

LFIR # 1880

1. Project Title	Boynton Beach Wat Project	er and Wastev	vater Improvements-S	ea Meadow	
2. Senate Sponsor	Lori Berman				
3. Date of Request	2/24/2025				
4. Project/Program De	escription				
The water and waste	Beach is seeking fund ewater services will be ase the time for any dis s elderly community.	brought from t	he back of the mobile	homes to the front f	or easier and safer
5. State Agency to red	ceive requested funds	Departr	ment of Environmental	Protection	
State Agency conta	cted? No				
6. Amount of the Nonr	ecurring Request for	Fiscal Voar 2	025-2026		
	couring request for	- I I Scal T cal 2			1
Type of Funding Operating			Amo	ount O	
Fixed Capital Outlay	,			3,750,000	+
Total State Funds F			3,750,000		
7. Total Project Cost f	or Fiscal Year 2025-20	026 (including	g matching funds ava	ailable for this proj	ect)
Type of Funding			Amount	Percentage	
Total State Funds R	equested (from questic	on #6)	3,750,000	50%	
Matching Funds					1
Federal			0	0%	1
	amount of this request)	0	0%	1
Local			3,750,000	50%	
Other			0	0%	-
Total Project Costs	for Fiscal Year 2025-	2026	7,500,000	100%	
8. Has this project pre If yes, provide the i	eviously received stat most recent instance:	_	No		
Fiscal Year	Amoun	t	Specific	Vetoed	
(уууу-уу)	Recurring N	Nonrecurring	Appropriation #		
9. Is future-year fundi	ng likely to be reques	sted?	No		
a. If yes, indicate n	onrecurring amount p	oer year.			
h Describe the sou	urce of funding that ca	an ha usad in	lieu of state funding		
ט. טפטטווטפ נוופ 100	arce or runding that G	an be useu III	ned of State fullding	•	٦



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u. Status of Collst	dollon			
a. What is the cu	rrent phase of t	he project?		
Planning	Design	Construction N/A		
b. Is the project	"shovel ready" ((i.e permitted)?	Yes	
c. What is the es	timated start da	te of construction?	12/01/2025	
d. What is the es	timated comple	tion date of construction?	06/30/2026	
e. What funding	stream will be u	sed for ongoing operations	and maintenance	of the project?
Maintenance an	d annual operation	on costs will be part of the ope	rational budget.	
		o receive, directly or indirectrics of the facility and the enti		al outlay funding. Include the
City of Boynton	Beach.			

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/Major Renovation:				
Construction/Renovation/Land/ Planning Engineering	Construction. Replacing Water and Waste Water infrastructure	3,750,000		
Total State Funds Requested (must equal total from question #6) 3,750,000				

13. Program Performance

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

Improve and extend the life of the sanitary sewer collection system and reduce potential sewer spills, road depressions and cave-ins as well as improving public health and safety.

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

The Project will bring the water and wastewater services in this community up to City standards, provide adequate fire flow and improve the water quality level of service. Replacing the aging infrastructure will ensure the water and wastewater have no disruptions in service.

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



14.

15.

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The City will provide direct services by reducing potential sewer spills, which in turn helps improve public health and safety. These efforts ensure that residents, businesses, and visitors can enjoy their lives without disruptions. By minimizing the likelihood of sewer spills and potential school closures, we can enhance the quality of education and

pı st	rotect the public from harm. Additionally, we will improve wastewater management by increasing our sewer pipes' tructural integrity and flow capacity, resulting in a better service level and reducing the likelihood of sewer overflows.
st	ffective stormwater management is also a benefit; reducing potential sewer spills can lessen the adverse impacts on the cormwater system.
d.	Who is the target population served by this project? How many individuals are expected to be served?
Е	Elderly community. The community has 240 homes.
e.	What is the expected benefit or outcome of this project? What is the methodology by which this outcome will
be	e measured?
de w w de	The benefits of this project include continued water distribution to utility customers, enhanced water quality and esthetics, and improved public health and safety. The upgrades will improve fire flow services, enabling the fire epartment to meet established service levels and enhance community safety. By reducing the risk of water main breaks, e decrease the likelihood of chlorinated water runoff into freshwater and saline bodies, which can be harmful to fish and ildlife. Additionally, improved water distribution infrastructure will ensure better fire flow to areas with increasing emands. To evaluate the project's effectiveness, we will measure the following performance indicators: response times, ommunication effectiveness, coordination and collaboration, technology infrastructure performance, resource utilization, and feedback from the City's management team as well as from other cities that utilize our water services.
f.	What are the suggested penalties that the contracting agency may consider in addition to its standard penalties
fo	r failing to meet deliverables or performance measures provided for in the contract?
	Failure to meet the deliverables should result in returning the funds to the State if the funding is not expended within the me stated on the contract.
. Is	this project related to mitigation, response, or recovery from a natural disaster? No
a. If	f 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. N	Name of the natural disaster (or Executive Order # for events not under a federal declaration):
. На	as the entity applied for or received federal assistance for this project?
	Yes, Applied
	Yes, Received
	No
	No, but intends to apply
a. If	f yes, provide the FEMA project worksheet ID#:
b. F	Provide the total project cost listed on the FEMA project worksheet:



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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 Commerce):	of
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?	
Design Phase	
20. What percentage of the construction has been completed?	
0%	
21 What is the estimated completion date of construction? 07/30/2026	



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22.	Requester Contact	t Informati	ion			
	a. First Name	Mirna		Last Name	Crompton	
	b. Organization	City of Bo	ynton Beach			
	c. E-mail Address	crompton	m@bbfl.us			
	d. Phone Number	(561)742	-6087	Ext.		
23.	Recipient Contact	Informatio	on			
	a. Organization	City of Bo	ynton Beach			
	b. Municipality and	d County	Palm Beach			
	c. Organization Ty	ре				
	□For Profit Entity					
	□Non Profit 501(c)(3)				
	□Non Profit 501(c	:)(4)				
	☑Local Entity					
	□University or Co	llege				
	□Other (please sp	specify)				
	d. First Name	Mirna		Last Name	Crompton	
	e. E-mail Address	. E-mail Address cromptonm@bbfl.us				
	f. Phone Number	(561)742	-6087	Ext.		
24.	24. Lobbyist Contact Information					
	a. Name	Mathew Forrest				
	b. Firm Name	Ballard Partners				
	c. E-mail Address	mat@ballardpartners.com				
	d. Phone Number	(561)253-3232				

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