

**LFIR # 2353** 

1. Project Title	Pinellas Park Ha	rmony Heights	Com	munity Safety Proje	ct	
2. Senate Sponsor	Nick DiCeglie					
3. Date of Request	2/12/2025					
4. Project/Program De	scription					
is to improve the side the area, as well as o	ewalks and roadwa children who are at been executed. Thi and constructing a	ys to safely acc tending Skyviev s project will be	comm w Ele e Pha	nodate the growing n mentary school. Pha ise 1b which will incl	lumber of pedestria use 1 which included ude the revitalizatio	n of sidewalks making
5. State Agency to rec		nds Depa	artme	ent of Transportation		
State Agency contact	•	Бор	u	mit or Transportation		
6. Amount of the Nonre		for Fiscal Voc	r 202	DE 2026		
	ecurring Request	ioi riscai rea	11 202		4	1
Type of Funding Operating				Amo	ount O	
Fixed Capital Outlay					750,000	
Total State Funds R	equested				750,000	1
7. Total Project Cost fo	or Fiscal Year 202	5-2026 (includ	ling n	natching funds ava		ect)
Type of Funding				Amount	Percentage	
Total State Funds Re	equested (from que	estion #6)		750,000	50%	
Matching Funds			l		00/	
Federal				0	0%	1
State (excluding the a	amount of this requ	uest)		750,000	0% 50%	1
Other				750,000	0%	1
Total Project Costs	for Fiscal Vear 20	125-2026		1,500,000	100%	
8. Has this project pre If yes, provide the n	viously received	state funding?	<b>&gt;</b>	No	100%	
Fiscal Year		ount		Specific	Vetoed	
(уууу-уу)	Recurring	Nonrecurrir	ng	Appropriation #		
9. Is future-year fundir a. If yes, indicate no b. Describe the sou	onrecurring amou	nt per year.	[     in lie	No eu of state funding.		



10. Status of Construction

a. What is the current phase of the project?

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

O Planning	<ul><li>Design</li></ul>	Construction	N/A	
b. Is the project	t "shovel ready" (	(i.e permitted)?	Yes	
c. What is the e	stimated start da	te of construction?	07/01/2025	
d. What is the e	stimated comple	tion date of constructio	<b>n?</b> 06/30/2026	
Tax.		ance costs will be funded		
Liet the come			lineath, and fixed and	tel entlen formaline lecture 4
. List the owner	s of the facility to	o receive, directly or inc	irectiy, any fixed capi	tal outlay funding. Include t
relationship b	etween the owne	rs of the facility and the	enuty.	

### 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	Phase 1b is the construction of additional sidewalks, curbs for improved drainage, roadways and the revitalization of existing sidewalks bringing them up to ADA standards.	750,000			
<b>Total State Funds Requested (m</b>	Total State Funds Requested (must equal total from question #6) 750,				

### 13. Program Performance

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

The specific purpose of this project is to improve multimodal transportation by providing safe routes for pedestrians and bicyclists, specifically children attending Skyview Elementary School.

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



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Project activities include construction of additional sidewalks, roadways and curbs as well as revitalization of existing sidewalks to bring them to ADA standards.

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

The proposed project will provide pedestrian and bicycle users safer routes, especially to those attending Skyview Elementary School. It will also improve street flooding due to new curb construction making the road safer for vehicles.

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

The targeted population are residents that live in Harmony Heights neighborhood which is a low income community. The local roadways in the area are traversed by local residents. There are also 572 housing units in the neighborhood. There are also approximately 625 students who attend Skyview Elementary School.

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

The benefit and expected outcomes will be measured by the prevention of traffic related incidents involving pedestrians and bicyclists reducing the risk of injury and death. This can be determined by traffic related police reports in the area.

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?

Agencies that contract with the City are required to purchase surety bonds at 100% of the cost of the project. Payments may be held pending satisfactory achievement of performance measures or deliverables.

14.	ls t	his project related to mitigation, response, or recovery from a natural disaster? No
a	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)
k	o. Na	ame 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?
	□ Y	es, Applied
	□ Y	es, Received
		lo
	<b>□</b> N	lo, but intends to apply
a	a. If	yes, provide the FEMA project worksheet ID#:
k	o. Pi	ovide 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)?



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☐ Yes, Applied			
☐ Yes, Received			
□ No			
☐ No, but intends to	o apply		
	e program and state ager	ncy (ex. Loca	al Government Emergen
Commerce):	program and state age.		
Boguester Centest	Information		
Requester Contact	Lana	Last Name	Beck
b. Organization	City of Pinellas Park	Luot Humo	Doork
_	lbeck@pinellas-park.com		
d. Phone Number		Ext.	
'			
Recipient Contact	Information		
a. Organization	City of Pinellas Park		
b. Municipality and	l County Pinellas		
c. Organization Ty	pe		
□For Profit Entity			
□Non Profit 501(d	3)(3)		
□Non Profit 501(c			
	·/( <del>4</del> )		
□Local Entity			
□University or Co	llege		
☑Other (please sp	pecify) Local Government		
d. First Name	Kyle	Last Name	Arrison
e. E-mail Address	<u> </u>	om	
f. Phone Number	(727)369-5621	Ext.	
Lobbyist Contact I			
a. Name	Rana Brown		
b. Firm Name	Ronald L. Book PA		
c. E-mail Address	rana@rlbookpa.com		
d. Phone Number	(305)935-1866		



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