

1. Project Title

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

South Miami Septic to Sewer Conversion

LFIR # 1798

2.	Senate Sponsor	Alexis Calatayud				
3.	Date of Request	2/19/2025				
4.	Project/Program De	escription				
	significant risks to purphase 1."Sub-Area he Funds are being requisewer system. With the community. Funding	ublic health, water question has been identified uested for Phase 2 of this project, we can for this initiative will	uality, and the envilon as a priority. Pha of the project, which improve sanitation I not only address	ase 1 includes 46 hon ch would convert an a n, reduce pollution, ar	in the construction places and a building load additional 159 homes ad enhance overall q s but also create lon	phase of "Sub-Area K ocated in a City park. s to a modern, efficient
5.	State Agency to rec	eive requested fur	nds Departm	ent of Environmental	Protection	
	State Agency conta	•				
	•					
6.	Amount of the Nonr	ecurring Request	for Fiscal Year 20)25-2026		
	Type of Funding			Amo	ount	
	Operating				0	
	Fixed Capital Outlay					
	Total State Funds Requested			900,000		
7	otal Project Cost for Fiscal Year 2025-2026 (including matching funds available for this project)					
1.	•	or Fiscal Year 2025	5-2026 (including			ect)
1.	Type of Funding		, ,	Amount	Percentage	ect)
1.	Type of Funding Total State Funds Re		, ,			ect)
7.	Type of Funding Total State Funds Re Matching Funds		, ,	Amount 900,000	Percentage 30%	ect)
1.	Type of Funding Total State Funds Re Matching Funds Federal	equested (from ques	stion #6)	Amount	Percentage	ect)
<i>'</i> .	Type of Funding Total State Funds Re Matching Funds	equested (from ques	stion #6)	Amount 900,000 1,750,000	Percentage 30% 60%	ect)
<i>1</i> .	Type of Funding Total State Funds Re Matching Funds Federal State (excluding the	equested (from ques	stion #6)	Amount 900,000 1,750,000 0	Percentage 30% 60% 0%	ect)
1.	Type of Funding Total State Funds Re Matching Funds Federal State (excluding the Local	equested (from ques	est)	Amount 900,000 1,750,000 0	Percentage 30% 60% 0%	ect)
	Type of Funding Total State Funds Re Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project pre If yes, provide the re	amount of this requested (from quested (from quested) amount of this requested for Fiscal Year 20 eviously received seriously r	est) 25-2026 state funding? ce:	Amount 900,000 1,750,000 0 286,925 2,936,925 Yes	Percentage 30% 60% 0% 0% 10%	ect)
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8.	Type of Funding Total State Funds Re Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project pre If yes, provide the r Fiscal Year (yyyy-yy) 2023-24	amount of this requested (from quested (from	est) 25-2026 State funding? ce: Nonrecurring 1,800,000	Amount 900,000 1,750,000 0 286,925 2,936,925 Yes Specific Appropriation #	Percentage 30% 60% 0% 0% 10% Vetoed	ect)
8.	Type of Funding Total State Funds Re Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project pre If yes, provide the r Fiscal Year (yyyy-yy) 2023-24 Is future-year funding	amount of this requested (from quested amount of this requested for Fiscal Year 20) and received services are continuously received services are continuousl	est) 25-2026 State funding? ce: Nonrecurring 1,800,000 uested?	Amount 900,000 1,750,000 0 286,925 2,936,925 Yes Specific Appropriation #	Percentage 30% 60% 0% 0% 10% Vetoed	ect)
8.	Type of Funding Total State Funds Re Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project pre If yes, provide the r Fiscal Year (yyyy-yy) 2023-24	amount of this requested (from quested amount of this requested for Fiscal Year 20) and received services are continuously received services are continuousl	est) 25-2026 State funding? ce: Nonrecurring 1,800,000 uested?	Amount 900,000 1,750,000 0 286,925 2,936,925 Yes Specific Appropriation #	Percentage 30% 60% 0% 0% 10% Vetoed	ect)
8.	Type of Funding Total State Funds Re Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project pre If yes, provide the r Fiscal Year (yyyy-yy) 2023-24 Is future-year funding a. If yes, indicate no	amount of this requested (from quested amount of this requested for Fiscal Year 20) eviously received smost recent instance Amo Recurring Ong likely to be requested amount of this requested for Fiscal Year 20)	est) 25-2026 State funding? ce: Nonrecurring 1,800,000 uested? nt per year.	Amount 900,000 1,750,000 0 286,925 2,936,925 Yes Specific Appropriation #	Percentage 30% 60% 0% 0% 10% 100%	ect)



10. Status of Construction

13. Program Performance

Planning

a. What is the current phase of the project?

