



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 2810

1. **Project Title**
2. **Senate Sponsor**
3. **Date of Request**

4. Project/Program Description

The Town of Cutler Bay seeks \$2,480,000 in match funding for its Brownfield Site Restoration Project at 20951 Old Cutler Road. The project will remove soil contamination across 16 acres to develop Legacy Park & Municipal Complex. This includes 12 acres of park space and 4 acres for municipal buildings, including Town Hall, a Police Station, and a Community Center with a Pool. The project is shovel-ready, in the permitting phase, and aims for remediation completion by September 2026.

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	1,000,000
Total State Funds Requested	1,000,000

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)	1,000,000	20%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	3,960,000	80%
Other	0	0%
Total Project Costs for Fiscal Year 2025-2026	4,960,000	100%

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
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 removal of contaminated soil.	1,000,000
Total State Funds Requested (must equal total from question #6)		1,000,000

13. Program Performance

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

The Town of Cutler Bay seeks \$1,000,000 in match funding for its Brownfield Site Restoration Project at 20951 Old Cutler Road. The project will remove soil contamination across 16 acres to develop Legacy Park & Municipal Complex. Environmental mitigation protects the Biscayne Aquifer (groundwater), which supplies over 5 Million Florida residents drinking water. The project is shovel-ready, in the permitting phase, and aims for remediation completion by September 2026.

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



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The project aims to remove and remediate soil contamination across the 16-acre site, ensuring the land is safe for public use. This cleanup effort eliminates heavy metals, pesticides, herbicides, and arsenic, which can pose severe health risks to the community.

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

The new complex will be a central gathering place that will become the heart of the community. It will feature 12 acres of park space and 4 acres of municipal building(s) that will house the Town Hall, a Police Station, and a Community Center with a Pool.

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

General Population: All residents

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

Improve physical health-Citizens have a safe neighborhood park within walking distance from their homes. Improve mental health, Enrich cultural experience, Improve quality of education, Enhance/preserve/improve environmental or fish and wildlife quality- rehabilitation of the property and final park design will serve as a measurable outcome. Protect general public from harm (environmental, criminal, etc.)-The project site and design plans include the development of the Town's first Emergency Operations Command Center. Additionally, the community center may be used as an emergency distribution site following natural disasters. Improve transportation conditions-Town's transportation master plan & analysis of the impact of the project to be used to measure outcome. Increase/improve economic activity-permit requests will be tracked to measure benefits. Increase tourism(# of events) Create job opportunities, Enhance economic self-sufficiency (track contractor hiring practices & payroll)

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?

The Town will not be reimbursed for project activities that do not meet the deliverables or performance measures.

14. Is this project related to mitigation, response, or recovery from a natural disaster? No

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):

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



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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.