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

For projects meeting the Definition of House Rule 5.14

1. Title of Project: City of Freeport US 331 Utility Upgrades (Priority #1)

2. Date of Submission: <u>02/07/2017</u>3. 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.)			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:	А	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:					5,139,687	5,139,687

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>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
  - 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 US 331 Utility Upgrades - Phase I project would provide water and wastewater infrastructure to serve properties adjacent to the US 331 Corridor and the surrounding areas. The project would encourage economic development within the City of Freeport by providing capacities that are not available in the existing systems. The expansion would also provide fire protection for water users, and address environmental concerns to the Choctawhatchee River Watershed due to wastewater leeching.

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 to upgrade components within the existing water and wastewater systems, as well as	5,139,687

	to expand services to areas that are not currently connected and are anticipated for growth in the near future. This includes planning, design and construction of Phase I.	
TOTAL		5,139,687

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?

<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:

"One Walton" Joint Special Meeting was held on December 6, 2016 at 4pm. Two letters of support were received; one from Walton County Economic Development Alliance (William Imfeld) and one from Walton County Department of Health (Holly Holt).

- 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?

<u>N/A</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 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		
☑Protect the general public from harm (environmental, criminal, etc.)	Reduction of wastewater pollutants entering the Choctawhatchee Bay.	Success will be measured by the decrease in poor water quality in the Choctawhatchee Bay.
□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	End destination for travelers.	Success would be measured by an increase in services, such as food, lodging and retail facilities.
☑Create specific immediate job opportunities	The construction project would provide immediate job opportunities for the entire area.	The project would require utility crews, and landscape and irrigation workers to complete the project.

□Enhance specific individual?s economic self sufficiency		
□Reduce recidivism		
□Reduce substance abuse		
□Divert from Criminal/Juvenile justice system		
☑Improve wastewater management	Upgrades to infrastructure, such as lift stations and forecemains increasing the reliability of the system.	Success would be measured by permit compliance.
□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):

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Type of Funding	Amount	Percent of Total	Are the other sources of
		(Automatically Calculates)	funds guaranteed in

			writing?
Amount Requested from the State in this Appropriations     Project Request:	5,139,687	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	5,139,687	100%	

20.	Is this a multi-year project requiring funding from the state for more than one year?
	<u>Yes</u>

20a. How much state funding would be requested after 2017-18 over the next 5 years?

O<1M

**⊙**1-3M

O>3-10M

O>10M

20b. How many additional years of state support do you expect to need for this project?

O1 year

⊙2 years

O3 years

O4 years

O>= 5 years

20c. What is the total project cost for all years including all federal, local, state, and any other funds? Select the single answer which best describes the total project cost. If funds requested are for ongoing services or for recurring activities, select ?ongoing activity?.

Oongoing activity ? no total cost

O<1M

O1-2M

	O>2-3M ⊙>3-10M O>10M
21.	What is the revenue source of ongoing operating funds?  Monthly customer usage rates
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): Drinking Water Revolving Loan, Small Community Wastewater Treatment Grant, Water Supply Development □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. Walton County Capital Improvements Plan (Goal CI-1, p. 2)
25.	Is the project for a financially disadvantaged community?  Yes
26.	What is the population economic status? Oa. 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  ○b. Not Ready

- 28. What percentage of the planning process has been completed 100%
- 29. What is the estimated planning completion date? Completed
- 30. What is the status of design?
  - Oa. Ready
  - ⊙b. Not Ready
- 31. What percentage of design has been completed?
- 32. What is the estimated design completion date? 02/03/2018
- 33. List all required permits. FDEP, FDOT, and NWFWMD
- 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? 02/03/2020