



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2020-2021

LFIR # 1671

1. **Project Title** Neptune Beach Stormwater Improvements

2. **Senate Sponsor** Aaron Bean

3. **Date of Request** 12/07/2019

4. **Project/Program Description**

Capital improvements to remove and replace deteriorated concrete box culverts at Florida Blvd and Davis St.

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 | 840,000 |
| Total State Funds Requested | 840,000 |

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) | 840000 | 50.0 % |
| Matching Funds | | |
| Federal | 00 | 0 % |
| State (excluding the amount of this request) | 375,000 | 22 % |
| Local | 465,000 | 28 % |
| Other | 00 | 0 % |
| Total Project Costs for Fiscal Year 2020-2021 | 1,680,000 | 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 | | 375,000 | 1595A | No |

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 | Bridge/culvert replacements | 840,000 |
| Total State Funds Requested (must equal total from question #6) | | 840,000 |



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11. Program Performance

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

Improve drainage flows and reduce flood staging upstream as well as protect an existing evacuation route for the Jacksonville Beaches area.

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

Construction of culverts and drainage enhancements.

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

Reduction in flooding and potential property damage.

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

Over 50% of Neptune Beach residents and businesses are at risk in the impacted drainage basin. Entire population of Neptune Beach (7,280) would be served as this basin encompasses the City's primary commercial district.

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

Improved drainage. Measure flow before and after project.

- 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?

Require additional widening if additional flow is not obtained.



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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 Neptune Beach

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.



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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)
- ☒ N/A

17. **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. **What is the status of construction?**

19. **What percentage of the construction has been completed?**

20. **What is the estimated completion date of construction?**

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