Appropriations Project Request - Fiscal Year 2017-18

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Pinellas County Sanitary Sewer Evaluation Survey

2. Date of Submission: 02/14/2017

3. House Member Sponsor: Chris Latvala

Members Copied:

4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? No 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.)			Nonrecurring fun	additional RECU ding requested	o New Funds Request for FY 2017-18 RRING funds are prohibited. Any additional to supplement recurring funds in the base will mount being converted to Nonrecurring .)
Column:	Α	В	С	D	E	F
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated (Recurring plus Nonrecurring: column A + column B)	Recurring Base Budget (Will equal non- vetoed amounts provided in Column A)	Additional Nonrecurring Request	TOTAL Nonrecurring Request (Will equal the amount from the Recurring base in Column D to be CONVERTED to Nonrecurring plus the Additional Nonrecurring Request in Column E. These funds will be appropriated non-recurring if funded in the House Budget or the Final Conference Report on the budget.)
Input Amounts:					5,500,000	5,500,000

5. Are funds for this issue requested in a state agency?s Legislative Budget Request submitted for FY 2017-18? No 5a. 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: Rick Kriseman
 - b. Organization: <u>City of St. Petersburg</u> c. Email: Richard.Kriseman@stpete.org
 - d. Phone #: (727)893-7201
- 7. Contact for questions about specific technical or financial details about the project (Please retype if same as Requester):
 - a. Name: <u>Claude Tankersley</u>b. Organization: City of St. Pete
 - c. Email: Claude.Tankersley@stpete.org
 - d. Phone #: (727)893-7841
- 8. If there is a registered lobbyist, fill out the lobbyist information below.
 - a. Name: Sally Everett
 - b. Firm: City of St. Peterburg
 - c. Email: Sally.Everett@stpete.org
 - d. Phone #: (727)267-2111
- 9. Organization or Name of Entity Receiving Funds(Please retype if same as Requestor or Contact):
 - a. Name: All eighteen wastewater utilities in Pinellas County (i.e.,
 - b. County (County where funds are to be expended): Pinellas
 - c. Service Area (Counties being served by the service(s) provided with funding): Pinellas
- 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

Οι	Jniversity or College
0 (Other (Please describe)

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

The Sanitary Sewer Evaluation Survey (SSES) will be a critical first step in identifying defects in the sanitary sewer system that allows the inflow and infiltration of storm water during wet weather events. The SSES will involve smoke testing of 100% of the gravity sewer pipes and manholes (3,650 miles of pipe and 79,200 manholes) owned by the eighteen (18) wastewater utilities in Pinellas County. Survey reports will be provided to each utility detailing found defects.

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

Trovide specific details of flow fairings will be specific (Select all that apply)				
Spending Category	Description	Nonrecurring (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	Smoke test sewer pipes and manholes for defects and prepare detailed reports for utilities.	5,500,000		
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	
TOTAL	5,500,000

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)

N/A

14. Is the project request an information technology project?

<u>N/A</u>

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?

Yes

15a. Please Describe:

This Program supports the Pinellas County Wastewater/Stormwater Technical Working Group Initial Action Plan delivered on January 30, 2017.

- 16. Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served? Yes
 - 16a. Please Describe:

Pinellas County Wastewater/Stormwater Technical Working Group Initial Action Plan delivered on January 30, 2017

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		

□Improve mental health		
□Enrich cultural experience		
□Improve agricultural production/promotion/education		
□Improve quality of education		
☑Enhance/preserve/improve environmental or fish and wildlife quality	Reduce sewage spills into surface water bodies by up to 8% (25 million gallons per day) for rainfall events larger than 7 inches in 24 hours.	Wastewater flow meters.
☑Protect the general public from harm (environmental, criminal, etc.)	Reduce sewage spills into surface water bodies by up to 8% (25 million gallons per day) for rainfall events larger than 7 inches in 24 hours.	Wastewater flow meters.
□Improve transportation conditions		
□Increase or improve economic activity		
□Increase tourism		
□Create specific immediate job opportunities		
□Enhance specific individual?s economic self sufficiency		
□Reduce recidivism		
□Reduce substance abuse		
□Divert from Criminal/Juvenile justice system		
☑Improve wastewater management	Reduce sewage spills into surface water bodies by up to 8% (25 million gallons per day) for rainfall events larger than 7 inches in 24 hours.	Wastewater flow meters.

□Improve stormwater management		
□Improve groundwater quality		
□Improve drinking water quality		
☑Improve surface water quality	Reduce sewage spills into surface water bodies by up to 8% (25 million gallons per day) for rainfall events larger than 7 inches in 24 hours.	Wastewater flow meters.
□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?
Amount Requested from the State in this Appropriations Project Request:	5,500,000	4.0%	N/A
2. Federal:	0	0.0%	No
State: (Excluding the requested Total Amount in #4d, Column F)	0	0.0%	No
4. Local:	132,000,000	96.0%	Yes
5. Other:	0	0.0%	No
TOTAL	137,500,000	100%	

- 20. Is this a multi-year project requiring funding from the state for more than one year? $\underline{\text{No}}$
- 21. What is the revenue source of ongoing operating funds? Sewer utility fees.

22.	Has local approval been given for ongoing operating funds? Yes
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) □de. N/A
24.	Has project been addressed in a local, regional, or state plan? Yes
	24a. If Yes, insert plan name and cite page numbers. Pinellas County Wastewater/Stormwater Technical Working Group Initial Action Plan delivered on January 30, 2017, pages 19-20
25.	Is the project for a financially disadvantaged community? No
26.	What is the population economic status? Oa. Financially Disadvantaged Municipality Ob. Rural Area of Critical Economic Concern Oc. Rural Community Experiencing Economic Distress ⊙d. N/A
27.	What is the status of planning?
28.	What percentage of the planning process has been completed 100
29.	What is the estimated planning completion date? 10/20/2016

- 30. What is the status of design?
 - ⊙a. Ready
 - Ob. Not Ready
- 31. What percentage of design has been completed? 100
- 32. What is the estimated design completion date? 01/06/2017
- 33. List all required permits.
 None
- 34. What is the status of permitting?
 - Oa. Planned
 - Ob. Submitted
 - ⊙c. Received
- 35. What is the status of construction?
 - ⊙a. Ready
 - Ob. Not Ready
- 36. What percentage of construction has been completed? 0
- 37. What is the estimated completion date of construction? 06/30/2018