



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2024-2025

LFIR # 2247

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Replacement of aging water mains and ancillary valves and hydrants with goal of reducing massive water losses and potential for compromised water quality; and enhancement of fire suppression capabilities

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2024-2025

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	500,000
<b>Total State Funds Requested</b>	<b>500,000</b>

7. Total Project Cost for Fiscal Year 2024-2025 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	500,000	100%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2024-2025</b>	<b>500,000</b>	<b>100%</b>

8. Has this project previously received state funding?

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2023-24	0	250,000	1819	No

9. Is future funding likely to be requested?

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

Unknown

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

If yes, indicate the amount of funds received and what the funds were used for.



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\$51,516 received through Coronavirus Relief Act Funds administered by Jefferson County. All funds expended by Monticello Police Department. \$28,200 for variable message board; 2,150 for wellness screener; \$21,166 for portable lighting

## Complete questions 11 and 12 for Fixed Capital Outlay Projects

### 11. Status of Construction

a. What is the current phase of the project?

- Planning
  Design
  Construction
  N/A

b. Is the project "shovel ready" (i.e permitted)?

No

c. What is the estimated start date of construction?

01/01/2025

d. What is the estimated completion date of construction?

06/30/2026

12. List the owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

City of Monticello is applicant and owner.

### 13. Details on how the requested state funds will be expended

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Surveying, engineering, materials and construction services	500,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>500,000</b>

### 14. Program Performance

a. What specific purpose or goal will be achieved by the funds requested?

Project will result in conservation of potable water resources (reduction of water loss), will improve overall system efficiency and reduce potential for compromised water quality

b. What activities and services will be provided to meet the intended purpose of these funds?

Replacement of antiquated water mains, valves and hydrants (surveying, engineering and construction services)



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**c. What direct services will be provided to citizens by the appropriation project?**

Safe supply of potable water to businesses and residents in Monticello.

**d. Who is the target population served by this project? How many individuals are expected to be served?**

Residents and businesses in the City of Monticello

**e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?**

Reduction of water losses measured by master meters at well sites and documented in Monthly Operating Reports.

**f. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for the contract?**

Repayment of funds awarded proportionate to project completion.

**15. Requester Contact Information**

**a. First Name**  **Last Name**

**b. Organization**

**c. E-mail Address**

**d. Phone Number**  **Ext.**

**16. Recipient Contact Information**

**a. Organization**

**b. Municipality and County**

**c. Organization Type**

- For Profit Entity
- Non Profit 501(c)(3)
- Non Profit 501(c)(4)
- Local Entity
- University or College
- Other (please specify)

**d. First Name**  **Last Name**

**e. E-mail Address**

**f. Phone Number**

**17. Lobbyist Contact Information**

**a. Name**

**b. Firm Name**



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c. E-mail Address

d. Phone Number

### Please complete the questions below for Water Projects only.

#### 18. Have you applied for alternative state funding?

- Waste Water Revolving Loan
- Drinking Water Revolving Loan
- Small Community Wastewater Treatment Grant
- Other (please specify)
- N/A

#### 19. What is the population economic status?

- Financially Disadvantaged Community (ch. 62-552, F.A.C)
- Financially Disadvantaged Municipality (ch. 62-552, F.A.C)
- Rural Area of Economic Concern
- Rural Area of Opportunity (s. 288.0656, Florida Statutes)
- N/A

#### 20. What is the status of construction?

#### 21. What percentage of the construction has been completed?

#### 22. What is the estimated completion date of construction?