

The Florida Senate Local Funding Initiative Request Fiscal Year 2021-2022

LFIR # 1735

1.	Project Title	Charlie Johns St										
2.	Senate Sponsor	Loranne Ausley										
3.	Date of Request	02/05/2021										
4.	Project/Program De	scription										
	The intersection of C The City of Blountsto signalized left turns of	wn desires to insta	ll a traffic signal a	20 is heavily used and at this intersection to he	I is currently control Plp with traffic flow a	led by a stop sign. and alleviate unsafe non-						
5.	State Agency to rec	eive requested fu	nds Departm	nent of Transportation								
	State Agency contact	cted? No										
6.	Amount of the Nonre	ecurring Request	for Fiscal Year 2	2021-2022		_						
	Type of Funding			Amo	ount							
	Operations				0	 -						
	Fixed Capital Outlay				350,000	1						
	Total State Funds R	equested			350,000							
7.	Total Project Cost fo	or Fiscal Year 202	I-2022 (includin	g matching funds ava	ilable for this proj	ect)						
	Type of Funding			Amount	Percentage							
	Total State Funds Re	quested (from que	stion #6)	350,000	100%							
	Matching Funds											
	Federal			0	0%							
	State (excluding the	amount of this requ	est)	0	0%	-						
	Local			0	0%	-						
	Other	Other			0%							
	Total Project Costs	for Fiscal Year 20	21-2022	350,000	100%							
8.	Has this project pre	•		Yes		1						
	Fiscal Year (yyyy-yy)	Amo		Specific Appropriation #	Vetoed							
	2020-21	Recurring 0	Nonrecurring 350,00		Yes	<u> </u>						
	2020-21	U	330,00		165	J						
9.	Is future funding like	ely to be requeste	d?	No								
a. If yes, indicate nonrecurring amount per year. b. Describe the source of funding that can be used in lieu of state funding.												
10) Has the entity requ	esting this projec	t received any f	ederal assistance rela	ated to the COVID-	-19 nandemic?						
		Lino projec				. panaomo						
	No											
	If yes, indicate the	amount of funds r	eceived and wh	at the funds were use	ed 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	Planning, design, and construction of the proposed traffic signal.	350,000						
Total State Funds Requested (must equal total from question #6) 350,000								

12. Program Performance

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

Installation of a new traffic signal at the intersection of Charlie Johns Street and State Road 20.

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

Planning, design, and construction will be accomplished through the requested funds.

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

Citizens will be provided a safer intersection.

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

This traffic signal will serve the City of Blountstown which has approximately 2,478 citizens.

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

The traffic signal is expected to increase traffic safety and optimize flow at the proposed intersection.

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?

The city will work with the contracting agency to determine applicable measures, should funding be made available.

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.

This facility will be owned and operated by the City of Blountstown.



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14.	Requestor Contact	Informat	ion							
	a. First Name	Traci		Last Name	Hall					
	b. Organization	City of Blountstown								
	c. E-mail Address	thall@blountstown.org								
	d. Phone Number	(850)674-5488 Ext .								
15. Recipient Contact Information										
	a. Organization City of Blountstown									
	b. Municipality and	d County	Calhoun							
	c. Organization Type									
	□For Profit Entity									
	□Non Profit 501(c]Non Profit 501(c)(3)								
	□Non Profit 501(c)(4)									
	☑Local Entity									
	□University or College									
	□Other (please specify)									
	d. First Name	Traci		Last Name	Hall					
	e. E-mail Address	thall@blo	untstown.org							
	f. Phone Number									
16. Lobbyist Contact Information										
	a. Name	Patrick E. Bell								
	b. Firm Name	Capitol Solutions LLC								
	c. E-mail Address	pebell@earthlink.net								
	d. Phone Number	(850)544-0784								