

# Appropriations Project Request - Fiscal Year 2018-19

## For projects meeting the Definition of House Rule 5.14

1. Title of Project: Toho Water Authority Cypress Lake Wellfield Alternative Water Supply Project

2. Date of Submission: 11/14/2017

3. House Member Sponsor: John Cortes

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, 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:	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 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:					5,000,000	5,000,000

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 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.

## Loss of Funding/disincentive for regional water supply planning initiatives

### 6. Requester:

- a. Name: Brian Wheeler
- b. Organization: Water Cooperative of Central Florida (Multi-Jurisdictional Entity: Toho Water Authority; Orange Co.;
- c. Email: bwheeler@tohowater.com
- d. Phone #: (407)944-5131

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

- a. Name: Deborah Beatty
- b. Organization: Toho Water Authority
- c. Email: dbeatty@tohowater.com
- d. Phone #: (407)944-5023

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

- a. Name: John Wayne
- b. Firm: Peebles Smith & Matthews, Inc
- c. Email: John@peebles-smith.com
- d. Phone #: (850)570-7242

### 9. Organization or Name of entity receiving funds:

- a. Name: Toho Water Authority
- b. County (County where funds are to be expended): Osceola
- c. Service Area (Counties being served by the service(s) provided with funding): Orange, Osceola, Polk

### 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 Water Cooperative of Central Florida is developing brackish groundwater as a viable alternative water supply in central Florida. The project will provide 30+ million gallons per day via a reverse osmosis water treatment plant. The project must have the ability to safely dispose of the brine concentrate from the treatment process which requires construction of a concentrate disposal wells. This will fund design and construction of the first of 3 required wells.

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	Engineering Permitting, Design, and Construction Oversight; Construction of one Concentrate Disposal Well	5,000,000
TOTAL		5,000,000

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)

☐ 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): Water Cooperative of Central Florida (Toho Water Authority, Orange Co. Polk Co., City of St. Cloud)

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:

Project is supported by the Central Florida Water Initiative (including South Florida Water Management District, Southwest Water Management District and St. Johns River Water Management District) and is referenced in the CFWI Regional Water Supply Plan. The four member governments of the Water Cooperative of Central Florida have all approved the project.

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 checked="" type="checkbox"/> Improve agricultural production/promotion/education	Enhance regional water supply	Measure and record increase in potable water supply (gallons)
<input type="checkbox"/> Improve quality of education		
<input type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality		
<input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)	Development of the Cypress Lake Wellfield, brackish water supply, with the concentrate disposal well will reduce the potential for environmental impacts resulting from over pumping, withdrawals, from the Upper Floridan aquifer	The Water Management Districts have an extensive aquifer monitoring system that can measure impacts to the aquifer and wetlands from withdrawals from the Upper Floridan Aquifer.
<input type="checkbox"/> Improve transportation conditions		
<input checked="" type="checkbox"/> Increase or improve economic activity	Increasing the available potable water supply through the development of the Cypress Lake wellfield brackish water supply with the requested concentrate disposal well will provide water supply to support future economic development.	The increased water supply can be measured through the water use permit implementation of the Cypress Lake wellfield project.
<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 type="checkbox"/> Improve wastewater management		
<input type="checkbox"/> Improve stormwater management		
<input type="checkbox"/> Improve groundwater quality		
<input type="checkbox"/> Improve drinking water quality		
<input type="checkbox"/> Improve surface water quality		
<input checked="" type="checkbox"/> Other (Please describe): Reduce Use of traditional groundwater supply	Reduce use of Upper Floridan aquifer groundwater by 30+ MGD	Transfer withdrawal of groundwater to brackish Lower Floridan aquifer, an AWS

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:	5,000,000	66.7%	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:	2,500,000	33.3%	Yes
5. Other:	0	0.0%	No
<b>TOTAL</b>	<b>7,500,000</b>	<b>100%</b>	

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?

NA - project is currently in the engineering and permitting stages

22. Has local approval been given for ongoing operating funds?

No

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.

CFWI Regional Water Supply Plan; project information located in various volumes - project description: Volume II, Chapter 3, page 51 - 52

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?  
01/31/2018
30. What is the status of design?  
☒a. Ready  
☐b. Not Ready
31. What percentage of design has been completed?  
10%
32. What is the estimated design completion date?  
07/01/2018
33. List all required permits.  
FDEP UIC Class V Group 4 Injection Well System Construction Permit
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?  
06/30/2019