1. **Title of Project:** City of Casselberry Quail Pond Circle Complete Street/Pedestrian Connectivity Improvements

2. **Senate Sponsor:** David Simmons

3. **Date of Submission:** 11/30/2017

4. **Project/Program Description:**
   Create a new bicycle/pedestrian connection linking Sunset Drive to Lake Concord Park via Quail Pond Circle. Includes pedestrian connectivity and safety improvements to Quail Pond Circle.

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 Transportation

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>282,366</td>
<td>282,366</td>
<td>282,366</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>TOTAL</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):** 282,366

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? **2017-18**
   d. Were the funds provided in the most recent fiscal year subsequently vetoed? **Yes**
   e. Complete the following Worksheet.
The Florida Senate
Local Funding Initiative Request - Fiscal Year 2018-2019

<table>
<thead>
<tr>
<th>FY:</th>
<th>Input Prior FY Appropriation for this project for FY 2017-18 (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Column:</td>
<td>A</td>
</tr>
<tr>
<td>Funds Description:</td>
<td>Prior Year Recurring Funds *</td>
</tr>
<tr>
<td>Input Amounts:</td>
<td></td>
</tr>
</tbody>
</table>

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?
   Improve bicycle/pedestrian connectivity to promote safety, health, mobility, and economic activity.
   b. What are the activities and services that will be provided to meet the intended purpose of these funds?
   Project consists of construction of new bicycle/pedestrian connection.
   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>
<tr>
<td>☐ Expense/Equipment/Travel/Supplies/Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Consultants/Contracted Services/Study</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Operational Costs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Salary and Benefits</td>
<td></td>
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<tr>
<td>☐ Expense/Equipment/Travel/Supplies/Other</td>
<td></td>
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<tr>
<td>☐ Consultants/Contracted Services/Study</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
d. What are the direct services to be provided to citizens by the appropriations project?
   Improved pedestrian/bicycle safety and connectivity, providing improved access to nearby parks, events, public facilities, transit, and businesses.

e. Who is the target population served by this project? How many individuals are expected to be served?
   Target population: City of Casselberry residents, business owners, and visitors; approximately 10,000 or more are expected to be served annually (multiple large events drawing thousands of participants are held in close vicinity of this project annually, thus it is expected to receive significant pedestrian and bicycle traffic).

f. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?
   The following are benefits anticipated to result from this project, and associated method of measurement: 1) Improved safety (measured by the number of safety elements included in the design) 2) Improved physical and mental health (measured by bicycle/pedestrian counts for the new facility) 3) Enriched cultural experience (measured by bicycle/pedestrian counts for the new facility, which will connect to Lake Concord Park, which is the cultural center of Casselberry) 4) Improved transportation conditions (measured by bicycle/pedestrian counts for the new facility) 5) Increased economic activity (measured by bicycle/pedestrian counts for the new facility; some studies suggest increased mode shift from cars to bike/ped results in higher spending at destination businesses) 6) Immediate job opportunities (measured by number of equivalent construction jobs based on project construction cost) 7) Improved stormwater management and surface water quality.

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?
   No penalties are recommend beyond standard penalties.

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 Casselberry

13. Requestor Contact Information:
   a. Name: Randy Newlon
   b. Organization: City of Casselberry
   c. Email: inewlon@casselberry.org
   d. Phone Number: (407)262-7700 Ext. 1130
14. **Recipient Contact Information:**
   a. **Organization:** City of Casselberry
   b. **County:** Seminole
   c. **Organization Type:**
      - For Profit
      - Non Profit 501(c) (3)
      - Non Profit 501(c) (4)
      - Local Entity
      - University or College
      - Other (Please specify)
   d. **Contact Name:** Kelly Brock
   e. **E-mail Address:** kbrock@casselberry.org
   f. **Phone Number:** (407)262-7725 Ext. 1235

15. **If there is a registered lobbyist, fill out the lobbyist information below.**
   a. **Name:** Michelle Ertel
   b. **Firm:** Florida Strategic Advisors, Inc.
   c. **Email:** michelleertel@me.com
   d. **Phone Number:** (407)432-0709