

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

LFIR # 1951

| 1. Project Title  | Village of Indian                            | ntown Untown Drain                         | age and Roadway Re   | nair Design                             |   |  |  |
|---|--|--|--|---|---|--|--|
| •   |  | nown optown Brain                          | age and Roadway Re   | pan Design                              |   |  |  |
| 2. Senate Sponsor   | Gayle Harrell                                |  |  |   |   |  |  |
| 3. Date of Request  | 02/23/2021                                   |  |  |   |   |  |  |
| 4. Project/Program D  | escription                                   |  |  |   |   |  |  |
| residential sections years old) is addres                       | of the village that e<br>sing infrastructure | experiences chronic<br>needs without any v | y improvement project<br>flooding and deteriora<br>vell-established tax bay<br>y that were not prioritiz | ted roadways. The<br>se and reserve. Fu | town (less than three rther, the infrastructure |  |  |
| 5. State Agency to re   | ceive requested f                            | unds Departme                              | ent of Transportation  |   |   |  |  |
| State Agency conta  | acted? No                                    | •  |  |   |   |  |  |
| 6. Amount of the Non  |  | t for Fiscal Voor 20                       | 124 2022   |   |   |  |  |
|   | recurring Reques                             | tioi Fiscai Teal 20                        |  |   | I   |  |  |
| Type of Funding Operations                                      |  |  | Amor   | Amount                                  |   |  |  |
| Fixed Capital Outlay  | /  |  |  | 350,000                                 |   |  |  |
| <b>Total State Funds</b>  |  |  | 350,000  |   |   |  |  |
| 7. Total Project Cost f   | or Fiscal Year 20                            | 21-2022 (including                         | matching funds avai  | lable for this proje                    | ect)  |  |  |
| •   |  | 21 2022 (morading                          | Amount   | Percentage                              |   |  |  |
| Type of Funding  Total State Funds Requested (from question #6) |  |  | 350,000  | 50%                                     |   |  |  |
| Matching Funds  | equested (nom qu                             | Cotton no)                                 | 000,000  | 0070                                    |   |  |  |
| Federal   |  |  | 0  | 0%                                      |   |  |  |
| State (excluding the  | State (excluding the amount of this request) |  |  | 0%                                      |   |  |  |
| Local   | Local  |  |  | 50%                                     |   |  |  |
| Other   |  |  | 0  | 0%                                      |   |  |  |
| <b>Total Project Costs</b>                                      | s for Fiscal Year 2                          | 2021-2022                                  | 700,000  | 100%                                    |   |  |  |
| 8. Has this project pr  | eviously received                            | state funding?                             | No   |   |   |  |  |
| Fiscal Year   | Amount                                       |  | Specific   | Vetoed                                  |   |  |  |
| (уууу-уу)   | Recurring                                    | Nonrecurring                               | Appropriation #  |   |   |  |  |
|   |  |  |  |   |   |  |  |
| 9. Is future funding li   | kelv to be request                           | ted?                                       | Yes  |   |   |  |  |
| a. If yes, indicate n   | •  |  | 2,000,000  |   |   |  |  |
|   | _  |  |  |   | I   |  |  |
|   |  | iat can be used in i                       | lieu of state funding.   |   | ]   |  |  |
| No source identifie   | u.   |  |  |   | I   |  |  |
| 10. Has the entity req  | uesting this proje                           | ect received any fe                        | deral assistance rela  | ted to the COVID-                       | 19 pandemic?                                    |  |  |
| No  |  |  |  |   |   |  |  |
| If yes, indicate the  | amount of funds                              | received and wha                           | t the funds were used  | d 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/<br>Other                             |   | 0       |  |  |  |
| Consultants/Contracted<br>Services/Study                                |   | 0       |  |  |  |
| Operational Costs: Other  |   |         |  |  |  |
| Salary and Benefits   |   | 0       |  |  |  |
| Expense/Equipment/Travel/Supplies/<br>Other                             |   | 0       |  |  |  |
| Consultants/Contracted<br>Services/Study                                |   | 0       |  |  |  |
| Fixed Capital Construction/Major Renovation:                            |   |         |  |  |  |
| Construction/Renovation/Land/<br>Planning Engineering                   | Engineering design and surveying of pending drainage, and roadway reconstruction project. | 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?

