Appropriations Project Request - Fiscal Year 2017-18

For projects meeting the Definition of House Rule 5.14

1. Title of Project: City of Freeport New Wastewater Treatment Plant - Planning and Design (Priority #2)

2. Date of Submission: 02/14/20173. House Member Sponsor: Brad Drake

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: | 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: | | | | | 650,000 | 650,000 |

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: Russ Barley
 - b. Organization: <u>Mayor, City of Freeport</u>c. Email: rbarley@freeportflorida.gov
 - d. Phone #: (850)835-2822
- 7. Contact for questions about specific technical or financial details about the project (Please retype if same as Requester):
 - a. Name: Clifford Knauer, P.E. Knauer, P.E.
 - b. Organization: <u>Dewberry | Preble-Rish</u>
 - c. Email: cknauer@dewberry.com
 - d. Phone #: (850)571-1253
- 8. If there is a registered lobbyist, fill out the lobbyist information below.
 - a. Name: Kelly Horton
 - b. Firm: Heffley Associates
 - c. Email: Kelly@heffleyassociates.com
 - d. Phone #: (850)251-8400
- 9. Organization or Name of Entity Receiving Funds(Please retype if same as Requestor or Contact):
 - a. Name: City of Freeport
 - b. County (County where funds are to be expended): Walton
 - c. Service Area (Counties being served by the service(s) provided with funding): Walton
- 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 | Univer | sity or (| College |
|---|--------|-----------|----------|
| 0 | Other | (Please | describe |

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

The New Wastewater Treatment Plant project would provide wastewater infrastructure to serve areas that are anticipated for growth within the City of Freeport. The project would encourage economic development within the City of Freeport by providing capacity for new industrial, commercial and residential/mixed use developments. The planning dept has seen a significant increase in development discussions, related to the widening of US 331.

12. Provide specific details on how funds will be spent. (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 | | |
| 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 | Funds will be spent on the addition of a new Wastewater Treatment Plant. This includes planning, design, survey and permitting of the new | 650,000 |

| | wastewater treatment facility. | |
|-------|--------------------------------|---------|
| TOTAL | | 650,000 |

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)

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?

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:

Regular and special council meetings were held in December 2016 and January 2017 to discuss priority projects.

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

 No
- 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)

| , <u>, , , , , , , , , , , , , , , , , , </u> | | . , |
|---|---|---|
| Benefit or Outcome | Provide a specific measure of the benefit | Describe the method for measuring level |
| | or outcome | 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 | | |
| □Protect the general public from harm (environmental, criminal, etc.) | | |
| □Improve transportation conditions | | |
| ☑Increase or improve economic activity | New commercial and residential developments, new mixed use developments and new industry created due to water and wastewater services being provided along US 331 where it currently does not exist. | Success would be measured by population growth, increased property value (tax revenue) and the creation of additional jobs in the area. |
| □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 | New infrastructure in place will create additional capacity and reliability for | Success would be measured by permit compliance at both plant |

| | the City of Freeport's Wastewater system as a whole. | locations. |
|---------------------------------|--|--|
| □Improve stormwater management | | |
| ☑Improve groundwater quality | Removal of septic tanks for individual residents. Septic tanks tend to fail during major rain events causing wastes to leech into the groundwater. | Success would be measured by groundwater analysis to determine fecal coliform in groundwater. |
| ☑Improve drinking water quality | Removal of septic tanks for individual residents. Septic tanks tend to fail during major rain events causing wastes to leech into the groundwater. In Florida, groundwater is the source for drinking water. | Success would be measured by groundwater analysis to determine fecal coliform in groundwater. |
| ☑Improve surface water quality | Removal of septic tanks for individual residents. Septic tanks tend to fail during major rain events causing depleted surface water quality. | Success would be measured by surface water quality analysis to determine fecal coliform in roadside swales containing surface water. |
| □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: | 650,000 | 100.0% | 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: | 0 | 0.0% | No |
|-----------|---------|------|----|
| 5. Other: | 0 | 0.0% | No |
| TOTAL | 650,000 | 100% | |

20. Is this a multi-year project requiring funding from the state for more than one year?

21. What is the revenue source of ongoing operating funds? Utility Monthly Customer Use Revenue

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)
- ☑e. 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.

City of Freeport Capital Improvements Plan (Schedule of Capital Improvements, Sections VIII and IX)

25. Is the project for a financially disadvantaged community?

<u>Yes</u>

- 26. What is the population economic status?
 - Oa. Financially Disadvantaged Municipality
 - ⊙b. Rural Area of Critical Economic Concern
 - Oc. Rural Community Experiencing Economic Distress
 - Od. N/A

| 27. | What is the status of planning? |
|-----|---|
| 28. | What percentage of the planning process has been completed 20% |
| 29. | What is the estimated planning completion date? 01/01/2018 |
| 30. | What is the status of design? Oa. Ready ⊙b. Not Ready |
| 31. | What percentage of design has been completed? 0% |
| 32. | What is the estimated design completion date? 01/01/2018 |
| 33. | List all required permits. Florida Department of Environmental Protection Wastewater Permit |
| 34. | What is the status of permitting? ⊙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? 01/01/2019