Design

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

c. What is the estimated start date of construction?

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O N/A

Yes

07/01/2025

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Complete questions 10 and 11 for Fixed Capital Outlay Projects

Construction

d. What is the estimated complete	tion date of construction?	12/31/2026				
e. What funding stream will be u	What funding stream will be used for ongoing operations and maintenance of the project?					
Start date is contingent on the de Florida Department of Environmer February. The City's general fund	ntal Protection for \$2,636,924.	A decision is anticipa	ted in mid-			
List the owners of the facility to relationship between the owner			outlay funding. Incl	ude the		
The City of South Miami	,	- y -				
2. Details on how the requested st		Description		Amount		
Administrative Costs:		Description		Amount		
Executive Director/Project Head Salary and Benefits				(
Other Salary and Benefits				(
Expense/Equipment/Travel/Supplies/ Other				(
Consultants/Contracted Services/Study				(
Operational Costs						
Salary and Benefits				(
Expense/Equipment/Travel/Supplies/ Other				(
Consultants/Contracted Services/Study				(
Fixed Capital Construction/Majo	r Renovation:					
Construction/Renovation/Land/ Planning Engineering	The funds will be used to corpriority sea-level Rise area. E by septic tank systems that a groundwater/drinking water.	Existing properties are	currently served	900,000		
Total State Funds Requested (m.		n #6)		900.000		

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



14.

15.

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F	With this project, we can improve sanitation, reduce pollution, and enhance overall quality of life for our community. Funding for this initiative will not only address these pressing issues but also create long-term cost savings by reducing naintenance and repair costs associated with aging septic infrastructure.
	. What activities and services will be provided to meet the intended purpose of these funds?
	Permitting in construction services in the sub-area K for the sanitary sewer project.
С	. What direct services will be provided to citizens by the appropriation project?
a	Citizens will receive a sanitary gravity sewer line to connect to in front of their home. This will give them the ability to abandon septic tanks and receive municipal sewer services.
d	. Who is the target population served by this project? How many individuals are expected to be served?
	Individuals living in 159 homes in Phase 2 of Sub-Area K.
	. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?
t r	The expected benefit of converting septic systems to a sewer system in a residential area is primarily to improve public nealth and environmental sustainability. By connecting homes to a centralized sewer system, the project aims to reduce he risk of septic system failures, which can lead to contamination of groundwater, surface water, and soil. This can also nitigate unpleasant odors and improve overall sanitation. Furthermore, the conversion will likely reduce maintenance costs for residents and improve the community's infrastructure, leading to better long-term outcomes for both health and property values.
f.	What are the suggested penalties that the contracting agency may consider in addition to its standard penalties
fo	or failing to meet deliverables or performance measures provided for in the contract?
	City contracts include performance, standards, and conditions for curing perfomance issue. Additionally, liquidated damages are also within the City's purview.
. 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 infastructure)
b.	Name of the natural disaster (or Executive Order # for events not under a federal declaration):
. Н	as the entity applied for or received federal assistance for this project?
	l Yes, Applied
	I Yes, Received
	l No
	No, but intends to apply
a.	If yes, provide the FEMA project worksheet ID#:



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	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
	. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department o commerce):
	1.8 million from FDEP.
	ase complete questions 17 through 21 for Water Projects only. 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) ng decision on Water Quality Improvement Grant Program
	□ 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)
	- wa
	☑ N/A



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	0%					
21. What is the estimated completion date of construction? 12/31/26						
22.	Requester Contact	Informat	ion			
	a. First Name	Genaro		Last Name	Iglesias	
	b. Organization	City of So	outh Miami			
	c. E-mail Address	CityMana	ger@southmiam	nifl.gov		
	d. Phone Number	(305)668	-2510	Ext.		
22	Desirient Centest	Informati				
	Recipient Contact a. Organization		outh Miami			
			Miami-Dade			
	b. Municipality and	•	Miami-Dade			
	c. Organization Ty _l	ре				
	□For Profit Entity					
	□Non Profit 501(c)(3)					
	□Non Profit 501(c	:)(4)				
	☑Local Entity					
	□University or Co	llege				
	□Other (please specify)					
	d. First Name	Genaro		Last Name	Munoz	
	e. E-mail Address	A.Munoz	@southmiamifl.g	OV		
	f. Phone Number	(305)403	-2063	Ext.		
24.	Lobbyist Contact I	nformatio	n			
	a. Name	Jared Ro	senstein			
	b. Firm Name	Capital City Consulting LLC				
	c. E-mail Address jared@cccfla.com					
	d. Phone Number (786)247-8716					

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