

LFIR # 1561

enate Sponsor	Keith Perry		
ate of Request	12/03/2019		
roject/Program	Description		
legraded over time. [nding request is to perform injection grou During normal operations the degraded so mation facility. During storm events the o reclamation facility.	ewer infrastructure allows s	sewer flows to leak into surrounding s
state Agency to		artment of Environme	ntal Protection
	onrecurring Request for Fiscal	Year 2020-2021	
Type of Funding	g	Amount	
Operations		000	
Fixed Capital Outlay			
Fixed Capital Ou	ıtlay	750,000	
Fixed Capital Out	-	750,000 750,000	
Total State Fun	ds Requested at for Fiscal Year 2020-2021 (inc	750,000	
Total State Funotal Project Cos	ds Requested et for Fiscal Year 2020-2021 (inc	750,000 cluding matching fu	Percentage
Total State Fun otal Project Cos Type of Funding Total State Fund	ds Requested et for Fiscal Year 2020-2021 (income g s Requested (from question #6)	750,000	
Total State Funotal Project Cos	ds Requested et for Fiscal Year 2020-2021 (income g s Requested (from question #6)	750,000 cluding matching fu Amount 750000	Percentage
Total State Fun otal Project Cos Type of Funding Total State Fund Matching Funds Federal	ds Requested et for Fiscal Year 2020-2021 (income g s Requested (from question #6)	750,000 cluding matching fu	Percentage 75.0 %
Total State Fun otal Project Cos Type of Funding Total State Fund Matching Funds Federal	ds Requested et for Fiscal Year 2020-2021 (income g s Requested (from question #6)	750,000 cluding matching fu Amount 750000	Percentage 75.0 %
Total State Fun otal Project Cos Type of Funding Total State Fund Matching Funds Federal State (excluding	ds Requested et for Fiscal Year 2020-2021 (income g s Requested (from question #6)	750,000 cluding matching fu Amount 750000 00 00	Percentage
Total State Fun otal Project Cos Type of Funding Total State Fund Matching Funds Federal State (excluding Local Other	ds Requested et for Fiscal Year 2020-2021 (income g s Requested (from question #6)	750,000 cluding matching fu Amount 750000 00 250,000	Percentage
Total State Fun otal Project Cos Type of Funding Total State Fund Matching Funds Federal State (excluding Local Other Total Project Co	ds Requested et for Fiscal Year 2020-2021 (incomps g s Requested (from question #6) s the amount of this request)	750,000 cluding matching fu Amount 750000 00 250,000 00 1,000,000	Percentage 75.0 % 0 % 0 % 25 % 0 % 100 %

750,000

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: Oth	er	
Salary and Benefits		
Expense/Equipment/ Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Fixed Capital Construct		
Construction/Renovation/ Land/Planning Engineering	This funding will cover: injection grouting, manhole liners; clay pipe lining; replacement of manhole rings; and degraded ductile iron pipes and fittings.	750,000
Ligineening		
Total State Funds Re	750,000	



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11. Program Performance

a.	What specific purpose or goal will be achieved by the funds requested?			
	The primary objective of the project is to injection grout and line degraded sewer lines and manholes to prevent ex-filtration (leaking) of sewage flows into groundwater and infiltration of groundwater into sewage flows. This will not only reduce nutrient loading in the Silver Springs and Rainbow Springs Basins, but it will also lower the treatment of effluent at the water reclamation facilities and prevent sanitary sewer over flows during storm events.			
b.	What activities and services will be provided to meet the intended purpose of these funds?			
	Ex-filtration (leaking) of sewage into the groundwater contributes to nutrient loading of the spring shed. Infiltration of groundwater during storm events causes sewer to backup into homes and business and surcharging of manholes resulting in contamination of storm water with raw sewage. By lining the pipes and manholes, it prevents both the ex-filtration and infiltration of sewage flows.			
c.	What direct services will be provided to citizens by the appropriation project?			
	Reduce nutrient loading of Silver Springs by eliminating leakage of raw sewage into the spring shed, reduce residents cost for transporting and treating wastewater and minimize the liability from water pollution and public health risks by eliminating sanitary sewer overflows during storm events.			
d.	Who is the target population served by this project? How many individuals are expected to be served?			
	Residents within City of Ocala limits with aging infrastructure. These areas are defined on the City's GIS mapping system with the age and type of pipes, in the City's Wastewater Master Plan and is being currently evaluated with the Condition Assessment Plan.			

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

Injection grouting and lining of sewer pipe and manholes requires no digging, this process works to grout, line and seal multiple angles, and it can protect the sewer system from debris buildup, corrosion, leaks and root intrusion. After the grouting and liner is in place, leak test and camera inspections are performed.

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 penalties, bonding requirements, and state/federal license requirements.



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City	of Ocala			
Req	uestor Contact	t Information	,	
a. F	First Name	Sean	Last Name	Lanier
b. (Organization	City of Ocala		
c. E	E-mail Address	SLanier@ocalafl.org		
d. F	Phone Number	(352)351-6772	Ext.	
Reci	ipient Contact	Information		
a. C	Organization	City of Ocala - Water Resources		
b. N	Municipality and	County Marion		
c. C	Organization Typ	pe		
	For-profit E	ntity		
	Non-Profit 8	501(c) (3)		
	Non-Profit 5	501(c) (4)		
(Local Entity	,		
	University of	or College		
	Other (plea	se specify)		
d. F	irst Name	Rusella	Last Name	Bowes-Johnson
e. E	-mail Address	RJohnson@ocalafl.org		
f. P	Phone Number	(352)3516772		
Lob	byist Contact I	nformation		
a. N	Name	Mr. Stephen Shiver & Ms. Sara		
b. F	Firm Name	The Advocacy Group at Cardenas	Parters	
c. E	E-mail Address	ss@cardenaspartners.com; sjb@	cardenaspart	
d. F	Phone Number	(850)2228900	Ext.	



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Please complete the questions below for Water Projects only.

16.	. Have you applied for alternative state funding?					
	Waste Water Revolving Loan					
	Drinking Water Revolving Loan					
	Small Community Wastewater Treatment Grant					
	Other (please specify) Appropriation Project Request					
	N/A					
17.	7. 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.	3. What is the status of construction?					
	Not started					
19.	What percentage of the construction has been completed?					
	0					
20.	What is the estimated completion date of construction?					
	10/01/2022					

The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.