Appropriations Project Request - Fiscal Year 2017-18

For projects meeting the Definition of House Rule 5.14

- 1. Title of Project: Medley 96th Street Drainage Improvements
- 2. Date of Submission: <u>01/20/2017</u>
- 3. House Member Sponsor: <u>Manny Diaz</u> Members Copied:

4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? <u>No</u> If answer to 4a is "NO" skip 4b and 4c and proceed to 4d
- b. What is the most recent fiscal year the project was funded?
- c. Were the funds provided in the most recent fiscal year subsequently vetoed?
- d. Complete the following Project Request Worksheet to develop your request (Note that column E will be the total of Recurring funds requested and Column F will be the total Nonrecurring funds requested, the sum of which is the Total of the Funds you are requesting in column G):

FY:	Input Prior Year Appropriation for this project for FY 2016-17 (If appropriated in 2016-17 enter the appropriated amount, even if vetoed.)			Develop New Funds Request for FY 2017-18 (Requests for additional RECURRING funds are prohibited. Any additional Nonrecurring funding requested to supplement recurring funds in the base will result in the base recurring amount being converted to Nonrecurring.)		
Column:	А	В	С	D	E	F
Funds	Prior Year		Total Funds	Recurring Base	Additional	TOTAL Nonrecurring Request
Description:	Recurring	Prior Year	Appropriated	Budget	Nonrecurring	(Will equal the amount from the Recurring base in
	Funds	Nonrecurring		(Will equal non-	Request	Column D to be CONVERTED to Nonrecurring plus
		Funds	(Recurring plus	vetoed amounts		the Additional Nonrecurring Request in Column E.
			Nonrecurring:	provided in Column		These funds will be appropriated non-recurring if
			column A + column	A)		funded in the House Budget or the Final Conference
			B)			Report on the budget.)
Input					500,000	500,000
Amounts:						

5. Are funds for this issue requested in a state agency's Legislative Budget Request submitted for FY 2017-18? No5a. If yes, which state agency?

5b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? For example, if the requested issue pertains to services provided to inmates at correctional facilities, the Department of Corrections would be the most appropriate state agency. Department of Environmental Protection

- 6. Requester:
 - a. Name: <u>Roberto Martell</u>
 - b. Organization: <u>Town of Medley</u>
 - c. Email: rmartell@townofmedley.com
 - d. Phone #: <u>(305)887-9541</u>

7. Contact for questions about specific technical or financial details about the project (Please retype if same as Requester):

- a. Name: Jorge Corzo
- b. Organization: Town of Medley
- c. Email: jcorzo@townofmedley.com
- d. Phone #: (305)887-9541
- 8. If there is a registered lobbyist, fill out the lobbyist information below.
 - a. Name: Nelson Diaz
 - b. Firm: <u>Southern Strategy Group</u>
 - c. Email: diaz@sostrategy.com
 - d. Phone #: <u>(305)421-6304</u>

9. Organization or Name of Entity Receiving Funds(Please retype if same as Requestor or Contact):

- a. Name: Town of Medley
- b. County (County where funds are to be expended): Miami-Dade
- c. Service Area (Counties being served by the service(s) provided with funding): Broward, Miami-Dade, Monroe

10. What type of organization is the entity that will receive the funds? (Select one)

O For Profit

O Non Profit 501(c) (3)

- O Non Profit 501(c) (4)
- ⊙ Local Government

O University or College O Other (Please describe)

11. What is the specific purpose or goal that will be achieved by the funds being requested?

The specific purpose of the 96th Street Drainage Improvements will be to implement construction activities to improve roadway and drainage. The goal is to address out-dated and substandard infrastructure (drainage, roadway resurfacing, landscape, lighting, etc.)

12. Provide specific details on how funds will be spent. (Select all that apply)

Spending Category	Description	Nonrecurring
Spending Category	Description	(Should equal 4d, Col. F) Enter "0" if request is zero for the category
Administrative Costs:		
□a. Executive Director/Project Head Salary and Benefits		
□b. Other Salary and Benefits		
□c. Expense/Equipment/Travel/Supplies/Other		
☑d. Consultants/Contracted Services/Study	Construction Engineering Inspection	50,000
Operational Costs:		
□e. Salaries and Benefits		
□f. Expenses/Equipment/Travel/Supplies/Other		
□g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
☑h. Construction/Renovation/Land/Planning Engineering	Construction	450,000
TOTAL		500,000

13. For the Fixed Capital Costs requested with this issue, what type of ownership will the facility be under when complete? (In Question 12, if "h. Fixed Capital Outlay" was not selected, question 13 is not applicable)

OFor Profit

ONon Profit 501(c) (3)

ONon Profit 501(c) (4)

⊙Local Government (e.g., police, fire or local government buildings, local roads, etc.)

OState agency owned facility (For example: college or university facility, buildings for public schools, roads in the state transportation system,

etc.)

