



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2025-2026

LFIR # 2761

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Goal is to complete 500 LF of seawall at City's marina in the Caloosahatchee River to prevent further shoreline erosion and to meet high demand from users, visitors, mariners and boaters. The new seawall will connect to the existing seawall and will add 300 feet of boat moorings tie-up facilities. It is shovel ready and will increase revenues for this financially disadvantaged community located in a Rural Area of Opportunity.

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	1,851,406
<b>Total State Funds Requested</b>	<b>1,851,406</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)	1,851,406	100%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2025-2026</b>	<b>1,851,406</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**



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**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)?**

**c. What is the estimated start date of construction?**

**d. What is the estimated completion date of construction?**

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

**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.**

**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	n/a	0
Other Salary and Benefits	n/a	0
Expense/Equipment/Travel/Supplies/Other	n/a	0
Consultants/Contracted Services/Study	n/a	0
<b>Operational Costs</b>		
Salary and Benefits	n/a	0
Expense/Equipment/Travel/Supplies/Other	n/a	0
Consultants/Contracted Services/Study	n/a	0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Contractual services for construction of 500 LF of seawall along the Caloosahatchee River, bidding, permitting, engineering during construction, administration, project management. Project is designed.	1,851,406
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>1,851,406</b>

**13. Program Performance**

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

Goal is to complete 500 LF of seawall at City's marina at the Caloosahatchee River to prevent further shoreline erosion and to meet high demand from users, visitors, mariners and boaters. The new seawall will connect to the existing seawall and will add 300 feet of boat moorings tie-up facilities. It is shovel ready and will increase revenues for this financially disadvantaged community located in a Rural Area of Opportunity.

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



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To seek contractual engineering during construction, bidding, project management, administration and seawall construction services to complete 500 LF of seawall through the City's procurement policies and procedures. Design is completed.

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

Safe, secure boating and mooring facilities. Protection of the Caloosahatchee River shoreline. Provides for safe access to the City's marina and facilities; Serves as a safe haven for boaters to moor their vessels inland during evacuation events and as an economic development element bringing additional revenues to the area that improves the quality of life in this Rural Area of Opportunity.

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

Target population is citizenry, visitors and residents of City of Moore Haven, Glades County, which is designated as a Rural Area of Opportunity, financially disadvantaged municipality. Target population is greater than 12,000.

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

Expected benefit is completion of 500 LF of seawall at the mouth of the Caloosahatchee River; prevention of further erosion of the shoreline which preserves and protects the environment and our natural resources; allows for safer boating tie-ups to purchase gas, use the marina facilities and protection of property from being damaged. Improved economic development, increase in revenues in this Rural Area of Opportunity. Tracking of number of boaters utilizing dock space and revenues. Completion and certification of the project.

**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?**

Contractual will include timelines, milestones, project management, status reports, corrective action plans, etc. to be adhered throughout the project; implementation of corrective action plan, non-payment of invoices until milestones completed.

**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:**



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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 of Commerce):**

**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) -FBIP, FL Commerce RIF
- 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?**

**20. What percentage of the construction has been completed?**

**21. What is the estimated completion date of construction?**



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#### 22. Requester Contact Information

a. First Name  Last Name

b. Organization

c. E-mail Address

d. Phone Number  Ext.

#### 23. 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.

#### 24. 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.*