1. **Title of Project:** North Lauderdale Lift Station #3 Upgrade with Main Lining and Lateral Lining

2. **Senate Sponsor:** Perry Thurston

3. **Date of Submission:** 11/21/2017

4. **Project/Program Description:**
   The clay sewer pipes and lift stations in the City of North Lauderdale are 30-50 years old. The clay pipes have started to deteriorate and lift stations have become less efficient. Lift station #3 serves the community east of SR-7 on SW 12th Street. The station is operating at a high rate due to its age of over 30 years old and infiltration of ground water coming into the original old clay pipes. One of the key principals in lowering flow into a lift station basin is sealing up the main and lateral pipes by using a trenchless method called pipe lining. This method lines the pipe from the inside making the structural integrity of the clay pipe stronger and sealing out the water coming in from the cracks. The scope of work for this project is to upgrade the lift station pumps and to line the gravity mains and laterals up to the property lines. Once completed, this project is anticipated to have a useful life of approximately 50 years.

5. **State Agency Contacted?** No
   a. If yes, which state agency?
   b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? Department of Environmental Protection

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

<table>
<thead>
<tr>
<th>Amount Requested for Operations</th>
<th>Amount Requested for Fixed Capital Outlay</th>
<th>Total Amount of Requested State Funds</th>
</tr>
</thead>
<tbody>
<tr>
<td>500,000</td>
<td>500,000</td>
<td>500,000</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Type</th>
<th>Amount</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>State (excluding the amount of this request)</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Local</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>0</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>FY:</th>
<th>Input Prior FY Appropriation for this project for FY 2017-18</th>
</tr>
</thead>
<tbody>
<tr>
<td>Column:</td>
<td>A</td>
</tr>
<tr>
<td>Funds Description:</td>
<td>Prior Year Recurring Funds *</td>
</tr>
</tbody>
</table>

| Input Amounts: |

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?**

      This request is to upgrade lift station #3 pumps and to line the inside of the old clay sewer gravity mains and laterals that are 30-50 years old. Over time, the clay pipes have started to deteriorate and lift stations have become less efficient. Pipe lining would increase the structural integrity of the clay pipes and prevent the infiltration of groundwater into the main and lateral pipes. Once completed, this project is anticipated to have a useful life of approximately 50 years.

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

      Upgrade of lift station #3 and lining of the old clay sewer gravity mains and laterals.

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

<table>
<thead>
<tr>
<th>Spending Category</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administrative Costs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐Executive Director/Project Head Salary and Benefits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐Other Salary and Benefits</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
d. **What are the direct services to be provided to citizens by the appropriations project?**

   *No direct services to the citizens.*

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

   *Citizens of North Lauderdale will pay less for water processing.*

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

   *Benefit is the upgrade of lift station #3 and re-lined sewer gravity sewer lines for that basin. Measured by construction progress reports and videos.*

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?**

   *10% retainage withheld.*

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.**

   *City of North Lauderdale*

13. **Requestor Contact Information:**

   a. **Name:** Ambreen Bhatti
   b. **Organization:** City of North Lauderdale
   c. **Email:** abhatty@nlauderdale.org
   d. **Phone Number:** [954]722-0900
14. **Recipient Contact Information:**
   a. **Organization:** City of North Lauderdale
   b. **County:** Broward
   c. **Organization Type:**
      - [ ] For Profit
      - [ ] Non Profit 501(c) (3)
      - [ ] Non Profit 501(c) (4)
      - [ ] Local Entity
      - [ ] University or College
      - [ ] Other (Please specify) Municipality
   d. **Contact Name:** George Krawczyk
   e. **E-mail Address:** gkrawczyk@nlauderdale.org
   f. **Phone Number:** (954)597-4756

15. **If there is a registered lobbyist, fill out the lobbyist information below.**
   a. **Name:** None
   b. **Firm:** None
   c. **Email:**
   d. **Phone Number:**

16. **Have you applied for alternative state funding?**
   - [ ] Wastewater Revolving Loan
   - [ ] Drinking Water Revolving Loan
   - [ ] Small Community Wastewater Treatment Grant
   - [ ] Other (Please describe)
   - [X] 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)
   - [X] N/A

18. **What is the status of construction?**
Not ready. Study to be performed FY 2018.

19. What percentage of construction has been completed?
   0%

20. What is the estimated completion date of construction?
   09/30/2019