

Appropriations Project Request - Fiscal Year 2018-19

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Brooksville Master Pump Station Modification Project

2. Date of Submission: 11/13/2017

3. House Member Sponsor: Blaise Ingoglia

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:					400,000	400,000

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.

Return of funds to State if promised work is not completed.

6. Requester:

- a. Name: Richard W. Radack
- b. Organization: City of Brooksville, Public Works Department
- c. Email: RRadack@cityofbrooksville.us
- d. Phone #: (352)540-3860

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

- a. Name: Richard W. Radack
- b. Organization: City of Brooksville, Public Works Department
- c. Email: RRadack@cityofbrooksville.us
- d. Phone #: (352)540-3860

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

- a. Name: Shawn Foster
- b. Firm: Sunrise Consulting Group
- c. Email: foster@scgroup.us
- d. Phone #: (727)808-4131

9. Organization or Name of entity receiving funds:

- a. Name: City of Brooksville
- b. County (County where funds are to be expended): Hernando
- c. Service Area (Counties being served by the service(s) provided with funding): Hernando

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 purpose of these requested funds is to modify our master pump station (wastewater) in such a way that prevents future sewage spills during heavy rain events. We intend to accomplish this from multiple aspects. The building itself will need to be upgraded to hold a third pump. We plan to replace the existing 2 pumps with 3 new pumps, oversized, meaning that we can handle more wastewater in the same amount of time. Also, we need increase the wet well capacity at this location.

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	Approximately \$75,000 would be spent on the required engineering-building renovation - and also the pump requirements would require an engineer to certify work ability. The balance (\$325,000) would be spent	400,000

	on construction (renovate building and expand wet well capacity) and new equipment (3 pumps).	
TOTAL		400,000

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:

City of Brooksville Public Works staff presented the Brooksville City Council with a document that identifies the priority level of our projects, as it relates to appropriation applications. Minutes for that meeting are available on request. The City Council approved this document.

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 checked="" type="checkbox"/> Improve physical health	Local creeks are free of sewage, meaning that the wildlife and human activities on such a water way are much safer than before.	Coliform testing of local waterways after a heavy rain event.
<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 type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality		
<input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)	Negating potential contamination of ground from sewer overflows throughout the vicinity.	Monitor the reports to the State Watch Point, where we report sewer spills, in compliance with our FDEP operating permit.
<input type="checkbox"/> Improve transportation conditions		
<input type="checkbox"/> Increase or improve economic activity		
<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	During heavy rain events this pump station is so over run with storm water, that it is difficult to maintain power to the pumps. Resulting in 5 minor sewage spills in the last 8 years.	Testing local waterways for bacteria related to sewage spills after heavy rain events or storms.
<input checked="" type="checkbox"/> Improve stormwater management	During heavy rain events this stormwater inundates the sanitary sewer collection points. With adequate pumpage, this problem will alleviate itself.	Comparing number of gallons pumped on old system, compared to gallons of pumpage on the improved system.
<input type="checkbox"/> Improve groundwater quality		
<input checked="" type="checkbox"/> Improve drinking water quality	Reduction of contamination of Peck Sink which is hydraulically connected to the Floridan aquifer- the source of drinking water locally.	Measurable reduction in coliform count, and nitrogen levels of stormwater.
<input type="checkbox"/> Improve surface water quality		
<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:	400,000	80.0%	N/A
2. Federal:	0	0.0%	No
3. State: (Excluding the requested Total Amount in #4d,	0	0.0%	No

Column F)			
4. Local:	100,000	20.0%	No
5. Other:	0	0.0%	No
TOTAL	500,000	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?

Ad Valorem taxes

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?

No

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?
0%
29. What is the estimated planning completion date?
12/03/2018
30. What is the status of design?
☐ a. Ready
☒ b. Not Ready
31. What percentage of design has been completed?
0%
32. What is the estimated design completion date?
03/01/2019
33. List all required permits.
Local building permit will be required for construction to renovate existing building to hold additional pump.
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?
06/03/2019