



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2025-2026

LFIR # 1096

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

**4. Project/Program Description**

The Town of Ocean Ridge has developed a multi-year capitol improvement plan for the potable water systems. The goal is to replace end-of-life water mains throughout the system, improving the quality of water provided to residents, providing an increase in system-wide water pressure and ensuring the system has the necessary sustained volume and flow to provide required fire protection throughout the community. The project is to replace approximately 1,200 linear feet of 6 inch cast iron water main with a new 10 inch HDPE water main that will meet the current fire code requirements and drinking water standards.

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

**6. Amount of the Nonrecurring Request for Fiscal Year 2025-2026**

Type of Funding	Amount
Operating	0
Fixed Capital Outlay	600,000
<b>Total State Funds Requested</b>	<b>600,000</b>

**7. Total Project Cost for Fiscal Year 2025-2026 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	600,000	32%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	1,250,000	68%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2025-2026</b>	<b>1,850,000</b>	<b>100%</b>

8. **Has this project previously received state funding?**
- If yes, provide the most recent instance:**

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

9. **Is future-year 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.**

The Town is reviewing options which include: State Revolving Loans, Community Facilities funding, local bonding capacity and continued local budgetary allocations.



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## Complete questions 10 and 11 for Fixed Capital Outlay Projects

### 10. Status of Construction

a. What is the current phase of the project?

- Planning   
  Design   
  Construction   
  N/A

b. Is the project "shovel ready" (i.e permitted)?

Yes

c. What is the estimated start date of construction?

07/01/2025

d. What is the estimated completion date of construction?

06/30/2026

e. What funding stream will be used for ongoing operations and maintenance of the project?

The Town will use locally generated property tax revenue to fund additional phases of the project and the ongoing maintenance.

### 11. List 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 Ocean Ridge maintains ownership of the water infrastructure within the Town's limits, connected systems are owned by the City of Boynton Beach. Boynton Beach provides potable water and fire/EMS services to Ocean Ridge.

### 12. Details on how the requested state funds will be expended

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Funds will be utilized to replace and upsize current water mains through the use of boring technology, pipe bursting, and open trench construction.	600,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>600,000</b>

### 13. Program Performance

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



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The funds will be used in addition to local funding to support the replacement of approximately 1,200 linear feet of aging 6-inch cast iron water main with modern 10-inch HDPE main. This will enhance the reliability of Ocean Ridge's potable water system, improve water pressure and flow, meet fire code requirements, and protect water quality for residents, businesses, and visitors.

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

The funds will be used to augment local funds paying for the construction of new potable water mains. As part of the Town's CIP, \$2.9 million was spent in FY 2023-2024 on water main replacement, and in FY 2024-2025, \$1.25 million was allocated for this phase.

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

The project will ensure consistent delivery of clean, safe drinking water and adequate water pressure for fire protection. It will reduce the risk of water contamination and enhance the resilience of the system to support daily needs and emergency response.

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

The target population includes over 1,800 Ocean Ridge residents, in addition to year-round visitors of Oceanfront Park.

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

Increased water flow. It will be measured by testing flow from existing hydrants and comparing to test result received prior to construction.

**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?**

The Town proposes to receive the funds as a cost reimbursement agreement, failure to complete construction of the lines will result in an inability to seek reimbursement.

14. Is this project related to mitigation, response, or recovery from a natural disaster?  No

**a. If Yes, what phase best describes the project?**

- Mitigation (reducing or eliminating potential loss of life or property)
- Response (addressing the immediate and short-term effects of a natural disaster)
- Recovery (assisting communities return to normal operations, including rebuilding damaged infrastructure)

**b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):**

15. Has the entity applied for or received federal assistance for this project?

- Yes, Applied
- Yes, Received
- No
- No, but intends to apply

**a. If yes, provide the FEMA project worksheet ID#:**



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**b. Provide the total project cost listed on the FEMA project worksheet:**

**16. Has the entity applied for or received state assistance for this project (other than this request)?**

- Yes, Applied
- Yes, Received
- No
- No, but intends to apply

**a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):**

### Please complete questions 17 through 21 for Water Projects only.

**17. Have you been awarded or applied for alternative state funding for this project?**

- Water Quality Improvement Grant Program
- Resilient Florida Grant Program
- Wastewater Revolving Loan
- Drinking Water Revolving Loan
- Small Community Wastewater Treatment Grant
- Other (please specify, ex. Alternative Water Supply Grants)
- 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?**

**20. What percentage of the construction has been completed?**



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7.81%

21. What is the estimated completion date of construction?

**22. Requester Contact Information**

a. First Name  Last Name   
 b. Organization   
 c. E-mail Address   
 d. Phone Number  Ext.

**23. 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  Ext.

**24. Lobbyist Contact Information**

a. Name   
 b. Firm Name   
 c. E-mail Address   
 d. Phone Number

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