



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2020-2021

LFIR # 1444

1. **Project Title** Leon County Orchard Pond Greenway Trail, Phase II

2. **Senate Sponsor** Bill Montford

3. **Date of Request** 10/16/2019

4. **Project/Program Description**

This project seeks funding to support the design, engineering, and permitting of the Orchard Pond Greenway Trail, Phase II. This trail segment will be a twelve foot paved multi-use trail parallel to the Orchard Pond Parkway from the eastern parking area to Meridian Road, adding approximately 1.4 miles to the overall trail.

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

State Agency contacted? ☒ Yes ☐ No

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

Type of Funding	Amount
Operations	000
Fixed Capital Outlay	350,000
Total State Funds Requested	350,000

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)	350000	100.0 %
Matching Funds		
Federal	00	0 %
State (excluding the amount of this request)	00	0 %
Local	00	0 %
Other	00	0 %
Total Project Costs for Fiscal Year 2020-2021	350,000	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		
2018-19	00	300,000	1747A	Yes

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	Design, engineering, permitting of the Orchard Pond Greenway Trail, Phase II.	350,000
Total State Funds Requested (must equal total from question #6)		350,000



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11. Program Performance

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

This project will create recreational trails to be utilized as horse, pedestrian and bike trails adjoining the recently completed Orchard Pond Parkway, the first privately-funded toll road in Florida.

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

Design, engineering, and permitting of a twelve foot paved multi-use trail segment will be created parallel to the Orchard Pond Parkway from the eastern parking area to Meridian Road, adding approximately 1.4 miles to the overall trail.

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

This project will create recreational trails to be utilized as horse, pedestrian and bike trails adjoining the recently completed Orchard Pond Parkway.

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

This project will benefit all residents of and visitors to Leon County. The trail will be open for use to the general public.

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

Increase in opportunities for non-vehicular transportation measured by miles of greenways/trails constructed in Leon County.

- 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?

Deobligation of funds.



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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.**

Leon County

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.