## Local Funding Initiative Request - Fiscal Year 2018-2019

Title of Project: Corbett Levee Construction- Phase II

Senate Sponsor: Bobby Powell
 Date of Submission: 11/01/2017

### 4. Project/Program Description:

Flood Control and increased resiliency through the rehabilitation of a levee that has threatened to breach during previous storm events. The project has been half completed by the SFWMD.

### 5. State Agency Contacted? Yes

- a. If yes, which state agency? Department of Environmental Protection
- b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested?

### 6. Amount of Non-recurring Requested for fiscal year 2018-19:

4	Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
		3,500,000	3,500,000

### Type, amount and percent of matching funds available for this project for fiscal year 2018-19:

Туре	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	0	0.0%
Other	0	0.0%
TOTAL	0	0.0 %

### 8. Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds): 3,500,000

#### 9. Previous Year Funding Details:

- a. Has funding been provided in a previous state budget for this activity? Yes
- b. In the previous 5 fiscal years, how many years was funding provided? (Optional) 1
- c. What is the most recent fiscal year the project was funded? 2016-17
- d. Were the funds provided in the most recent fiscal year subsequently vetoed? No
- e. Complete the following Worksheet.



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FY:	Input Prior FY Appropriation for this project  for FY 2017-18  (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
Column:	Α	В	С
Funds Description: Input Amounts:	Prior Year Recurring Funds *	Prior Year Nonrecurring Funds *	Total Funds Appropriated (Column A + Column B)

### 10. Is future-year funding likely to be requested?

No

### 11. Program Performance:

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

Flood control and increased resiliency through the rehabilitation of a levee that has threatened to breach during previous storm events. The project has been half completed by the SFWMD

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

The SFWMD will complete construction to rehabilitate a degraded levee that provides flood control to the Indian Trails Improvement District and its constituents. The levee has been in danger of breach or suffered minor excursions on several occasions during storm events.

#### c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
☐Executive Director/Project Head Salary and Benefits		
□Other Salary and Benefits		
□Expense/Equipment/Travel/Supplies/Other		
□Consultants/Contracted Services/Study		
Operational Costs		
□Salary and Benefits		



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□Expense/Equipment/Travel/Supplies/Other		
☐Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation		
☑Construction/Renovation/Land/Planning Engineering	Rehabilitation of existing levee	3,500,000
TOTAL		3,500,000

d. What are the direct services to be provided to citizens by the appropriations project?

Flood control in a low lying area of Palm Beach County where flooding has been prevalent during storm events and where a levee breach could result in serious public health, safety and welfare issues.

- e. Who is the target population served by this project? How many individuals are expected to be served?
  - Residents of the Indian Trail Improvement District and those residents provided flood protection by the Corbett Levee
- f. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?
  - <u>Flood protection for the citizens of Palm Beach County</u>. The Levee will be monitored for stability and resilience.
- g. 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 in the contract?
  Withholding of grant funds until deliverables are met
- 12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.

  SFWMD
- 13. Requestor Contact Information:

a. Name: Rebecca DeLaRosa

b. Organization: Palm Beach County
c. Email: rdelarosa@pbcgov.org
d. Phone Number: (561)355-3451

14. Recipient Contact Information:

a. Organization: South Florida Water Management District

b. County: Palm Beachc. Organization Type:

O For Profit



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	O Non Profit 501(c) (3) O Non Profit 501(c) (4)
	O Local Entity
	O University or College
	Other (Please specify) Water Management District- Agency of the State
	d. Contact Name: Christopher Pettit
	e. E-mail Address: cpettit@pbcwater.com
	f. Phone Number: (941)549-2088
15.	If there is a registered lobbyist, fill out the lobbyist information below.
	a. Name: Rebecca DeLaRosa
	b. Firm: Palm Beach County
	c. Email: <a href="mailto:rdelarosa@pbcgov.org">rdelarosa@pbcgov.org</a> d. Phone Number: <a href="mailto:(561)355-3451">(561)355-3451</a>
16.	Have you applied for alternative state funding?
	□Wastewater Revolving Loan
	□Drinking Water Revolving Loan
	☐Small Community Wastewater Treatment Grant
	□Other (Please describe)
	☑N/A
17.	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
18.	What is the status of construction?
	Construction has not commenced. Project is planned and designed.
19.	What percentage of construction has been completed?
	<u>0%</u>
20.	What is the estimated completion date of construction?



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August 2019