## **Appropriations Project Request - Fiscal Year 2017-18**

For projects meeting the Definition of House Rule 5.14

1. Title of Project: City of Miami Gardens Pedestrian Safety Improvements - Bridge and Tunnel Construction

2. Date of Submission: <u>02/02/2017</u>3. House Member Sponsor: Jose Diaz

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.) |                                     |  | 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<br>Description: | Prior Year<br>Recurring<br>Funds   | Prior Year<br>Nonrecurring<br>Funds | Total Funds Appropriated  (Recurring plus Nonrecurring: column A + column B) | Recurring Base Budget (Will equal non- vetoed amounts provided in Column A)  | Additional<br>Nonrecurring<br>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<br>Amounts:     |  |                                     |  |  | 11,857,125                            | 11,857,125  |

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 Transportation

- 6. Requester:
  - a. Name: Oliver Gilbert III
  - b. Organization: <u>City of Miami Gardens</u>c. Email: ogilbert@miamigardens-fl.gov
  - d. Phone #: (305)622-8000
- 7. Contact for questions about specific technical or financial details about the project (Please retype if same as Requester):
  - a. Name: Tom Ruiz
  - b. Organization: <u>City of Miami Gardens</u>c. Email: <u>truiz@miamigardens-fl.gov</u>
  - d. Phone #: (786)279-1260
- 8. If there is a registered lobbyist, fill out the lobbyist information below.
  - a. Name: Ron Book
  - b. Firm: Ronald L. Book, P.A. c. Email: ron@rlbookpa.com d. Phone #: (305)935-1866
- 9. Organization or Name of Entity Receiving Funds(Please retype if same as Requestor or Contact):
  - a. Name: City of Miami Gardens
  - b. County (County where funds are to be expended): Miami-Dade
  - c. Service Area (Counties being served by the service(s) provided with funding): <u>Broward, Miami-Dade</u>
- 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

| 0 | University or College   |
|---|-------------------------|
| 0 | Other (Please describe) |

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

The construction of a pedestrian safety bridge across 199th Street and a pedestrian safety tunnel under Stadium Ring Road. Construction of the bridge and tunnel will enhance pedestrian safety, reduce accidents and ease traffic congestion.

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

| Spending Category                                       | Description  | Nonrecurring<br>(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             | Customary administrative expenses for consulting team      | 20,081  |
| ☑d. Consultants/Contracted Services/Study               | Consultants (e.g., geotech, survey, civil, traffic, etc.)  | 809,419                                       |
| 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   | Design, engineering, and construction of pedestrian safety | 11,027,625                                    |

|       | bridges and tunnel |            |
|-------|--------------------|------------|
| TOTAL |                    | 11,857,125 |

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)

OLocal 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?

No

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:

Miami-Dade County Metropolitan Planning Organization Resolution #43-16 and City of Miami Gardens Resolution #2016-125-3024

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:

Yes, the Dangerous by Design 2016 Report by Smart Growth America list the Greater Miami area as one of the most dangerous metro areas for pedestrians in the country.

17. Will the requested funds be used directly for services to citizens?

<u>No</u>

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 | Describe the method for measuring level |

|   | or outcome                  | of benefit  |
|---|-----------------------------|---|
| ☑Improve physical health  | Protecting pedestrians      | Reduction in pedestrian incidents                                 |
| □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.) |                             |   |
| ☑Improve transportation conditions                                    | Clearing traffic congestion | Pre- and post-event ingress / egress times and ?all-clear? times. |
| □Increase or improve economic activity                                |                             |   |
| □Increase tourism   |                             |   |
| ☑Create specific immediate job opportunities                          | Number of jobs created      | Review of payroll / workforce reports                             |
| □Enhance specific individual?s economic self sufficiency              |                             |   |
| □Reduce recidivism  |                             |   |
| □Reduce substance abuse   |                             |   |
| □Divert from Criminal/Juvenile justice system                         |                             |   |
| □Improve wastewater management  |                             |   |
| □Improve stormwater management  |                             |   |

| □Improve groundwater quality                             |                             |                                      |
|--|-----------------------------|--------------------------------------|
| □Improve drinking water quality                          |                             |                                      |
| □Improve surface water quality                           |                             |                                      |
| ☑Other (Please describe): Reducing car accidents,        | Create more accessible road | Measure number of accessible         |
| improving pedestrian safety, and improving accessibility | crossings                   | crossings pre- and post-construction |
| for the disabled   |                             |                                      |

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<br>(Automatically Calculates) | Are the other sources of funds guaranteed in writing? |
|---|------------|--|---|
| Amount Requested from the State in this Appropriations     Project Request: | 11,857,125 | 100.0%   | N/A   |
| 2. Federal:   | 0          | 0.0%   | No  |
| State: (Excluding the requested Total Amount in #4d, Column F)              | 0          | 0.0%   | No  |
| 4. Local:   | 0          | 0.0%   | No  |
| 5. Other:   | 0          | 0.0%   | No  |
| TOTAL   | 11,857,125 | 100%   |   |

20. Is this a multi-year project requiring funding from the state for more than one year? No