

Appropriations Project Request - Fiscal Year 2018-19

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Marco Island San Marco Road Drainage Project Improvements

2. Date of Submission: 11/14/2017

3. House Member Sponsor: Bob Rommel

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:					475,000	475,000

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.

NO PAYMENT FOR UNSATISFACTORY DELIVERABLES; TERMINATION OF THE AGREEMENT

6. Requester:

- a. Name: Timothy Pinter
- b. Organization: CITY OF MARCO ISLAND, FLORIDA
- c. Email: TPINTER@CITYOFMARCOISLAND.COM
- d. Phone #: (239)389-5000

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

- a. Name: Timothy Pinter
- b. Organization: CITY OF MARCO ISLAND, FLORIDA
- c. Email: TPINTER@CITYOFMARCOISLAND.COM
- d. Phone #: (239)389-5000

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: RANA@RLBOOKPA.COM
- d. Phone #: (305)935-1866

9. Organization or Name of entity receiving funds:

- a. Name: CITY OF MARCO ISLAND FLORIDA
- b. County (County where funds are to be expended): Collier
- c. Service Area (Counties being served by the service(s) provided with funding): Collier

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?

This project consists of an area of approximately 25 acres of property along a major arterial street, San Marco Road, which was constructed during the early phases of the development of Marco Island. The storm drainage system is very limited which causes several local collector streets to flood and become impassable, and stranding local residents. Creating a master planned stormwater management system along this major roadway will provide a means to correct this problem.

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	Construction by a contractor selected by the open bidding process to complete the project as designed and in conformance with the current State and Federal requirements.	475,000

TOTAL		475,000
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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:

Public Hearing of the City Council of Marco Island on July 20th, 2015 which reviewed and approved the City of Marco Island Stormwater Master Plan, which included this proposed project as the number 4 priority 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
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<input type="checkbox"/> Improve physical health		
<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.)	Reduced flooding will allow for emergency vehicles to access the area during and after storm events.	Monitoring the call volumes and response time of the emergency response vehicles.
<input checked="" type="checkbox"/> Improve transportation conditions	Reduces the amount of standing flood waters from the local streets.	Visual inspection of reduced flood areas.
<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 type="checkbox"/> Improve wastewater management		
<input checked="" type="checkbox"/> Improve stormwater management	By completing one more project from out Master Planned Stormwater Management Program we are advancing toward overall stormwater	Reduction in street flooding by visual inspection and reduction of citizen complaints.

	containment.	
<input type="checkbox"/> Improve groundwater quality		
<input type="checkbox"/> Improve drinking water quality		
<input checked="" type="checkbox"/> Improve surface water quality	With the completion of this project, water quality will be improved by the reduction in illicit discharges.	As required in our MS4 permit yearly report, we will document the reduction in stormwater related incidents.
<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:	475,000	74.8%	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:	160,000	25.2%	Yes
5. Other:	0	0.0%	No
TOTAL	635,000	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 Funds

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?

Yes

24a. If Yes, insert plan name and cite page numbers.

City of Marco Island Stormwater Master Plan

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?

04/01/2018

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?

06/01/2018

33. List all required permits.

South Florida Water Management District - ERP Permit, City of Marco Island Right-of-Way Construction and Building 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?

03/01/2019