

**LFIR # 1324** 

1. Project Title	DeBary Phase 1 Hurrica Infrastructure improvem		nd Comprehensive Sto	ormwater	
2. Senate Sponsor	Tom Wright				
3. Date of Request	2/6/2025				
4. Project/Program Do	escription				
intrusion, collapsing management infrast	ricanes Debbie, Helene and 4 major roads at stormwat ructure across DeBary add e to extreme weather even ms.	er infrastruc Iressing criti	ctures, and other dama	iges. This project w ntrol, outstanding ba	vill improve stormwater asin water quality, and
5. State Agency to re	ceive requested funds	Departm	ent of Environmental I	Protection	
State Agency conta	•	•			
6. Amount of the Non	recurring Request for Fis	cal Year 20	)25-2026 		
Type of Funding			Amor	unt	
Operating				0	
Fixed Capital Outlay				1,500,000	
Total State Funds I	Requested			1,500,000	
•	or Fiscal Year 2025-2026	(including	matching funds avai		ect)
Type of Funding		- >	Amount	Percentage	
	equested (from question #	6)	1,500,000	75%	
Matching Funds Federal			0	0%	
	amount of this request)		0	0%	
Local	amount of this requesty		500,000	25%	
Other			0	0%	
	s for Fiscal Year 2025-202	26	2,000,000	100%	
8. Has this project pro	eviously received state fumost recent instance:	•	No		
Fiscal Year	Amount		Specific	Vetoed	
(уууу-уу)	Recurring Non	recurring	Appropriation #		
9. Is future-year fundi	ing likely to be requested	?	Yes		
a. If yes, indicate n	onrecurring amount per	year.	1,500,000		
b. Describe the sou	urce of funding that can b	e used in I	ieu of state funding.		
	to seek grant funding for a			project	
vve would continue	to seek grant funding for a	assistante it	or una critical recovery	project.	



### **The Florida Senate Local Funding Initiative Request Fiscal Year 2025-2026**

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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	N/A
b. Is the project "shovel ready" (i.e permitted)?	Yes
c. What is the estimated start date of construction?	7/1/2025
d. What is the estimated completion date of construction?	6/30/2025
e. What funding stream will be used for ongoing operation	ns and maintenance of the project?
Maintenance will be budgeted in city's annual budget.	
11. List the owners of the facility to receive, directly or indirectly or indirectly or indirectly and the experiments of the facility and the experiments of the facility and the experiments.	
City of DeBary will be the owner.	

#### 12. 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		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/ Other		0
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering	Repair and construction of damaged stormwater systems due to Hurricanes Debby, Helene and Milton • Reduced flood risk for residential, commercial, and public properties. • Improved water quality in local waterways, benefiting ecosystems and public health. • Enhanced community resilience to climate change and extreme weather events. • Reducing property losses	1,500,000
Total State Funds Requested (m	ust equal total from question #6)	1,500,000

#### 13. Program Performance

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



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Repair	and construction of	damaged	stormwater systems	due to Hurricanes	Debby.	Helene and Milton
			010		,	

- Reduced flood risk for residential, commercial, and public properties.
- Improved water quality in local waterways, benefiting ecosystems and public health.
- Enhanced community resilience to climate change and extreme weather events.
- Reducing property losses

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

Repair and construction of damaged stormwater systems due to Hurricanes Debby, Helene and Milton

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

Reduce impacts to residents and businesses by preventing rising waters from entering their homes and businesses and creating a public health crisis. Protect roads ensuring emergency services can reach all residents. In addition, mitigating water damage to residential and business structures reduces the financial burden and insurance providers due to claims.

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

Residents impacted by Hurricanes Debbie, Helene, and Milton. Hundreds of homes throughout DeBary.

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

Storm water would be properly conducted, eliminated flooding and reducing nitrates and phosphates into two outstanding spring basins. Eliminating or reducing road and sidewalk collapse due to collapsing stormwater infrastructure. Ensuring roads are open during emergencies for first responder and public works teams to reach residents and businesses. Ensuring sidewalks are not destroyed, allowing for vulnerable road user safety. Millions of dollars would be saved on road and sidewalk repairs.

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 contracting agency, City of DeBary will establish a critical path with date specific targets for development. Once bids are received and awarded for the project, the contract will have specific contract completion dates, if not met contractor will be subject to nonpayment of damages and possible damage payments.

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14. Is this project related to mitigation, response, or recovery from a natural disaster? Yes
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 infastructure
b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):
Hurricane Milton
15. Has the entity applied for or received federal assistance for this project?
☐ Yes, Applied
☐ Yes, Received
☑ No

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

□ No, but intends to apply



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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 t	his request)?
☐ Yes, Applied	
☐ Yes, Received	
☑ No	
☐ No, but intends to apply	
a. If yes, specify the program and state agency (ex. Local Government Emergency I Commerce):	Bridge Loan, Department o
Please complete questions 17 through 21 for Water Projects of	only.
17. Have you been awarded or applied for alternative state funding for this project?	
☐ Water Quality Improvement Grant Program	
☐ Resilient Florida Grant Program	
☐ Resilient Florida Grant Program ☐ Wastewater Revolving Loan	
☐ Wastewater Revolving Loan	
☐ Wastewater Revolving Loan ☐ Drinking Water Revolving Loan	
<ul> <li>□ Wastewater Revolving Loan</li> <li>□ Drinking Water Revolving Loan</li> <li>□ Small Community Wastewater Treatment Grant</li> </ul>	
<ul> <li>□ Wastewater Revolving Loan</li> <li>□ Drinking Water Revolving Loan</li> <li>□ Small Community Wastewater Treatment Grant</li> <li>□ Other (please specify, ex. Alternative Water Supply Grants)</li> <li>☑ N/A</li> </ul>	
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. What is the estima	ated completion date of co	onstruction?	9 06/20/2026	
. Requester Contact	t Information			
a. First Name	Shari	Last Name	Simmans	
b. Organization	City of DeBary		Cirimano	
•	ssimmans@debary.org			
d. Phone Number	(386)601-0200	Ext.		
Recipient Contact	Information			
a. Organization	City of DeBary			
b. Municipality and				
	-			
c. Organization Ty	pe			
□For Profit Entity				
□Non Profit 501(d	:)(3)			
□Non Profit 501(d	c)(4)			
☑Local Entity				
□University or Co	llege			
□Other (please sp	pecify)			
d. First Name	Carmen	Last Name	Rosamonda	
e. E-mail Address	crosamonda@debary.org			
f. Phone Number	(386)668-2040	Ext.		
Lobbyist Contact I	nformation			
a. Name	Dane Eagle			
b. Firm Name	Ballard Partners			
c. E-mail Address	dane@BALLARDPARTNI	ERS.COM		
d Phone Number				

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