



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2021-2022

LFIR # 1178

1. **Project Title**
2. **Senate Sponsor**
3. **Date of Request**

4. Project/Program Description

The funds would be for the replacement and up-sizing of conveyance pipes and storm inlets along Abbot Avenue, as well as possibly pump stations discharging into Indian Creek. These improvements also involve the construction of new pressurized drainage wells.

5. **State Agency to receive requested funds**
- State Agency contacted?**

6. Amount of the Nonrecurring Request for Fiscal Year 2021-2022

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	400,000
Total State Funds Requested	400,000

7. Total Project Cost for Fiscal Year 2021-2022 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	400,000	40%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	600,000	60%
Other	0	0%
Total Project Costs for Fiscal Year 2021-2022	1,000,000	100%

8. **Has this project previously received state funding?**

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. **Is future funding likely to be requested?**
- a. **If yes, indicate nonrecurring amount per year.**
- b. **Describe the source of funding that can be used in lieu of state funding.**
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10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

If yes, indicate the amount of funds received and what the funds were used for.



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11. Details on how the requested state funds will be expended

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	The funds would be for the replacement and up-sizing of conveyance pipes and storm inlets along Abbot Avenue, as well as possibly pump stations discharging into Indian Creek. These improvements also involve the construction of new pressurized drainage wells.	400,000
Total State Funds Requested (must equal total from question #6)		400,000

12. Program Performance

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

This appropriations request for \$400,000 would add additional capacity to the Town's drainage system and reduce flooding after rain events.

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

The funds will be used to replace and upsize stormwater conveyance lines, install pressurized drainage wells, and construct two drainage pump stations.

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

The upgrading of the storm water drainage system will provide a considerable reduction in flooding for the residents of the Town.

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

The residents of the Town of Surfside, in particular those that suffer from consistent flooding near Abbott Avenue.

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

Additional stormwater capacity by the Town's stormwater system and significant reduction in flooding in the Town of Surfside.

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 the contract?

Work to be performed on Contractor's time/cost if delays or performance issues occur at the fault of the Contractor.



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13. 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.

The Town of Surfside.



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14. Requestor Contact Information

a. First Name Last Name

b. Organization

c. E-mail Address

d. Phone Number Ext.

15. 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

16. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number



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Please complete the questions below for Water Projects only.

17. 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

18. 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

19. What is the status of construction?

Not begun

20. What percentage of the construction has been completed?

0%

21. What is the estimated completion date of construction?

6/1/2022