



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 1722

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The City of Groveland needs a new regional WWTF to accommodate the growth in Southwest Lake County. The City's existing facilities are nearly at capacity and growth within the City, its commerce park and neighboring communities necessitates a regional solution. The City is seeking additional funding to support design and construction of the new facility that will facilitate growth within the region.

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2023-2024

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	1,000,000
<b>Total State Funds Requested</b>	<b>1,000,000</b>

7. Total Project Cost for Fiscal Year 2023-2024 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	1,000,000	50%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	1,000,000	50%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2023-2024</b>	<b>2,000,000</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

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

No

c. What is the estimated start date of construction?

03/15/2026

d. What is the estimated completion date of construction?

12/15/2027

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 Groveland

### 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	Administration services during project.	50,000
<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	Planning/Design of new Regional WWTF to support regional growth.	950,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>1,000,000</b>

### 14. Program Performance

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

Planning and Design of a new Regional Wastewater Treatment Facility that will facilitate growth within the region.

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

Planning and Design of new, larger Regional WWTF

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



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New WWTF will provide the citizens with adequate functionality, storage and treatment which will in turn reduce overflows and will diminish environmental harm.

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

City of Groveland, Greater Southern Lake County

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

Regional WWTF to facilitate rapid growth of Groveland and Southern Lake County

**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 allocated funds will be returned if requirements not met. FDEP Permit Renewal

#### 15. Requester Contact Information

**a. First Name** Michael **Last Name** Hein  
**b. Organization** City of Groveland  
**c. E-mail Address** michael.hein@groveland-fl.gov  
**d. Phone Number** (352)429-2141 **Ext.**

#### 16. Recipient Contact Information

**a. Organization** City of Groveland  
**b. Municipality and County** Lake

#### 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** Michael **Last Name** Hein  
**e. E-mail Address** michael.hein@groveland-fl.gov  
**f. Phone Number** (352)429-2141

#### 17. Lobbyist Contact Information

**a. Name** Robert F. Stuart Jr.  
**b. Firm Name** GrayRobinson PA  
**c. E-mail Address** robert.stuart@gray-robinson.com



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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?**

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

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