

LFIR # 2163

Project Title	Holley-Navarre Water System E	Emergency Well Gene	rators	
Senate Sponsor	Doug Broxson			
Date of Request	01/09/2020			
Project/Program	Description			
generation. This prese events and/or other na exist but because ther Panhandle, without a	System (HNWS) operates 5 water supplyents an operational reliability issue for the atural disasters, water service can be intered in automated backup power general resiliency plan in place, the interruption of d. To solve this emergency resiliency issues.	e population on the Peninsu errupted to the Peninsula no tion. As we saw recently in If potable water service can	la. During periods of the because the wells the aftermath of hull be life threatening	of electrical storms, trops and treatment facilition to another than treatment facilition to and requires alternates and requires alternates
	· ·	artment of Environme	ntal Protection	
State Agency conf				
	onrecurring Request for Fiscal			
Type of Fundin	9	Amount		
Operations		000		
Fixed Capital Ou  Total State Fun	•	400,000		
•	et for Fiscal Year 2020-2021 (in			or this project)
Total State Fund	s Requested (from question #6)	<b>Amount</b> 400000	Percentage 100.0 %	
Matching Funds		400000	100.0 %	
Federal		00	0 %	
State (excluding	the amount of this request)	00	0 %	
Local		00	0 %	
Other		00	0 %	
Total Project Co	osts for Fiscal Year 2020-2021	400,000	100 %	
Jac this project :	previously received state fundi	ing? ○ Yes • N	No	
	most recent instance:			•
f yes, provide the	Amount	Spec	ific	
f yes, provide the	Amount	nrecurring Spec	ific dation # Vetoed	



LFIR # 2163

#### 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	tion/Major Renovation:	
Construction/Renovation/ Land/Planning Engineering	Installation of new generators would include costs associated with engineering and construction.	400,000
Total State Funds Re	quested (must equal total from question #6)	400,000



LFIR # 2163

<ol><li>11. Program Performand</li></ol>	се
--	----

What specific purpose or goal will be achieved by the funds requested?	
	Holley-Navarre Water System will have the capability to continue to provide services during times of emergency.
b.	What activities and services will be provided to meet the intended purpose of these funds?
	The installation of generators will allow for our water system to provide automated power generation at the water production facilities.
c.	What direct services will be provided to citizens by the appropriation project?
	Power can be provided during an emergency event when activated.
d.	Who is the target population served by this project? How many individuals are expected to be served?
	The general population will continue to receive uninterrupted service and additional monitoring during an emergency.
e.	What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?
	Wastewater can continue to be treated and transported during a storm to prevent potential sewage spills.
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?
	Return of unspent funds. No new appropriations until project deliverables and/or performance measures achieved.



LFIR # 2163

но	olley-Navarre Water	System.		
Re	equestor Contact	Information		
a.	First Name	Rob	Last Name Williamson	
b.	Organization	Holley-Navarre Water System		
C.	E-mail Address	robwilliamson@hnws-fl.com		
d.	Phone Number	(850)939-2427	Ext.	
Re	ecipient Contact	Information		
a.	Organization	Holley-Navarre Water System		
b.	Municipality and	County Santa Rosa		
c.	Organization Typ	pe		
	O For-profit E	ntity		
	O Non-Profit 5	501(c) (3)		
	O Non-Profit 5	501(c) (4)		
	<ul><li>Local Entity</li></ul>	,		
	O University of	or College		
	Other (plea)	se specify) Non-Profit: 501 (c) 12		
d.	First Name	Rob	Last Name Williamson	
e.	E-mail Address	obwilliamson@hnws-fl.com		
	Phone Number			
Lc	obbyist Contact I	nformation		
a.	Name	Tim Parson		
b.	Firm Name	Liberty Partners of Tallahassee		
_	E-mail Address	tim@libertypartnersfl.com		



LFIR # 2163

#### 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)	
	<b>✗</b> 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)	
	<b>✗</b> N/A	
18.	What is the status of construction?	
	Not ready.	
19.	t percentage of the construction has been completed?	
	0%	
20.	What is the estimated completion date of construction?	
	12/01/2020	

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