



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2025-2026

LFIR # 2618

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The project will consist of the repairing or replacing of the storm water pipes on N Lakewood Drive and East Street in Parker, Florida. The purpose of the project is to help prevent the deterioration of the roadway if the pipes were to continue to deteriorate and to protect St. Andrews Bay from turbidity and sediment pollution.

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	990,000
<b>Total State Funds Requested</b>	<b>990,000</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)	990,000	90%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	110,000	10%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2025-2026</b>	<b>1,100,000</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.

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

10. Status of Construction



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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?

05/16/2026

d. What is the estimated completion date of construction?

05/14/2027

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

The City's funds will maintain the project once it is complete.

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.

The citizens of Parker will benefit as a whole from safer roads that are less likely to form potholes and from a less turbid Bay.

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	Pipe Repair and/or Replacement 42" and 40" pipe	990,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>990,000</b>

13. Program Performance

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

The purpose of the project is to rehab or replace the stormwater system on Lakewood Drive and East Street in order to prevent deterioration to the roadway, protect the health and safety of the citizens and improve the quality of the St. Andrew Bay surface waters.

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

The stormwater system will be repaired or replaced.

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

The stormwater system will work effectively and the roadways have a lessened risk of deterioration.



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

The target population is the residents that live on and around N Lakewood Drive and East Street. Hundreds of individuals are expected to be served.

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

The expected benefit of this project is improved storm water drainage along N Lakewood Drive and East Street.

**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?**

Additional suggested penalties the contracting agency may consider is a fine if deliverables are not met.

**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):**

Hurricane Michael

**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
- 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):**



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**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**

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