# Appropriations Project Request - Fiscal Year 2017-18

## For projects meeting the Definition of House Rule 5.14

- 1. Title of Project: City of Apopka Wastewater Treatment Plan #2 Construction
- 2. Date of Submission: <u>02/07/2017</u>
- 3. House Member Sponsor: <u>Kamia Brown</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					31,000,000	31,000,000
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: Joe Kilsheimer
- b. Organization: <u>City of Apopka</u>
- c. Email: jkilsheimer@apopka.net
- d. Phone #: (407)703-1701

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

- a. Name: R. Jay Davoll, P.E.
- b. Organization: City of Apopka
- c. Email: jdavoll@apopka.net
- d. Phone #: <u>(407)703-1717</u>

8. If there is a registered lobbyist, fill out the lobbyist information below.

- a. Name: Chris Carmody
- b. Firm: GrayRobinson
- c. Email: chris.carmody@gray-robinson.com
- d. Phone #: (407)843-8880

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

- a. Name: City of Apopka
- b. County (County where funds are to be expended): Orange
- c. Service Area (Counties being served by the service(s) provided with funding): Orange

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?

Funds will be spent to construct a second wastewater treatment plant in Apopka, which need is required pursuant to the Wekiva Protection Act of 2004 and to accommodate future growth in Apopka.

#### 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	Construction of new wastewater treatment plant.	31,000,000
TOTAL		31,000,000

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?

Yes

### 15a. Please Describe:

The Wekiva Protection Act of 2004 mandated lower nitrate levels in treated wastewater. To accomplish this objective and to prepare for the future growth of Apopka, the City needs to build a second wastewater plant. Further, the City of Apopka has a Consent Order with FDEP to adhere to the stricter standards outlined in the Wekiva Parkway and Protection Act of 2004.

- 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>No</u>
- 17. Will the requested funds be used directly for services to citizens?  $\underline{N/A}$

#### 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		
□Protect the general public from harm (environmental, criminal, etc.)		
□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	Construction of second wastewater treatment plant will aid the City in complying with the nitrite level requirements set out in the Wekiva Protection Act and to provide for the future growth of Apopka.	Nitrate levels in treated wastewater.
Improve stormwater management		

□Improve groundwater quality	
□Improve drinking water quality	
□Improve surface water quality	
□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:	31,000,000	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	31,000,000	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?401 Operations
- 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
- $\Box$ 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.Capital Improvement Plan from FY 17/18 City of Apopka Budget, page 230. Document can be accessed at www.apopka.net
- 25. Is the project for a financially disadvantaged community? <u>No</u>
- 26. What is the population economic status?
  - Oa. Financially Disadvantaged Municipality
  - Ob. Rural Area of Critical Economic Concern
  - ⊙c. 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 90%
- 29. What is the estimated planning completion date? 9/1/2015
- 30. What is the status of design?

⊙a. Ready

- Ob. Not Ready
- 31. What percentage of design has been completed?

95%

- What is the estimated design completion date?
  3/31/2017
- 33. List all required permits. FDEP
- 34. What is the status of permitting?
  - Oa. Planned
  - ⊙b. Submitted
  - Oc. Received
- 35. What is the status of construction?

⊙a. Ready

- Ob. Not Ready
- 36. What percentage of construction has been completed?5%
- 37. What is the estimated completion date of construction?3/1/2019