



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2025-2026

LFIR # 3446

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

4. Project/Program Description

Repairs and rehabilitation of the Brickell Key Bridge (No. 876414) and associated seawalls. Bridge and seawall repairs involve the superstructure & substructure and include concrete repairs, cathodic protection, roadway improvement, and spall repairs.

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	2,000,000
<b>Total State Funds Requested</b>	<b>2,000,000</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)	2,000,000	30%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	4,780,000	70%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2025-2026</b>	<b>6,780,000</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)?

Yes

c. What is the estimated start date of construction?

03/31/2025

d. What is the estimated completion date of construction?

09/30/25

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

Department has current maintenance and operation funding available through general fund.

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 Miami.

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	Repairs and rehabilitation of the Brickell Key Bridge (No. 876414) and associated seawalls. Bridge and seawall repairs involve the superstructure & substructure and include concrete repairs, cathodic protection, roadway improvement, and spall repairs.	2,000,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>2,000,000</b>

13. Program Performance

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

The requested funds for the Brickell Key Bridge Rehabilitation Project will be used to restore and enhance the structural integrity, safety, and longevity of Bridge No. 876414 and its associated seawalls.

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

The Brickell Key Bridge Rehabilitation Project will involve a range of activities and services to ensure the structural integrity, safety, and longevity of Bridge No. 876414 and its associated seawalls. These efforts will address both preventive maintenance and necessary structural repairs to meet the intended purpose of the funds like Structural Repairs and Rehabilitation, Concrete Repairs and Spall Repairs.



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

The appropriation project for the Brickell Key Bridge Rehabilitation will provide direct services that enhance public safety, improve transportation infrastructure, and protect the surrounding environment. These services will directly benefit residents, commuters, businesses, and visitors in the Brickell Key and Downtown Miami areas.

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

The Brickell Key Bridge Rehabilitation Project serves a broad and diverse population, ensuring the safety, accessibility, and efficiency of transportation for residents, commuters, businesses, and visitors.

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

The Brickell Key Bridge Rehabilitation Project is expected to deliver significant benefits in terms of transportation safety, infrastructure longevity, environmental resilience, and economic stability.

**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?**

Standard contract penalties are sufficient.

**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
- Yes, Received



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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.*