



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2025-2026

LFIR # 1897

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

4. **Project/Program Description**

The project aims to address infrastructure and safety issues in downtown Montverde and along County Road 455, where Montverde Academy is located. The request focuses on pre-construction and construction activity funds. Key issues include sidewalk improvements, increased lighting, reduction in traffic congestion with improved signaling and signage, and installation of crosswalks. This critical infrastructure project is essential to address several pressing issues that impact the safety and well-being of our community, including the students of Montverde Academy. The project aligns with Governor DeSantis' priorities of economic development, health, and safety, promising significant economic and social benefits.

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	350,000
<b>Total State Funds Requested</b>	<b>350,000</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)	350,000	78%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	100,000	22%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2025-2026</b>	<b>450,000</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.**



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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)?

No

c. What is the estimated start date of construction?

07/01/2025

d. What is the estimated completion date of construction?

12/30/2027

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

Municipal budget

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.

City of Montverde

### 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	Pre-construction and construction of improved pedestrian and vehicular improvements, including sidewalks, sufficient lighting, traffic improvements including turn lanes to reduce congestion, and additional and improved crosswalks.	350,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>350,000</b>

### 13. Program Performance

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

The specific goal of funding includes preconstruction and construction activities related to pedestrian and vehicular improvements, including improved sidewalks, additional sufficient lighting, traffic improvements including turn lanes to reduce congestion, and additional and improved crosswalks.

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



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Pre-construction and construction of pedestrian and vehicular improvements in the downtown area will be provided with these funds.

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

The funding will allow the town to directly provide citizens with improved sidewalks, additional sufficient lighting, traffic improvements including turn lanes to reduce congestion, and additional and improved crosswalks through this project.

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

Town of Montverde - population 1,763

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

The expected outcome of this project is planning and constructing improvements to the vehicular and pedestrian traffic experience in downtown Montverde and the connections to Montverde Academy, improving the safety of students and other town residents.

**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?**

Permitting, withholding payment, invoice reduction, corrective action plan, termination of agreement.

**14. Is this project related to mitigation, response, or recovery from a natural disaster?**

**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#:**

**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



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- 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):**

**17. Requester Contact Information**

**a. First Name**  **Last Name**

**b. Organization**

**c. E-mail Address**

**d. Phone Number**  **Ext.**

**18. 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.**

**19. Lobbyist Contact Information**

**a. Name**

**b. Firm Name**

**c. E-mail Address**

**d. Phone Number**



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