Appropriations Project Request - Fiscal Year 2018-19

For projects meeting the Definition of House Rule 5.14

- 1. Title of Project: Starke Wastewater Reclamation Upgrade
- 2. Date of Submission: <u>11/13/2017</u>
- 3. House Member Sponsor: <u>Bobby Payne</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, Col. E*
- 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:

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:	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 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:					500,000	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? No

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.

Penalties outlined in City of Starke Admin Order No. AO181 and NPDEA Permit No. FL0028126.

6. Requester:

- a. Name: Janice Mortimer
- b. Organization: City of Starke
- c. Email: City of Starke
- d. Phone #: <u>(904)964-3998</u>

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

- a. Name: Gary Sneddon
- b. Organization: Stone Engineering Group, Inc
- c. Email: gsneddon@stonejoca.com
- d. Phone #: <u>(904)448-5300</u>

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

- a. Name: None
- b. Firm: <u>None</u>
- c. Email:
- d. Phone #:
- 9. Organization or Name of entity receiving funds:
 - a. Name: <u>City of Starke</u>
 - b. County (County where funds are to be expended): Bradford
 - c. Service Area (Counties being served by the service(s) provided with funding): Bradford
- 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)
 - \odot 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?

Upgrade of Wastewater Treatment to improve water quality of impaired waters in Lake Rowell and Santa Fe River basin. Upgrade in lieu of new treatment facilities estimated to cost approximately \$25 Million

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				
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	Aeration System Yard Work Upgrade Clarification Effluent Disposal Disinfection Solids Handling	500,000		
TOTAL		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)

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?

<u>Yes</u>

15a. Please Describe:

September 26, 2017 City Commission Meeting - Established as priority one Capital Budget. Suwannee River Water Management District support for water quality

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>Yes</u>

16a. Please Describe:

City of Starke Facilities Overview / Key Solutions, Inc. and Stone Engineering Group

- 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
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□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	Sample results of aquatic species	Surface water quality sampling and testing
ØProtect the general public from harm (environmental, criminal, etc.)	Reduced pollutant load to Alligator Creek/Lake Rowell and Santa Fe River	Surface water quality sampling and testing
□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	Improved pollutant load reduction	Improved pollutant load reduction
□Improve stormwater management		
□Improve groundwater quality		

□Improve drinking water quality		
☑Improve surface water quality	Reduce downstream pollutant load to Lake Rowell & Santa Fe River	Surface water quality sampling and testing
□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:	500,000	51.0%	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:	250,000	25.5%	Yes
5. Other:	230,000	23.5%	No
TOTAL	980,000	100%	

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

<u>Yes</u>

20a. How much state funding would be requested after 2018-19 over the next 5 years?

O<1M

⊙1-3M O>3-10M

0>3-1010

O>10M

20b. How many additional years of state support do you expect to need for this project?

O1 year

⊙2 years
O3 years
O4 years
O>= 5 years

20c. What is the total project cost for all years including all federal, local, state, and any other funds? Select the single answer which best describes the total project cost. If funds requested are for ongoing services or for recurring activities, select ?ongoing activity?.

Oongoing activity ? no total cost O<1M O1-3M ©>3-10M O>10M

- 21. What is the revenue source of ongoing operating funds? Wastewater utility fees & charges
- 22. Has local approval been given for ongoing operating funds? <u>Yes</u>
- 23. Have you applied for alternative state funding?
 - $\Box \mathsf{a}.$ Wastewater Revolving Loan
 - \Box b. Drinking Water Revolving Loan
 - $\Box c. \ \mbox{Small} \ \mbox{Community} \ \mbox{Wastewater} \ \mbox{Treatment} \ \mbox{Grant}$
 - \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. Santa Fe River Basin 303(d) impaired water/TMDL. Suwannee River WMD/Florida Fish & Wildlife Conservative Commission
- 25. Is the project for a financially disadvantaged community? (as defined in Chapter 62-552, F.A.C.) <u>Yes</u>
- 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?
 - ⊙a. Ready
 - Ob. Not Ready
- 28. What percentage of the planning process has been completed?70
- 29. What is the estimated planning completion date? 12/31/2017
- 30. What is the status of design?⊙a. ReadyOb. Not Ready
- 31. What percentage of design has been completed?20
- 32. What is the estimated design completion date? 04/30/2018
- List all required permits.
 FDEP Wastewater Treatment

CSX Railroad Crossing

- 34. What is the status of permitting?
 - \odot 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? 06/30/2021