



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2024-2025

LFIR # 3233

1. **Project Title**
2. **Senate Sponsor**
3. **Date of Request**

4. Project/Program Description

Design, permitting, construction, post-design services and CEI of State Road 16 widening to 4 lanes from International Golf Parkway to Interstate 95. The project features bike lanes, medians to prevent illegal passing, sidewalks, and/or a multi-use path linking pedestrians and bicyclists to a regional park. The project improves traffic and pedestrian safety, enhances transportation network connectivity, and provides traffic flow resiliency with direct connections to CR 2209 and Interstate 95, a SIS facility.

5. **State Agency to receive requested funds**
- State Agency contacted?** Yes

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

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	20,000,000
Total State Funds Requested	20,000,000

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)	20,000,000	83%
Matching Funds		
Federal	4,000,000	17%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
Total Project Costs for Fiscal Year 2024-2025	24,000,000	100%

8. **Has this project previously received state funding?** No

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. **Is future funding likely to be requested?** Yes
- a. **If yes, indicate nonrecurring amount per year.**

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

Future funding of \$20 Million would be for phase 2. The project will not be able to move forward without state funding.

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

Yes



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

\$106 million in COVID-19 direct and indirect funding for: COVID-19 prevention and mitigation; business and non-profit grant programs; affordable housing; rental assistance; public transit; water and sewer infrastructure; public safety first responder efforts.

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)?

Yes

c. What is the estimated start date of construction?

7/1/2024

d. What is the estimated completion date of construction?

1/30/2026

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.

State and local government ownership along respective roadway Right-of-Way segments.

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	Design, permitting, right of way acquisition, construction, post-design services and CEI for the four-lane widening of State Road 16 from International Golf Parkway to I-95, including bike lanes, sidewalks, and/or a multi-use path.	20,000,000
Total State Funds Requested (must equal total from question #6)		20,000,000

14. Program Performance

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



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

Contracted services will be procured to design, permit, engineer and construct the widening of State Road 16 from two lanes to four lanes from International Golf Parkway to I-95 including intersection improvements at International Golf Parkway and County Road 2209.

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

The project constructs a 4-lane divided highway which increases the efficiency and level of service of a primary evacuation route. Per FDOT's summary analysis, this project reduces the potential for head on vehicular collisions on a high speed roadway.

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

This project will benefit not only the residents of St. Johns County (population 306,841), residents from surrounding counties, and the 7 million tourists who visit St. Augustine each year.

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

Per FDOT's summary analysis, this project reduces the potential for head on vehicular collisions on a high speed roadway. The project increases the efficiency and level of service of a primary evacuation route by decreasing existing traffic congestion and removing single-lane bottlenecks. This will mitigate existing traffic obstruction, which routinely delays emergency response times.

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?

If there is a performance deficiency requiring correction by the County, Agency will notify County. County will provide Agency with a corrective action plan describing how County will address performance deficiencies. If the corrective action plan implementation fails to remedy deficiencies, Agency will retain two point five percent (2.5%) of the total appropriations amount.

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)



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- 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

c. E-mail Address

d. Phone Number