Appropriations Project Request - Fiscal Year 2017-18

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Hialeah Gardens Central District Drainage Improvements (88 Ave., 89 Ave., 115 St., 114 St. & 119 St.)

 Date of Submission: <u>02/07/2017</u>
 House Member Sponsor: <u>Manny Diaz</u> Members Copied: <u>Joseph Abruzzo</u>

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 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:					1,200,000	1,200,000

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.	Red	uest	ter

a. Name: Yioset de la Cruz

b. Organization: <u>City of Hialeah Gardens (Mayor)</u> c. Email: Ydelacruz@cityofhialeahgardens.com

d. Phone #: (305)558-4114

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

a. Name: Joe Lopez

b. Organization: City of Hialeah Gardens, Public Works Department

c. Email: joelopez@tricountygroup.com

d. Phone #: (305)331-0361

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

a. Name: None b. Firm: None

c. Email:

d. Phone #:

- 9. Organization or Name of Entity Receiving Funds(Please retype if same as Requestor or Contact):
 - a. Name: City of Hialeah 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): Miami-Dade
- 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?

Construction of drainage system within public right-of-way, in recurring flood prone areas

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 drainage system within public right-of-way, in recurring flood prone areas	1,200,000
TOTAL		1,200,000

Fixe	For the Fixed Capital Costs requested with this issue, what typed Capital Outlay? was not selected, question 13 is not applicated OF Profit ONON Profit 501(c) (3) ONON Profit 501(c) (4) OLocal Government (e.g., police, fire or local government by OState agency owned facility (For example: college or universe.) OOther (Please describe)	ouildings, local roads, etc.)	
14.	Is the project request an information technology project? $\underline{\text{N/A}}$		
	Is there any documented show of support for the requested panizational backing, or other expressions of support? Yes	project in the community including publi	c hearings, letters of support, major
	15a. Please Describe: The City's 5 year Capital Improvement Plan encompasse	es the project within "The Central District	t Drainage Improvements"
16.	Has the need for the funds been documented by a study, con $\underline{\text{No}}$	npleted by an independent 3rd party, for	the area to be served?
17.	Will the requested funds be used directly for services to citize $\underline{N/A}$	ens?	
18.	What benefits or outcomes will be realized by the expenditur	re of funds requested? (Select all that ap	plies)
	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	The project will eliminate or minimize flooding within public roadways	Controls will be in place to assure that the drainage system will be constructed as designed. The system will be designed to local and State standards.
□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		
☑Improve stormwater management	The project will eliminate or minimize flooding within public roadways	Controls will be in place to assure that the drainage system will be constructed as designed. The system will be designed to local and State

		standards.
☑Improve groundwater quality	The project will incorporate local and State guidelines for water quality.	Controls will be in place to assure that the drainage system will be constructed as designed. The system will be designed to applicable local and State standards.
□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?
Amount Requested from the State in this Appropriations Project Request:	1,200,000	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	1,200,000	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?

Stormwater fees

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 □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. Hialeah Gardens Comprehensive Plan Capital Improvement Element
25.	Is the project for a financially disadvantaged community? $\underline{\text{No}}$
26.	What is the population economic status? Oa. Financially Disadvantaged Municipality Ob. Rural Area of Critical Economic Concern Oc. Rural Community Experiencing Economic Distress Od. N/A
27.	What is the status of planning? ②a. Ready Ob. Not Ready
28.	What percentage of the planning process has been completed 80%
29.	What is the estimated planning completion date? 04/03/2017

- 30. What is the status of design?
 - ⊙a. Ready
 - Ob. Not Ready
- 31. What percentage of design has been completed? 80%
- 32. What is the estimated design completion date? 04/30/2017
- 33. List all required permits.

Local Public works permit with Miami-Dade County DERM approvals

- 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? 05/31/18