

LFIR # 1533

1. Project Title	Ormond Beach Reclaimed Water Storage Tank						
2. Senate Sponsor	Travis Hutson						
3. Date of Request	10/25/2021						
4. Project/Program De	escription						
customers in its west	tern service area. I lable volume to ma	During peak use se aximize reclaim wat	ason, daily fluctuation	ns in rainfall and irrig ers. This project wou	n concentration of these gation use requires the uld provide an additional ge frequently.		
5. State Agency to receive requested funds Department of Environmental Protection							
State Agency conta	cted? No						
		. - :					
6. Amount of the Nonr	ecurring Request	tor Fiscal Year 20)22-2023 		-		
Type of Funding			Amo	ount			
Operations				0	_		
Fixed Capital Outlay				200,000	1		
Total State Funds F	Requested		200,000				
7. Total Project Cost fo	or Fiscal Year 202	2-2023 (including	matching funds ava	ilable for this proj	ect)		
Type of Funding			Amount	Percentage]		
Total State Funds Re	Total State Funds Requested (from question #6)			34%			
Matching Funds	Matching Funds Federal State (excluding the amount of this request) Local				<u> </u>		
				0%	_		
State (excluding the				33%			
				33%	†		
Other			0	0%	_		
Total Project Costs	for Fiscal Year 2	022-2023	600,000	100%			
8. Has this project pre	eviously received	state funding?	No				
Fiscal Year	Am	ount	Specific	Vetoed			
(уууу-уу)	Recurring	Nonrecurring	Appropriation #				
9. Is future funding lik	ely to be request	ed?	No				
a. If yes, indicate no	onrecurring amou	ınt per vear.]		
•	_		lia af atata f din a		1		
b. Describe the sou	rce of funding the	at can be used in	lieu of state funding	•	٦		
10. Has the entity requ	uesting this proie	ct received any fe	deral assistance rela	ated to the COVID-	19 pandemic?		
		in the second se			Parragilla		
Yes							

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



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\$4,900,000 from the Federal government for COVID-19 pandemic. If measurements are not met, funds should be returned.

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, engineering and construction of reclaimed water storage tank	200,000		
Total State Funds Requested (must equal total from question #6) 200,0				

12. Program Performance

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

Construct new reclaimed water storage tank.

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

Increased reclaimed water capacity.

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

Reclaimed water

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

3,800 city residents

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

It will provide additional storage of reclaimed water ensuring reliable delivery of reclaimed water and assisting the City in reducing its effluent discharge to the Halifax River.

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?

If measurements are not met, funds should be returned.

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.



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14.	14. Requestor Contact Information					
	a. First Name	Joyce		Last Name	Shanahan	
	b. Organization	City of Ormond Beach				
	c. E-mail Address	shanahan@ormondbeach.org				
	d. Phone Number	(386)676-3200 Ext.				
15.	15. Recipient Contact Information					
	a. Organization	City of Ormond Beach				
	b. Municipality and	d County Volusia				
	c. Organization Type					
	□For Profit Entity					
	□Non Profit 501(c	c)(3)				
	□Non Profit 501(c	5)(4)				
	☑Local Entity					
	□University or Co	ollege				
	□Other (please sp	specify)				
	d. First Name	Brian		Last Name	Rademacher	
	e. E-mail Address	brian.rademacher@ormondbeach.org				
	f. Phone Number	(386)676-3266				
16.	6. Lobbyist Contact Information					
	a. Name	Douglas S. Bell				
	b. Firm Name	Metz Husband & Daughton PA				
	c. E-mail Address	doug.bell@mhdfirm.com				
	d. Phone Number	(850)205-9000				



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Please complete the questions below for Water Projects only.

7. Have you applied for alternative state funding?				
☐ Waste Water Revolving Loan				
☐ Drinking Water Revolving Loan				
☐ Small Community Wastewater Treatment 0	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?				
Planning phase of construction / construction is not ready				
20. What percentage of the construction has be	en completed?			
zero				
21. What is the estimated completion date of co	enstruction?			
01/01/2023				