OOther (Please describe)

14. Is the project request an information technology project? N/A

15. Is there any documented show of support for the requested project in the community including public hearings, letters of support, major organizational backing, or other expressions of support?

<u>Yes</u>

15a. Please Describe:

Town of Medley's Legislative Priorities' Resolution, Town of Medley's Stormeater Ordinance, Town of Medley's Capital Improvement Plan, etc.

16. Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served? <u>Yes</u>

16a. Please Describe:

Town of Medley's Adopted FY 2017-2021 Capital Improvement Program

- 17. Will the requested funds be used directly for services to citizens? N/A
- 18. What benefits or outcomes will be realized by the expenditure of funds requested? (Select all that applies)

Benefit or Outcome	Provide a specific measure of the benefit or outcome	Describe the method for measuring level of benefit
--------------------	---	---

Improve physical health	More residents and transients participating in walk-ability and bicycling activities.	This project will improve physical health by encouraging mobility for pedestrians to walk and bicyclists to ride as a form of transportation.
□Improve mental health		
□Enrich cultural experience		
Improve agricultural production/promotion/education		
□Improve quality of education		
□Enhance/preserve/improve environmental or fish and wildlife quality		
☑Protect the general public from harm (environmental, criminal, etc.)	Increase viability through better lighting an reduced flooding that threatens property.	This project will reduce flooding and create opportunities for lighting enhancements, which will deter crime through and loss of property.
☑Improve transportation conditions	Transportation conditions will be better coordinated and will accommodate freight opportunities	This project will improve economic development and multi-modal transportation links and connectivity.
☑Increase or improve economic activity	This project will benefit businesses along the corridor by improving conditions for patrons to commute and patronize.	Increased access to businesses that will in turn increase of viability.
□Increase tourism		
☑Create specific immediate job opportunities	This project will create immediate job opportunities within the construction industry.	Reports for Career Sources and the Department of Labor and Statistics.
Enhance specific individual's economic self sufficiency		

□Reduce recidivism		
□Reduce substance abuse		
Divert from Criminal/Juvenile justice system		
☑Improve wastewater management	This project will produce better flow of wastewater	Drainage
☑Improve stormwater management	96th Street rainage Improvements will implement more National Pollutant Discharge Elimination System standards to control pollution and illicit discharge	Best Management Practices for stormwater run-off
☑Improve groundwater quality	Foster landscape irrigation	Improved water flow
Improve drinking water quality		
Improve surface water quality	This project will mitigate flooding	Reduction in flooding and property loss. Best Management Practices for run-off
Other (Please describe):		

19. Provide the total cost of the project for FY 2017-18 from all sources of funding (Enter "0" if amount is zero):

Type of Funding	Amount	Percent of Total (Automatically Calculates)	Are the other sources of funds guaranteed in writing?
1. Amount Requested from the State in this Appropriations Project Request:	500,000	47.6%	N/A
2. Federal:	0	0.0%	No
3. State: (Excluding the requested Total Amount in #4d, Column F)	0	0.0%	No

4. Local:	550,000	52.4%	Yes
5. Other:	0	0.0%	No
TOTAL	1,050,000	100%	

- 20. Is this a multi-year project requiring funding from the state for more than one year? <u>No</u>
- 21. What is the revenue source of ongoing operating funds? Town of Medley
- 22. Has local approval been given for ongoing operating funds? <u>Yes</u>
- 23. Have you applied for alternative state funding?
 - □a. Wastewater Revolving Loan
 - □b. Drinking Water Revolving Loan
 - □c. Small Community Wastewater Treatment Grant
 - □d. Other (Please describe)
 - ⊠e. N/A
- 24. Has project been addressed in a local, regional, or state plan? <u>Yes</u>
 - 24a. If Yes, insert plan name and cite page numbers. Town of Medley's Capital Improvement Plan
- 25. Is the project for a financially disadvantaged community? <u>Yes</u>
- 26. What is the population economic status?
 - $\odot a.$ Financially Disadvantaged Municipality
 - Ob. Rural Area of Critical Economic Concern
 - Oc. Rural Community Experiencing Economic Distress
 - Od. N/A

- 27. What is the status of planning?
 - ⊙a. Ready
 - Ob. Not Ready
- 28. What percentage of the planning process has been completed 100%
- 29. What is the estimated planning completion date? 10/01/2016
- 30. What is the status of design?⊙a. ReadyOb. Not Ready
- 31. What percentage of design has been completed? 100%
- 32. What is the estimated design completion date? 06/30/2016
- 33. List all required permits. South Florida Water Management District. Miami-Dade County Division of Environmental Resource Management
- 34. What is the status of permitting?
 - \odot a. Planned
 - Ob. Submitted
 - Oc. Received
- 35. What is the status of construction?
 - Oa. Ready
 - ⊙b. Not Ready
- 36. What percentage of construction has been completed?0%

37. What is the estimated completion date of construction?12/31/2018