The design of the pending drainage and roadway rehabilitation project is intended to provide a shovel ready construction project designed to reduce standing water resulting from rainfall events as no stormwater outfall currently exists for much of the area. Additionally, the design will incorporate roadway reconstruction/rehabilitation to address failing roadways throughout the community.

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

These funds are requested to provide for surveying and engineering design of needed drainage and roadway improvements throughout the northeast residential area of the village to provide shovel ready design needed to reduce chronic roadway and residential flooding, as well as to repair and rebuild failing roadways throughout the community.

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

The design of the pending drainage and roadway rehabilitation project directly impacting the village residents in the community by reducing standing waters resulting from rainfall events as no stormwater outfall currently exists for much of the area. Additionally, safer roads will directly impact residents by reducing the potential for accidents and by enhancing emergency vehicle access.

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

The target population is a predominately minority residential population with an average income level mainly below median average income for the State. The area encompasses an estimated 3,500 residents.

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



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Design of a drainage and roadway improvement project that will create a stormwater management system for portions of the village and restore failed drainage for the remainder. The community currently floods in many areas during afternoon rains, with standing water remaining for days in several locations. Design funds will assist in creating a shovel ready project that will ultimately result in stormwater management and conveyance and restored roadways. Benefits can be measured by a lack of standing water, confirmation of drainage, and roadway design improvements. Additionally, failing roadways can increase the likelihood of traffic accidents due to loss of vehicular control and rehabilitating these roads will directly result in enhanced safety. A measure of traffic flow and accidents would be a potential measure of traffic safety resulting from completion of the final construction of this 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 the contract?

As this request is for design and surveying for a proposed drainage and roadway rehabilitation project, penalties should consist of reimbursement for the disbursed design funding.

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 public, municipal infrastructure associated with this project design are owned and maintained by the Village of Indiantown, Florida.



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| 14.                              | 14. Requestor Contact Information |                                 |           |            |  |  |  |
|----------------------------------|-----------------------------------|---------------------------------|-----------|------------|--|--|--|
|                                  | a. First Name                     | William                         | Last Name | Archebelle |  |  |  |
|                                  | b. Organization                   | Village of Indiantown           |           |            |  |  |  |
|                                  | c. E-mail Address                 | publicworks@indiantownfl.gov    |           |            |  |  |  |
|                                  | d. Phone Number                   | (772)342-5767 <b>Ext.</b>       |           |            |  |  |  |
| 15.                              | Recipient Contact                 | Information                     |           |            |  |  |  |
|                                  | a. Organization                   | Village of Indiantown, Florida  |           |            |  |  |  |
|                                  | b. Municipality and County Martin |                                 |           |            |  |  |  |
|                                  | c. Organization Ty                | ре                              |           |            |  |  |  |
|                                  | □For Profit Entity                |                                 |           |            |  |  |  |
|                                  | □Non Profit 501(c)(3)             |                                 |           |            |  |  |  |
|                                  | □Non Profit 501(c)(4)             |                                 |           |            |  |  |  |
|                                  | ☑Local Entity                     |                                 |           |            |  |  |  |
|                                  | □University or College            |                                 |           |            |  |  |  |
|                                  | □Other (please specify)           |                                 |           |            |  |  |  |
|                                  | d. First Name                     | Howard                          | Last Name | Brown      |  |  |  |
|                                  | e. E-mail Address                 | hbrown@indiantownfl.gov         |           |            |  |  |  |
|                                  | f. Phone Number                   | (772)285-8732                   |           |            |  |  |  |
| 16. Lobbyist Contact Information |                                   |                                 |           |            |  |  |  |
|                                  | a. Name                           | Chris Carmody                   |           |            |  |  |  |
|                                  | b. Firm Name                      | Gray-Robinson, PA               |           |            |  |  |  |
|                                  | c. E-mail Address                 | Chris.carmody@gray-robinson.com |           |            |  |  |  |
|                                  | d. Phone Number                   | (352)514-2196                   |           |            |  |  |  |