

Appropriations Project Request - Fiscal Year 2017-18

For projects meeting the Definition of House Rule 5.14

1. Title of Project: St. Augustine Utility Retrofits at the School for the Deaf and Blind and Adjacent Areas

2. Date of Submission: 02/03/2017

3. House Member Sponsor: Cyndi Stevenson

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:	A	B	C	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:					998,850	998,850

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: John Regan
- b. Organization: City of St. Augustine
- c. Email: jregan@citystaug.com
- d. Phone #: (904)825-1006

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

- a. Name: Martha Graham
- b. Organization: City of St. Augustine
- c. Email: mgraham@citystaug.com
- d. Phone #: (904)825-1040

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

- a. Name: Lena Juarez
- b. Firm: JEJ and Associates
- c. Email: lena@jejassoc.com
- d. Phone #: (850)212-8330

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

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

10. What type of organization is the entity that will receive the funds? (Select one)

- ☐ For Profit
- ☐ Non Profit 501(c) (3)
- ☐ Non Profit 501(c) (4)
- ☒ Local Government

- ☐ University or College
- ☐ Other (Please describe)

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

The goal is to proactively maintain and improve safety at Florida School for the Deaf & the Blind (FSDB) for its disabled, vulnerable children. The project will minimize or mitigate flooding at FSDB and adjacent residential neighborhoods. Purpose is to reduce school and neighborhood disruptions and closures from flooding and sewer over-capacity from flood surface water inundation. Over 900 residential homes/families plus FSDB (600 on-campus students plus 400 outreach individuals) will benefit.

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:		
<input type="checkbox"/> a. Executive Director/Project Head Salary and Benefits		
<input type="checkbox"/> b. Other Salary and Benefits		
<input type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> d. Consultants/Contracted Services/Study		
Operational Costs:		
<input type="checkbox"/> e. Salaries and Benefits		
<input type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
<input checked="" type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering	Construction costs for stormwater backflow prevention retrofits, sanitary	998,850

	sewer lining, manhole rehabilitation and elevating pump station control panel above base flood elevation level.	
TOTAL		998,850

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)

- ☐ For Profit
- ☐ Non Profit 501(c) (3)
- ☐ Non Profit 501(c) (4)
- ☒ Local Government (e.g., police, fire or local government buildings, local roads, etc.)
- ☐ State agency owned facility (For example: college or university facility, buildings for public schools, roads in the state transportation system, etc.)
- ☐ Other (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:

City of St. Augustine City Commission vote of support during regular commission meeting held on January 23, 2017.

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:

FDEP has completed a study of sanitary sewer overflows in the State; St. Augustine was one of the cities cited in the report.

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)

Benefit or Outcome	Provide a specific measure of the benefit or outcome	Describe the method for measuring level of benefit
<input checked="" type="checkbox"/> Improve physical health	Florida School for the Deaf & the Blind students live on campus and have daily needs fulfilled by the school's professionals. Any interruption in their daily programs can affect their mental and physical health.	Measure reduction of school closures or disruptions due to flooding. Proactively maintain and improve safety at FSDB for its disabled, vulnerable children.
<input checked="" type="checkbox"/> Improve mental health	Florida School for the Deaf & the Blind students live on campus and have daily needs fulfilled by the school's professionals. Any interruption in their daily programs can affect their mental and physical health.	Safety is critical to these students, their families and their caregivers. Measure reduction of school closures or disruptions due to flooding.
<input type="checkbox"/> Enrich cultural experience		
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input checked="" type="checkbox"/> Improve quality of education	Comprehensive services at FSDB are tailored to develop independence and lifelong success. Any interruption affects students living on campus. Every day at the school improves their education.	Measure reduction of school closures or disruptions due to flooding. Closures affect disabled children in many ways. Many are low-functioning, vulnerable individuals.
<input checked="" type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality	Hospital Creek water quality improvement due to reduction in sanitary sewer overflows. Hospital Creek lies immediately adjacent to	Measure number of occurrences, gallons discharged in comparison to prior years.

	FSDB and surrounding residential neighborhoods.	
<input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)	Significantly less raw sewerage and tidal waters will be entering the streets and homes of the residents in the area and the Florida School for the Deaf and the Blind campus and buildings.	Health and safety is critical to FSDB and the roadways that support the school and neighborhoods. Less interruption is significant to the students' and residents' well-being.
<input checked="" type="checkbox"/> Improve transportation conditions	Reduction in road and lane closures, reduction in collapsed roads, reduction of closures due to flooding. Reduce mobilization of disabled students.	Measure number of occurrences road closed due to collapsed sewers, number of overflows and/or due to tidal inundation as compared to prior years.
<input type="checkbox"/> Increase or improve economic activity		
<input type="checkbox"/> Increase tourism		
<input type="checkbox"/> Create specific immediate job opportunities		
<input checked="" type="checkbox"/> Enhance specific individual's economic self sufficiency	Comprehensive educational services at FSDB are tailored to develop independence and lifelong success for students, to include becoming self-sufficient and employed members of society.	Any interruption affects students living on campus. Every day at the school improves successful outcomes.
<input checked="" type="checkbox"/> Reduce recidivism	Some low-functioning, vulnerable children do experience a relapse in behavior by immediate change due to unforeseen circumstances.	By being proactive in protecting the FSDB compound, and its surrounding areas, will help to stabilize the environment for these vulnerable children.
<input type="checkbox"/> Reduce substance abuse		

<input type="checkbox"/> Divert from Criminal/Juvenile justice system		
<input checked="" type="checkbox"/> Improve wastewater management	Rehabilitation of 0.5 square miles of sewer system, rehabilitation of 18,000 LF of gravity sewers, elevation of pump station control panel, and rehabilitation of 160 manholes.	Compare number of sewer overflows or gallons discharged as compared to prior years.
<input checked="" type="checkbox"/> Improve stormwater management	Reduce occurrences of nuisance tidal flooding, reduce number of road closures due to flooding.	Compare number of flooding incidences as to prior years.
<input checked="" type="checkbox"/> Improve groundwater quality	The rehabilitation of the sewer system and the reduced flooding will improve the groundwater quality.	Compare number of flooding incidences to prior years and number of sewer overflows.
<input type="checkbox"/> Improve drinking water quality		
<input checked="" type="checkbox"/> Improve surface water quality	Reduce number of occurrences of nuisance tidal flooding and sewer overflows adjacent to Hospital Creek.	Testing for salt, bacteria, and pollutants.
<input type="checkbox"/> 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:	998,850	67.2%	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:	487,550	32.8%	Yes
5. Other:	0	0.0%	No
TOTAL	1,486,400	100%	

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

No

21. What is the revenue source of ongoing operating funds?

Utility and Stormwater Fees

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?

No

25. Is the project for a financially disadvantaged community?

No

26. What is the population economic status?

- ☐a. Financially Disadvantaged Municipality
- ☐b. Rural Area of Critical Economic Concern
- ☐c. Rural Community Experiencing Economic Distress
- ☒d. 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?
12/20/2016

30. What is the status of design?

☒a. Ready

☐b. Not Ready

31. What percentage of design has been completed?
100%

32. What is the estimated design completion date?
12/20/2016

33. List all required permits.
None Required

34. What is the status of permitting?

☒a. Planned

☐b. Submitted

☐c. Received

35. What is the status of construction?

☒a. Ready

☐b. Not Ready

36. What percentage of construction has been completed?
0%

37. What is the estimated completion date of construction?
05/14/2018