### Local Funding Initiative Request - Fiscal Year 2018-2019

1. Title of Project: Boynton Beach - Alternative Reclaimed Water Supply Project

Senate Sponsor: Kevin Rader
 Date of Submission: 01/10/2018

### 4. Project/Program Description:

Project that will allow indirect withdrawals and treatment of canal water released from the Everglades Water Conservation Areas (WCAs) to provide additional reclaimed water during the peak irrigation demand while reducing the amount of canal water and nutrients sent to tide and reduce the potential for coastal algae blooms.

### 5. State Agency Contacted? No

a. If yes, which state agency?

b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? Department of Environmental Protection

### 6. Amount of Non-recurring Requested for fiscal year 2018-19:

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
	250,000	250,000

### 7. Type, amount and percent of matching funds available for this project for fiscal year 2018-19:

Туре	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	250,000	50.0%
Other	0	0.0%
TOTAL	250,000	50.0 %

#### 8. Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds): 500,000

### 9. Previous Year Funding Details:

- a. Has funding been provided in a previous state budget for this activity? No
- b. In the previous 5 fiscal years, how many years was funding provided? (Optional)
- c. What is the most recent fiscal year the project was funded?
- d. Were the funds provided in the most recent fiscal year subsequently vetoed?
- e. Complete the following Worksheet.



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FY:	Input Prior FY Appropriation for this project  for FY 2017-18  (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
Column:	Α	В	С
Funds Description: Input Amounts:	Prior Year Recurring Funds *	Prior Year Nonrecurring Funds *	Total Funds Appropriated (Column A + Column B)

### 10. Is future-year funding likely to be requested?

No

### 11. Program Performance:

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

Allow the City to partner with the State to develop and evaluate a project that will allow indirect withdrawals and treatment of canal water released from the Everglades Water Conservation Areas (WCAs) to provide additional reclaimed water during the peak irrigation demand while reducing the amount of canal water and nutrients sent to tide and reduce the potential for coastal algae blooms. In addition this treated irrigation water will reduce the demand for potable water typically used for irrigation.

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

Assist with construction of the physical water processing equipment

### c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
☐Executive Director/Project Head Salary and Benefits		
□Other Salary and Benefits		
□Expense/Equipment/Travel/Supplies/Other		
☐Consultants/Contracted Services/Study		
Operational Costs		
☐Salary and Benefits		



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□Expense/Equipment/Travel/Supplies/Other		
☐Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation		
☑Construction/Renovation/Land/Planning Engineering	Construction of water processing facility	250,000
TOTAL		250,000

d. What are the direct services to be provided to citizens by the appropriations project?

Provide an alternative source of low cost irrigation water

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

Provide Irrigation water for several Public Parks throughout the City

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

Reduction of canal water and nutrients released from the Everglades currently sent to tide thereby reducing the potential for coastal algae blooms. Irrigation water from this project will be metered to measure the benefits

- g. 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 in the contract?

  \_The City will forfeit the funds and repay the State
- 12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.

This facility will be owned and operated by the City of Boynton Beach

13. Requestor Contact Information:

a. Name: Joseph Paterniti

b. Organization: City of Boynton Beach Utilities

c. Email: paternitij@bbfl.us

**d. Phone Number:** (561)742-6423

14. Recipient Contact Information:

a. Organization: City of Boynton Beach

b. County: Palm Beachc. Organization Type:

O For Profit

O Non Profit 501(c) (3)



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	O Non Profit 501(c) (4)  Local Entity  University or College Oother (Please specify)  Contact Name: Joseph Paterniti  E-mail Address: paternitij@bbfl.us  f. Phone Number: (561)742-6423
15.	If there is a registered lobbyist, fill out the lobbyist information below.  a. Name: Matt Forrest  b. Firm: Ballard Partners  c. Email: Mat@ballardfl.com  d. Phone Number: (561)253-3232
16.	Have you applied for alternative state funding?
	□Wastewater Revolving Loan
	□Drinking Water Revolving Loan
	☐Small Community Wastewater Treatment Grant
	□Other (Please describe)
	⊠N/A
17.	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
18.	What is the status of construction?
	Construction to begin upon obtaining funding
19.	What percentage of construction has been completed?

20. What is the estimated completion date of construction?

Fall 2018

\_0%