## **Appropriations Project Request - Fiscal Year 2018-19**

For projects meeting the Definition of House Rule 5.14

Title of Project: <u>CR 466A Phase 3</u>
 Date of Submission: <u>11/14/2017</u>
 House Member Sponsor: Larry Metz

Members Copied:

## 4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? Yes

  If answer to 4a is "No" skip 4b and 4c and proceed to 4d, Col. E
- b. What is the most recent fiscal year the project was funded? 2016-17
- c. Were the funds provided in the most recent fiscal year subsequently vetoed? No
- d. Complete the following Project Request Worksheet to develop your request:

FY:	Input Prior Year Appropriation for this project for FY 2017-18  (If appropriated in 2017-18 enter the appropriated amount, even if vetoed.)		Develop New Funds Request for FY 2018-19 (Requests for additional RECURRING funds are prohibited.)			
Column:	Α	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 plus Recurring Base Funds (Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)
Input Amounts:		2,750,000	2,750,000		7,000,000	7,000,000

- 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 Transportation
  - 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.

n/a

6. Requester:  a. Name: Fred Schneider  b. Organization: Lake County Board of County Commissioners  c. Email: fschneider@lakecountyfl.gov  d. Phone #: (352)253-6000
<ul> <li>7. Contact for questions about specific technical or financial details about the project:         <ul> <li>a. Name: <u>Fred Schneider</u></li> <li>b. Organization: <u>Lake County Board of County Commissioners</u></li> <li>c. Email: <u>fschneider@lakecountyfl.gov</u></li> <li>d. Phone #: (352)253-6000</li> </ul> </li> </ul>
<ul> <li>8. Is there a registered lobbyist working to secure funding for this project?</li> <li>a. Name: <u>Christopher Carmody</u></li> <li>b. Firm: <u>Gray-Robinson</u></li> <li>c. Email: <u>chris.carmody@gray-robinson.com</u></li> <li>d. Phone #: (407)843-8880</li> </ul>
<ul> <li>9. Organization or Name of entity receiving funds:</li> <li>a. Name: <u>Lake County Board of County Commissioners</u></li> <li>b. County (County where funds are to be expended): <u>Lake</u></li> <li>c. Service Area (Counties being served by the service(s) provided with funding): <u>Lake, Sumter</u></li> </ul>
<ul> <li>10. What type of organization is the entity that will receive the funds? (Select one)</li> <li>○ For Profit</li> <li>○ Non Profit 501(c) (3)</li> <li>○ Non Profit 501(c) (4)</li> <li>④ Local Government</li> <li>○ University or College</li> <li>○ Other (Please describe)</li> </ul>

11. What is the specific purpose or goa	I that will be achieved by	v the funds being	z reauested?
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Complete the 4 lane construction of CR 466A from US 27 in Lake County through The Villages to US 301 in Sumter County

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

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Spending Category	Description	Nonrecurring (Should equal 4d, Col. E) 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	Construction Engineering Inspection	250,000			
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	6,750,000			
TOTAL		7,000,000			

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)

**OFor Profit** 

ONon Profit 501(c) (3)

ONon Profit 501(c) (4)

et	<ul> <li>OLocal Government (e.g., police, fire or local government buildings, local roads, etc.)</li> <li>OState agency owned facility (For example: college or university facility, buildings for public schools, roads in the state transportation system, etc.)</li> <li>OOther (Please describe)</li> </ul>
L4.	Is the project request an information technology project?  No
	Is there any documented show of support for the requested project in the community including public hearings, letters of support, major ganizational backing, or other expressions of support?  Yes
	15a. Please Describe: The City of Fruitland Park and Lake County have approved the project. The Viallages supports the project.
L6.	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: Yes, the PD&E study was completed by the City of Fruitland Park and approved by the City and the Lake County Board of County Commissioners
L7.	Will the requested funds be used directly for services to citizens?  Yes
	17a. What are the activities and services that will be provided to meet the purpose of the funds?  Completion of the 4 lane CR 466A widening projectR
	17b. Describe the direct services to be provided to the citizens by the funding requested.  Road construction costs and associated expenses involved in expansion from 2 lanes to 4 lanes
	17c. Describe the target population to be served (i.e., "the majority of the funds requested will serve these target populations or groups.").  Select all that apply to the target population:  □Elderly persons  □Persons with poor mental health □Persons with poor physical health

	□Jobless persons		
	☐Economically disadvantaged persons		
	□At-risk youth		
	□Homeless		
	□Developmentally disabled		
	□Physically disabled		
	□Drug users (in health services)		
	□Preschool students		
	☐Grade school students		
	☐High school students		
	□University/college students		
	□Currently or formerly incarcerated persons		
	□Drug offenders (in criminal Justice)		
	□Victims of crime		
	☐General (The majority of the funds will benefit no specific	group)	
	☑Other (Please describe): All		
	17d. How many in the target population are expected to be s	served?	
	O< 25		
	O25-50		
	O51-100		
	O101-200		
	O201-400		
	O401-800		
	<b>⊙</b> >800		
18.	What benefits or outcomes will be realized by the expenditu		
	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	Traffic Capacity added	FDOT level of service method
☑Increase or improve economic activity	Increased economic development	Survey of The Villages, Sumter county, Fruitland Park and Lake County
□Increase tourism		
☑Create specific immediate job opportunities	Construction jobs created	Job Survey of Contractor
□Enhance specific individual's economic self sufficiency		
□Reduce recidivism		
□Reduce substance abuse		
□Divert from Criminal/Juvenile justice system		
□Improve wastewater management		
☑Improve stormwater management	Acres of roadway with Direct discharge	Evaluation of Acreage now treated for storm water discharge
□Improve groundwater quality		
□Improve drinking water quality		
□Improve surface water quality		

Other (Please describe):		
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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?
Amount Requested from the State in this Appropriations     Project Request:	7,000,000	96.6%	N/A
2. Federal:	0	0.0%	No
State: (Excluding the requested Total Amount in #4d, Column F)	0	0.0%	No
4. Local:	250,000	3.4%	No
5. Other:	0	0.0%	No
TOTAL	7,250,000	100%	

20. Is this a multi-year project requiring funding from the state for more than one year? No