



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2019-2020

LFIR#: 1165

**1. Title of Project:** Clermont & Project Olympus Utilities Extension

**2. Senate Sponsor:** Kelli Stargel

**3. Date of Submission:** 01/24/2019

**4. Project/Program Description:**

At present, a private-sector development known as Project Olympus is seeking to develop within the City of Clermont utility service area. Further, the project is seeking to develop in the aforementioned, Wellness Way Area, which is presently without utility service connectivity. Utility service is a critical path to activating the economic opportunity Olympus provides. Without utility connectivity, Project Olympus cannot advance.

**5. State Agency to receive requested funds :** Department of Environmental Protection

State Agency Contacted? No

**6. Amount of the Nonrecurring Request for Fiscal Year 2019-2020**

Type of Funding	Amount
Operations	
Fixed Capital Outlay	4,500,000
<b>Total State Funds Requested</b>	<b>4,500,000</b>

**7. Total Project Cost for Fiscal Year 2019-2020 (including matching funds available for this project)**

Type of Funding	Amount	Percent
Total State Funds Requested (from question #6)	4,500,000	50.00%
Federal	0	0.00%
State (excluding the amount of this request)	0	0.00%
Local	0	0.00%
Other	4,500,000	50.00%
<b>Total Project Costs for Fiscal Year 2019-2020</b>	<b>9,000,000</b>	<b>100.0%</b>

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

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

**9. Is future-year funding likely to be requested?** No

**10. 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		



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Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
<b>Operational Costs:</b>		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Construction of Utility infrastructure for Olympus Project.	4,500,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>4,500,000</b>

**11. Program Performance:**

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

At present, a private-sector development known as Project Olympus is seeking to develop within the City of Clermont utility service area. Further, the project is seeking to develop in the aforementioned, Wellness Way Area, which is presently without utility service connectivity. Utility service is a critical path to activating the economic opportunity Olympus provides. Without utility connectivity, Project Olympus cannot advance.

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

The city will match the state funds and install water and sewer utility infrastructure.

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

Water and Sewer service.

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

The City of Clermont's residents, Lake County residents and the greater Central Florida region.

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

Increase or improve economic activity. Increase tourism. Create specific immediate job opportunities.

**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 in the contract?**

If the water and sewer is not fully installed, the stay may request pro-rated return of funding.

**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.**

City of Clermont will own this utility infrastructure.

**13. Requestor Contact Information:**

**a. Name:** Darren Gray

**b. Organization:** City of Clermont



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c. **E-mail Address:** Dgray@clermontfl.org

d. **Phone Number:** (352)241-7358

#### 14. Recipient Contact Information:

a. **Organization:** City of Clermont

b. **County:** Lake

c. **Organization Type:**

- For Profit
- Non Profit 501(c) (3)
- Non Profit 501(c) (4)
- Local Entity
- University or College
- Other (Please specify)

d. **Contact Name:** James Kinzler

e. **E-mail Address:** Jkinzler@clermontfl.org

f. **Phone Number:** (352)241-7356

#### 15. Lobbyist Contact Information

a. **Name:** Chris Carmody

b. **Firm Name:** Gray-Robinson

c. **E-mail Address:** Chris.carmody@gray-robinson.com

d. **Phone Number:** (407)843-8880

#### Please complete the questions below for Water Projects only

#### 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? Planned



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**19. What percentage of construction has been completed? 0**

**20. What is the estimated completion date of construction? 12/31/2019**