living Facilities.

Complete questions 11 and 12 for Fixed Capital Outlay Projects

Construction

b. Is the project "shovel ready" (i.e permitte	red)?	
c. What is the estimated start date of const	truction? 10/2023	
d. What is the estimated completion date o	of construction? 01/2025	
2. List the owners of the facility to receive, or relationship between the owners of the fa		tlay funding. Include the
Owner of the Right of Way- City of Miami G	ardens	
3. Details on how the requested state funds values	will be expended Description	Amount
Administrative Costs:	•	·
Executive Director/Project Head Salary and Benefits		(
Other Salary and Benefits		(
Expense/Equipment/Travel/Supplies/ Other		

14. Program Performance

Planning Engineering

Consultants/Contracted Services/Study

Consultants/Contracted

Salary and Benefits

Services/Study

Other

Operational Costs: Other

Construction/Renovation/Land/

Expense/Equipment/Travel/Supplies/

Fixed Capital Construction/Major Renovation:

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

Total State Funds Requested (must equal total from question #6)

construction costs for each repetitive loss location.

Engineering plans to construct the drainage systems in the repetitive

loss locations. The total amount for this project will also include the



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LFIR # 1634

	claims of internal h drainage projects drainage piping sy	nome damages by water go	ing inside the	e home during storms. Ther	by FEMA of continuous insurance refore, these repetitive area and contents after the underground nwater before entering the	
	b. What activities	and services will be prov	rided to mee	t the intended purpose of	these funds?	
	The funds will be front of each repet		f Stormwater	Underground Drainage Sys	stems around the right of Way in	
		. What direct services will be provided to citizens by the appropriation project?				
	None					
	d. Who is the targ	Who is the target population served by this project? How many individuals are expected to be served?				
The target population estimated is from 51-100.						
e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome be measured? The expected benefit is to minimize the existing flooding problems of homes that were identified by FEMA of confine insurance claims of internal home damages by water going inside the home during storms. Therefore, this propose will have a better quality of living (peace of mind) if there is a storm events that could flood their home. By the home flooding anymore and damaging their property and contents. f. What are the suggested penalties that the contracting agency may consider in addition to its standard for failing to meet deliverables or performance measures provided for the contract?				logy by which this outcome will		
				orms. Therefore, this property own		
				addition to its standard penaltic		
				act?		
	Hold Funding or releasing the funds as the project is designed and constructed.					
15.	Requester Contac		7			
	a. First Name	O. Tom	Last Name	Ruiz		
	b. Organization	City of Miami Gardens				
	c. E-mail Address	:. E-mail Address truiz@miamigardens-fl.gov				
	d. Phone Number	(786)279-1260	Ext.			

ai i ii ot i tailio	0. 10111		
b. Organization	City of Miami Gardens		
c. E-mail Address	truiz@miamigardens-fl.gov		
d. Phone Number	(786)279-1260	Ext.	
16. Recipient Contact Information			
a. Organization	City of Miami Gardens		
b. Municipality and	d County Miami-Dade		
c. Organization Type			
□For Profit Entity			
□Non Profit 501(c	c)(3)		
□Non Profit 501(c	c)(4)		
☑Local Entity			
□University or Co	llege		



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LFIR # 1634

	□Other (please sp	pecify)				
	d. First Name	O. Tom	Last Name	Ruiz		
	e. E-mail Address	truiz@miamigardens-fl.gov				
	f. Phone Number	(786)279-1260				
17.	Lobbyist Contact I	nformation				
	a. Name	Yolanda Cash Jackson				
	b. Firm Name	Becker & Poliakoff PA				
	c. E-mail Address	lress yjackson@beckerlawyers.com				
	d. Phone Number	e Number (954)985-4132				
Please complete the questions below for Water Projects only. 18. Have you applied for alternative state funding?						
	☐ Waste Water R	evolving Loan				
	☐ Drinking Water Revolving Loan					
	☐ Small Community Wastewater Treatment Grant					
	☐ Other (please specify)					
	☑ N/A					
19.	19. What is the population economic status?					
	☐ Financially Disa	ndvantaged 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?						
	Not in Construction- Planning Stages					
21.	What percentage of	of the construction has be	en complete	ed?		
	0					
22.	22. What is the estimated completion date of construction?					
	01/21/2025					