



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2024-2025

LFIR # 1484

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

4. **Project/Program Description**

The Town's gravity sanitary sewer system is in need of repair based upon a full CCTV inspection that has been completed. The proposed project will rehabilitate the aging infrastructure that will prevent breaks in the pipes which could lead to sewage leakage that poses not only health issues but also environmental issues such as sewage leaks, groundwater contamination, or spills into water bodies.

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	1,750,000
<b>Total State Funds Requested</b>	<b>1,750,000</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)	1,750,000	50%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	1,750,000	50%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2024-2025</b>	<b>3,500,000</b>	<b>100%</b>

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

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

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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### 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?

Start date – June 1 2024

d. What is the estimated completion date of construction?

Complete – Jan 1 2026

**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.**

Marshall Labadie, Town Manager, Town of Highland Beach

**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	The project will include main cleaning, main point repairs, lateral replacement, cured-in-place pipe (CIPP) lining, and pre- and post-closed circuit television inspection (CCTV) of the gravity sanitary sewer main and service laterals that are located within State Road A1A (SR A1A).	1,750,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>1,750,000</b>

**14. Program Performance**

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

The purpose of rehabilitating the Town's aging gravity sanitary sewer system is to address and mitigate the various issues and challenges that the systems may face due to age and wear. Rehabilitating the system will prevent catastrophic failures, which can result in sewage spills, environmental damage, and costly repairs.



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

The project will include main cleaning, main point repairs, lateral replacement, cured-in-place pipe (CIPP) lining, and pre- and post-closed circuit television inspection (CCTV) of the gravity sanitary sewer main and service laterals that are located within State Road A1A (SR A1A).

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

The project includes main cleaning, main point repairs, lateral replacement, cured-in-place pipe (CIPP) lining, and pre- and post-closed circuit television inspection (CCTV) of the gravity sanitary sewer main and service laterals that are located within State Road A1A (SR A1A).

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

The project will benefit the general public which include but not limited to full time residents, seasonal residents and visitors. The Town's population is approximately 8,500 in peak season.

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

The main function of a sanitary sewer system is to protect public health. Relining the sanitary sewer will minimize the likelihood of sewer backups into homes or environmental overflow, which could cause harmful gas leaks and corrosion to main line and homeowner connections.

**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?**

The Town plans to take corrective action in the event that deliverables or performance measures are not met. Additionally, any funding or appropriations provided by the state will be refunded.

**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?