

Appropriations Project Request - Fiscal Year 2018-19

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Lauderdale-by-the-Sea Septic Tank Conversion Project

2. Date of Submission: 11/01/2017

3. House Member Sponsor: George Moraitis

Members Copied:

4. DETAILS OF AMOUNT REQUESTED:

- 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, Col. E
- What is the most recent fiscal year the project was funded?
- Were the funds provided in the most recent fiscal year subsequently vetoed?
- Complete the following Project Request Worksheet to develop your request:

FY:	Input Prior Year Appropriation for this project for FY 2017-18 <i>(If appropriated in 2017-18 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2018-19 <i>(Requests for additional RECURRING funds are prohibited.)</i>		
	Column: A	B	C	D	E	F
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated <i>(Recurring plus Nonrecurring: column A + column B)</i>	Recurring Base Budget <i>(Will equal non- vetoed amounts provided in Column A)</i>	Additional Nonrecurring Request	TOTAL Nonrecurring plus Recurring Base Funds <i>(Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)</i>
Input Amounts:					1,500,000	1,500,000

5. Are funds for this issue requested in a state agency's Legislative Budget Request submitted for FY 2018-19? 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? Department of Environmental Protection

5c. Has the appropriate state agency for administering the funding, if the request were appropriated, been contacted? Yes

5d. Describe penalties for failing to meet deliverables or performance measures which the agency should provide in its contract to administer the funding if appropriated.

Government accountability to its residents to uphold referendum annexation agreement and time-line from 2001

6. Requester:

- a. Name: Ralph "Bud" Bentley
- b. Organization: Town of Lauderdale-By-The-Sea
- c. Email: BudB@lbts-fl.gov
- d. Phone #: (954)640-4204

7. Contact for questions about specific technical or financial details about the project:

- a. Name: Ralph "Bud" Bentley
- b. Organization: Town of Lauderdale-By-The-Sea
- c. Email: BudB@lbts-fl.gov
- d. Phone #: (954)640-4204

8. Is there a registered lobbyist working to secure funding for this project?

- a. Name: Candice Ericks
- b. Firm: Ericks Consultants, Inc.
- c. Email: candice.ericks@gmail.com
- d. Phone #: (850)224-0880

9. Organization or Name of entity receiving funds:

- a. Name: Town of Lauderdale-By-The-Sea
- b. County (County where funds are to be expended): Broward
- c. Service Area (Counties being served by the service(s) provided with funding): Broward

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?

A neighborhood of 99 single-family homes was annexed into the Town in 2000. This neighborhood is located next to the Intracoastal Waterway and the Atlantic Ocean. These homes abutting the Intracoastal Waterway are the last homes in the Town on septic tanks which are poorly maintained and failing. The Town Commission ranked the septic tank conversion as a priority and partnered with the City of Pompano Beach to protect the public and environment from nutrient-loading contamination.

12. Provide specific details on how funds will be spent. (Select all that apply)

Spending Category	Description	Nonrecurring (Should equal 4d, Col. E) 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	Cost of construction of the sewer system.	1,500,000
TOTAL		1,500,000

13. For the Fixed Capital Costs requested with this issue (In Question 12, category ?h. Fixed Capital Outlay? was selected), what type of ownership will the facility be under when complete? (Select one correct option)

- 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:

Letter of Support from Target Neighborhood, Town Meeting Minutes of June 27, 2017 Authorizing the RFP for Lobbying Services to Secure Project Funding, Town Meeting Minutes of August 15, 2017 Authorizing Negotiation for Contract of Lobbying Services, and Contract for Design Engineering Firm

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 each Benefit/Outcome that applies)

Benefit or Outcome	Provide a specific measure of the benefit or outcome	Describe the method for measuring level of benefit
<input type="checkbox"/> Improve physical health		

<input type="checkbox"/> Improve mental health		
<input type="checkbox"/> Enrich cultural experience		
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input type="checkbox"/> Improve quality of education		
<input checked="" type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality	Reduction of nutrient-loading contamination or over-nutrient enrichment	Number of households converted to sewer system
<input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)	Eliminate pollution	Number of repairs to the sewer system
<input type="checkbox"/> Improve transportation conditions		
<input checked="" type="checkbox"/> Increase or improve economic activity	Enhance the resale value of homes in the neighborhood	Verification through the Broward County Property Appraiser's Office
<input type="checkbox"/> Increase tourism		
<input type="checkbox"/> Create specific immediate job opportunities		
<input type="checkbox"/> Enhance specific individual's economic self sufficiency		
<input type="checkbox"/> Reduce recidivism		
<input type="checkbox"/> Reduce substance abuse		
<input type="checkbox"/> Divert from Criminal/Juvenile justice system		
<input checked="" type="checkbox"/> Improve wastewater management	Eliminate failed septic tanks and replace with a sewer system	Number of households converted to sewer
<input type="checkbox"/> Improve stormwater management		
<input checked="" type="checkbox"/> Improve groundwater quality	Reduction of contamination from failed septic tanks	Number of households converted to sewer

<input type="checkbox"/> Improve drinking water quality		
<input checked="" type="checkbox"/> Improve surface water quality	Prevention of nonpoint source pollution (NPS) to surface water body	Number of times the sewage flowed to the ground surface or right-of-way
<input type="checkbox"/> Other (Please describe):		

19. Provide the total cost of the project for FY 2018-19 from all sources of funding (Enter ?0? if amount is zero):

Type of Funding	Amount	Percent of Total	Are the other sources of funds guaranteed in writing?
1. Amount Requested from the State in this Appropriations Project Request:	1,500,000	50.0%	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:	1,500,000	50.0%	Yes
5. Other:	0	0.0%	No
TOTAL	3,000,000	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?

Customer/User rates of the City of Pompano Beach Utility System

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.

Town of Lauderdale-By-The-Sea Comprehensive Plan, Section IX. Sanitary Sewer, Solid Waste, Drainage, Portable Water, and Natural Groundwater Aquifer Recharge (p 144-149);

25. Is the project for a financially disadvantaged community? (as defined in Chapter 62-552, F.A.C.)

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?

90%

29. What is the estimated planning completion date?

December 31, 2018

30. What is the status of design?

- a. Ready
- b. Not Ready

31. What percentage of design has been completed?

90%

32. What is the estimated design completion date?

December 31, 2018

33. List all required permits.

Permits will be obtained from the City of Pompano Beach and Broward County Health Department

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?

12/31/2021