



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2020-2021

LFIR # 1030

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

4. **Project/Program Description**

This appropriation request is for emergency generators for the City of LaBelle Lift Stations. All of the 23 LaBelle lift stations serving City Hall lost power after Hurricane Irma. Permanent generators are needed to power five critical lift stations during emergencies. These five lift stations service the LaBelle Civic Center, LaBelle City Hall and the Hendry County Jail. The amount requested is an estimate.

5. **State Agency to receive requested funds**

State Agency contacted? Yes No

6. **Amount of the Nonrecurring Request for Fiscal Year 2020-2021**

Type of Funding	Amount
Operations	<input style="width: 100%;" type="text" value="000"/>
Fixed Capital Outlay	<input style="width: 100%;" type="text" value="90,000"/>
Total State Funds Requested	90,000

7. **Total Project Cost for Fiscal Year 2020-2021 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	<input style="width: 100%;" type="text" value="90000"/>	<input style="width: 100%;" type="text" value="100.0"/> %
Matching Funds		
Federal	<input style="width: 100%;" type="text" value="00"/>	<input style="width: 100%;" type="text" value="0"/> %
State (excluding the amount of this request)	<input style="width: 100%;" type="text" value="00"/>	<input style="width: 100%;" type="text" value="0"/> %
Local	<input style="width: 100%;" type="text" value="00"/>	<input style="width: 100%;" type="text" value="0"/> %
Other	<input style="width: 100%;" type="text" value="00"/>	<input style="width: 100%;" type="text" value="0"/> %
Total Project Costs for Fiscal Year 2020-2021	90,000	100 %

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

If yes, provide the most recent instance:

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

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

If yes, indicate nonrecurring amount per year.



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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		
Operational Costs: Other		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	Generators and the associated equipment for installation at five lift stations	90,000
Total State Funds Requested (must equal total from question #6)		90,000



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11. Program Performance

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

The five critical lift stations will be powered when needed due to lack of commercial power and be able to conduct business as normal after an event.

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

Installation of generators and associated equipment at five lift stations.

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

Allows for normal waste water service at critical facilities with power after an emergency event.

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

Western Hendry County and the City of LaBelle and surrounding area, 20,000 individuals.

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

Power will be available to run the five critical lift stations to operate the shelter and conduct business after an emergency event.
Power when activated.

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 will be sufficient.



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12. **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 LaBelle will be the owner of the generators.

13. **Requestor Contact Information**

- a. First Name Last Name
- b. Organization
- c. E-mail Address
- d. Phone Number Ext.

14. **Recipient Contact Information**

- a. Organization
- b. Municipality and County
- 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 Last Name
- e. E-mail Address
- f. Phone Number

15. **Lobbyist Contact Information**

- a. Name
- b. Firm Name
- c. E-mail Address
- d. Phone Number Ext.