



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2019-2020

LFIR#: 2668

1. **Title of Project:** Hurricane Michael - City of Port St. Joe - Loss of Revenue

2. **Senate Sponsor:** Bill Montford

3. **Date of Submission:** 03/15/2019

4. **Project/Program Description:**

GENERAL FUND	WASTEWATER FUND: \$803,841	WATER FUND: \$786,403	TOTAL
\$1,980,313			
Ad Tax \$328,680			
Sales Tax \$61,389			
30% Projected Revenue Loss			

5. **State Agency to receive requested funds :** Executive Office of the Governor

State Agency Contacted? No

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

Type of Funding	Amount
Operations	1,980,313
Fixed Capital Outlay	
Total State Funds Requested	1,980,313

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)	1,980,313	100.00%
Federal	0	0.00%
State (excluding the amount of this request)	0	0.00%
Local	0	0.00%
Other	0	0.00%
Total Project Costs for Fiscal Year 2019-2020	1,980,313	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		



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Benefits		
Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Operational Costs:		
Salary and Benefits	Projected loss of revenue to run day to day operations and keep the same level of service in FY 2019 / 2020.	480,313
Expense/Equipment/Travel/Supplies/Other	Projected loss of revenue to run day to day operations in FY 2019 / 2020.	1,500,000
Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		
Total State Funds Requested (must equal total from question #6)		1,980,313

11. Program Performance:

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

Maintain the same level of service in FY 2019 / 2020 due to projected revenue lost in ad valorem taxes, sales tax, and utility customers.

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

Public safety, water, sewer, and sanitation.

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

Public safety, water, sewer, and sanitation.

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

13,594 utility customers in the City of Port St. Joe.

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

Maintain the same level of service as provided pre-Hurricane Michael.

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?

Standard contract penalties are sufficient.

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 Port St. Joe.

13. Requestor Contact Information:

a. Name: James Anderson



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- b. Organization:** City of Port St. Joe
- c. E-mail Address:** janderson@psj.fl.gov
- d. Phone Number:** (850)229-8261 Ext. 112

14. Recipient Contact Information:

- a. Organization:** City of Port St. Joe
- b. County:** Gulf
- 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:** Charlotte Pierce
- e. E-mail Address:** cpierce@psj.fl.gov
- f. Phone Number:** (850)229-8261

15. Lobbyist Contact Information

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