



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2024-2025

LFIR # 1772

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

4. Project/Program Description

The Water School within Florida Gulf Coast University will develop a comprehensive data analytics solution that will identify and prioritize areas for expanding sanitary sewer systems across Florida, taking into account environmental, social, and economic factors. Additionally, it will provide a framework to guide decisions related to septic system removal or upgrades and impacts on local wastewater treatment facilities. The solution shall include the identification of areas with failing septic systems, evaluation of proximity to nutrient-sensitive and water quality-impaired surface waters, analysis of cost-effectiveness, comparing centralized sanitary sewer system extension to onsite treatment and disposal system upgrades, assessment of the readiness of local wastewater treatment facilities to accommodate additional loads and the examination of local conditions facilitating or inhibiting septic tank elimination in specific areas.

5. **State Agency to receive requested funds**
- State Agency contacted?** Yes

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

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

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	100%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
Total Project Costs for Fiscal Year 2024-2025	5,000,000	100%

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

Fiscal Year (yyyy-yy)	Amount		Specific 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.**

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



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Yes

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)?

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.

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	Application of the standard 10% de minimis cost rate to FGCU as well as indirect costs for contractual services.	420,019
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits	Estimated number of FGCU staff includes ten faculty, six post-docs, two professional technicians, six graduate students, and four undergraduate students.	1,400,000
Expense/Equipment/Travel/Supplies/Other	Estimated equipment, travel, student support, materials and supplies, computers, peripherals, and publication costs.	429,981
Consultants/Contracted Services/Study	Contracted services and consultants to support building an analytical solution that identifies and prioritizes areas for expansion of sanitary sewer systems across Florida based on environmental, social, and economic impacts as well as consulting support for this project.	2,750,000
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		5,000,000

14. Program Performance

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



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Goal is to identify and prioritize areas for expansion of sanitary sewer systems across Florida based on environmental, social, and economic impacts and provide a wastewater framework that will allow the State to understand where septic systems should be removed or upgraded, and the impacts of those decisions on local wastewater treatment facilities.

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

Develop an analytical tool that will help facilitate the goal to identify and prioritize the expansion of sanitary sewer systems across Florida, develop a prioritization methodology to apply within the solution to support the priorities with the highest impact, and perform an assessment to understand the impacts to local wastewater treatment facilities.

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

Citizens statewide will benefit from increased water quality throughout the State.

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

All residents of Florida impacted by poor water quality conditions.

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

Use of tool will result in appreciable water quality gains by removing septic tanks.

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?

Withholding payments and assessing potential financial or liquidated damages.

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**



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e. E-mail Address

f. Phone Number

17. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number