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

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Tamarac - The Boulevards Stormwater Drainage Repair and Pipe Lining

2. Date of Submission: 11/09/2017

3. House Member Sponsor: Jared Moskowitz

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:	(If app	Year Appropriat for FY 2017- propriated in 201 priated amount, e	7-18 enter the	(Reque	Develop New Funds Request for FY 2018-19 sts for additional RECURRING funds a	re 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:					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.

The City reserves the right to recover any ascertainable actual damages incurred as a result of the failure of the Contractor to perform, or for losses.

#### 6. Requester:

a. Name: Michael Gresek

b. Organization: City of Tamarac

c. Email: michael.gresek@tamarac.org

d. Phone #: (954)597-3562

- 7. Contact for questions about specific technical or financial details about the project:
  - a. Name: Michael Gresek
  - b. Organization: City of Tamarac
  - c. Email: michael.gresek@tamarac.org
  - d. Phone #: (954)597-3562
- 8. Is there a registered lobbyist working to secure funding for this project?
  - a. Name: Ronald Book
  - b. Firm: Ronald L. Book, P.A.
  - c. Email: alex@rlbookpa.com
  - d. Phone #: (305)935-1866
- 9. Organization or Name of entity receiving funds:
  - a. Name: <u>City of Tamarac</u>
  - 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)
  - O For Profit
  - O Non Profit 501(c) (3)
  - O Non Profit 501(c) (4)
  - Local Government
  - O University or College

O Other (Please describe	$\circ$	Other (	Please	describe
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### 11. What is the specific purpose or goal that will be achieved by the funds being requested?

The five goals of the project are to (1) Prevent another catastrophic failure within the existing City of Tamarac Stormwater System (2) Preclude substantial private property damage from another stormwater system failure and subsequent construction (3) Rehabilitation of the recharge system of several lakes in the Tamarac Lakes North residential community (4) Avert severe erosion issues that would harm both the environment and marine life.

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:		
□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	The work shall include, but is not limited to, verification of existing drainage facilities, modifications to existing drainage system, repair/replace existing drainage pipe, adjustment of any conflicting utilities,	500,000

	adjustment or replacement of existing above.	
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)

OLocal 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:

Municipal Resolution passed at the 9/13/17 City Commission Meeting; City of Tamarac FY2018 Adopted Budget Amendment to be held November 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? 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	Describe the method for measuring level
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	or outcome	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	Water levels recorded at lakes	SCADA (Supervisory Control And Data Acquisition) computer system that monitors water levels
□Protect the general public from harm (environmental, criminal, etc.)		
□Improve transportation conditions		
□Increase or improve economic activity		
□Increase tourism		
□Create specific immediate job opportunities		
☑Enhance specific individual?s economic self sufficiency	Low water levels recorded at lakes will result in erosion, pollutants entering water, and sea-wall damage/collapse. These sea-walls are owned by the residents of the community.	SCADA (Supervisory Control And Data Acquisition) computer system that monitors water levels
□Reduce recidivism		
□Reduce substance abuse		
□Divert from Criminal/Juvenile justice system		

□Improve wastewater management		
☑Improve stormwater management	Stormwater Mitigation; Recharging of water levels providing ample water supply to raw wells and prevention of soil erosion and sea-wall damage	SCADA (Supervisory Control And Data Acquisition) computer system that monitors water levels
□Improve groundwater quality		
□Improve drinking water quality		
□Improve surface water quality		
□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	500,000	50.0%	N/A
Project Request:			
2. Federal:	0	0.0%	No
State: (Excluding the requested Total Amount in #4d, Column F)	0	0.0%	No
4. Local:	500,000	50.0%	No
5. Other:	0	0.0%	No
TOTAL	1,000,000	100%	

- 20. Is this a multi-year project requiring funding from the state for more than one year?  $\underline{\text{No}}$
- 21. What is the revenue source of ongoing operating funds?

# City of Tamarac Stormwater Budget

22.	Has local approval been given for ongoing operating funds? <u>Yes</u>
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? (as defined in Chapter 62-552, F.A.C.) $\underline{\text{No}}$
26.	What is the population economic status? Oa. Financially Disadvantaged Municipality Ob. Rural Area of Critical Economic Concern Oc. Rural Community Experiencing Economic Distress ⊙d. N/A
27.	What is the status of planning?
28.	What percentage of the planning process has been completed? 25%
29.	What is the estimated planning completion date? 2/28/18
30.	What is the status of design? Oa. Ready

Ob. Not Ready	⊙b.	Not	Ready
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31. What percentage of design has been completed?

0

32. What is the estimated design completion date? 4/30/18

33. List all required permits.

Broward County Environmental Protection & Growth Management Dept - Surface Hater Management Permit City of Tamarac Engineering Permit

- 34. What is the status of permitting?
  - ⊙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? 2/28/19