



# The Florida Senate

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

1. **Title of Project:** Lake County South Lake Regional Park

2. **Senate Sponsor:** Kelli Stargel

3. **Date of Submission:** 11/16/2017

4. **Project/Program Description:**

South Lake Regional Park's Central Wastewater, Potable and Reclaimed Water Connection

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:**

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
400,000	2,100,000	2,500,000

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

Type	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	250,000	9.1%
Other	0	0.0%
<b>TOTAL</b>	<b>250,000</b>	<b>9.1 %</b>

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 2,750,000

9. **Previous Year Funding Details:**

a. Has funding been provided in a previous state budget for this activity? No

b. In the previous 5 fiscal years, how many years was funding provided? (Optional)

c. What is the most recent fiscal year the project was funded?

d. Were the funds provided in the most recent fiscal year subsequently vetoed?

e. Complete the following Worksheet.

<b>FY:</b>	<b>Input Prior FY Appropriation for this project for FY 2017-18</b>
------------	---



# The Florida Senate

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

	(If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
<b>Column:</b>	<b>A</b>	<b>B</b>	<b>C</b>
<b>Funds Description:</b>	<b>Prior Year Recurring Funds *</b>	<b>Prior Year Nonrecurring Funds *</b>	<b>Total Funds Appropriated (Column A + Column B)</b>
<b>Input Amounts:</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?**

The capital improvement project will provide a permanent solution to the parks, sanitary, potable water, and reclaim water facilities and provide improved protection of water quality and quantity in the Green Swamp Area of Critical State Concern.

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

The intent of this park project is to design, build, and connect a Wastewater, Potable Water and Reclaim Water System inside the 141 acre South Lake Regional Park to the City of Groveland's existing Central Wastewater Potable Water and Reclaim Water Systems.

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

Spending Category	Description	Amount
Administrative Costs		
<input checked="" type="checkbox"/> Executive Director/Project Head Salary and Benefits	Director, Program Manager, Engineer II	30,000
<input checked="" type="checkbox"/> Other Salary and Benefits	Procurement Officer, Construction Inspector I & II	20,000
<input checked="" type="checkbox"/> Expense/Equipment/Travel/Supplies/Other	Vehicles, Fuel, Copier, Printer, Computer, Phone	10,000
<input checked="" type="checkbox"/> Consultants/Contracted Services/Study	Design and Engineering	90,000
Operational Costs		



# The Florida Senate

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

<input checked="" type="checkbox"/> Salary and Benefits	Inspections, supervision, reporting	40,000
<input checked="" type="checkbox"/> Expense/Equipment/Travel/Supplies/Other	vehicles, fuel, copier, printer, phone, computer	10,000
<input checked="" type="checkbox"/> Consultants/Contracted Services/Study	material, equipment, site inspection, project close-out	200,000
Fixed Capital Construction/Major Renovation		
<input checked="" type="checkbox"/> Construction/Renovation/Land/Planning Engineering	construction	2,100,000
TOTAL		2,500,000

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

The project will provide a permanent solution to parks' sanitary, potable water and reclaim water facilities and provide improved protection of the water quantity and quality in the Green Swamp Area of Critical State Concern

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

The general public, over 250,000 individuals annually.

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

The outcome is to provide a permanent solution to parks' sanitary, potable water and reclaim water facilities and provide improved protection of the water quantity and quality in the Green Swamp Area of Critical State Concern. Lake County Needs Assessment and the adopted countywide Parks, Recreation & Trails Master Plans will be used to measure performance data.

**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?**

The contracting agency may consider liquidated damages for failing to meet deliverables or performance measures.

**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.**

Lake County Board of County Commissioners.

**13. Requestor Contact Information:**

- a. **Name:** Timothy Sullivan
- b. **Organization:** Lake County Board of County Commissioners



# The Florida Senate

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

- c. **Email:** [tsullivan@lakecountyfl.gov](mailto:tsullivan@lakecountyfl.gov)
- d. **Phone Number:** [\(352\)343-9841](tel:(352)343-9841)

### 14. Recipient Contact Information:

- a. **Organization:** [Lake County Board of County Commissioners](#)
- b. **County:** [Lake](#)
- c. **Organization Type:**
  - For Profit
  - Non Profit 501(c) (3)
  - Non Profit 501(c) (4)
  - Local Entity
  - University or College
  - Other (Please specify) [local government](#)
- d. **Contact Name:** [Timothy Sullivan](#)
- e. **E-mail Address:** [tsullivan@lakecountyfl.gov](mailto:tsullivan@lakecountyfl.gov)
- f. **Phone Number:** [\(352\)343-9841](tel:(352)343-9841)

### 15. If there is a registered lobbyist, fill out the lobbyist information below.

- a. **Name:** [Chris Carmody](#)
- b. **Firm:** [Gray/Robinson](#)
- c. **Email:** [Chris.Carmody@gray-robinson.com](mailto:Chris.Carmody@gray-robinson.com)
- d. **Phone Number:** [\(407\)244-5649](tel:(407)244-5649)

### 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)



# The Florida Senate

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

N/A

**18. What is the status of construction?**

Construction bid documents completed - awaiting funding for construction

**19. What percentage of construction has been completed?**

0%

**20. What is the estimated completion date of construction?**

Estimated completion will be within one year of approved funding.