



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2019-2020

LFIR#: 2084

1. **Title of Project:** City of Lynn Haven Road Damage Repair

2. **Senate Sponsor:** George Gainer

3. **Date of Submission:** 02/14/2019

4. **Project/Program Description:**

The proposed funding request is to repave the roads severely damaged during Hurricane Michael.

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

State Agency Contacted? Yes

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

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

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)	5,000,000	50.00%
Federal	0	0.00%
State (excluding the amount of this request)	0	0.00%
Local	5,000,000	50.00%
Other	0	0.00%
Total Project Costs for Fiscal Year 2019-2020	10,000,000	100.0%

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
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		
Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		



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Operational Costs:		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	Repaving the damaged roads in Lynn Haven. Costs include engineering and construction.	5,000,000
Total State Funds Requested (must equal total from question #6)		5,000,000

11. Program Performance:

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

The funds requested will assist with funding the improvements of the city's roads. The debris trucks have damaged the roads which were substandard prior to the storm.

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

Engineering and construction

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

The project will help with the funding of repaving the roads in Lynn Haven.

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

The entire City of Lynn Haven, which has a population of 21,000 people.

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

The expected benefit of the project is the roads in Lynn Haven will be repaved. The benefit will be measured by post-repair as-built surveys and quality of life.

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?

Loss 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.

The City of Lynn Haven.

13. Requestor Contact Information:

a. Name: Chris Forehand

b. Organization: Panhandle Engineering, Inc.

c. E-mail Address: cbf@panhandleengineering.com

d. Phone Number: (850)763-5200



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14. Recipient Contact Information:

- a. **Organization:** City of Lynn Haven
- b. **County:** Bay
- c. **Organization Type:**
 - For Profit
 - Non Profit 501(c) (3)
 - Non Profit 501(c) (4)
 - Local Entity
 - University or College
 - Other (Please specify) Local Municipality
- d. **Contact Name:** Michael White
- e. **E-mail Address:** citymanager@cityoflynnhaven.com
- f. **Phone Number:** (850)692-8498

15. Lobbyist Contact Information

- a. **Name:** None
- b. **Firm Name:** None
- c. **E-mail Address:**
- d. **Phone Number:**