1. **Title of Project:** Bay Harbor Islands - Sewer Lateral Lining Project
2. **Senate Sponsor:** Daphne Campbell
3. **Date of Submission:** 12/02/2017
4. **Project/Program Description:**
   In an effort to reduce the amount of sewage produced, the Town of Bay Harbor Islands seeks to reduce/eliminate groundwater infiltration by lining all of its sewer mains, sewer manholes and sewer laterals. It should be noted that as a result of the storm surge caused by Hurricane Irma, the infiltration caused our sewage system to be well over capacity causing sewage to come up from the manholes. To date, the Town has lined all of its sewer mains and is currently in the process of lining all of its sewer laterals. Out of a total 824 sewer laterals, the Town has lined 149. The cost of lining the remaining 675 laterals is $2.1 million. The Town is asking for $1 million from the State and will provide the cash match of $1.1 million.

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>1,000,000</td>
<td>1,000,000</td>
<td>1,000,000</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>1,100,000</td>
<td>52.4%</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>1,100,000</td>
<td>52.4%</td>
</tr>
</tbody>
</table>

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 2,100,000

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>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)</td>
<td></td>
</tr>
<tr>
<td>Column:</td>
<td>A</td>
<td>B</td>
</tr>
<tr>
<td>Funds</td>
<td>Prior Year</td>
<td>Prior Year</td>
</tr>
<tr>
<td>Description:</td>
<td>Recurring Funds *</td>
<td>Nonrecurring Funds *</td>
</tr>
<tr>
<td>Input Amounts:</td>
<td></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?  
   To reduce groundwater infiltration into the sewer system thus reducing sewage volumes.  

b. What are the activities and services that will be provided to meet the intended purpose of these funds?  
   Lining of the sewer 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>
<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>
</tbody>
</table>
The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salary and Benefits</td>
<td></td>
</tr>
<tr>
<td>Expense/Equipment/Travel/Supplies/Other</td>
<td></td>
</tr>
<tr>
<td>Consultants/Contracted Services/Study</td>
<td></td>
</tr>
<tr>
<td>Fixed Capital Construction/Major Renovation</td>
<td></td>
</tr>
<tr>
<td>✓ Construction/Renovation/Land/Planning Engineering</td>
<td>1,000,000</td>
</tr>
<tr>
<td>TOTAL</td>
<td>1,000,000</td>
</tr>
</tbody>
</table>

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

Reduction in sewage to be treated and released into the ocean.

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

Residents of Miami-Dade County

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

Reduction of sewage to be treated in gallons.

**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?**

N/A

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.

The Town of Bay Harbor Islands owns the sanitary sewer system including the laterals that are being lined.

13. Requestor Contact Information:
   a. Name: Ronald Wasson
   b. Organization: Town of Bay Harbor Islands
   c. Email: rwasson@bayharborislands-fl.gov
   d. Phone Number: (305)866-6241

14. Recipient Contact Information:
   a. Organization: Town of Bay Harbor Islands
   b. County: Miami-Dade
   c. Organization Type:
      - For Profit
      - Non Profit 501(c) (3)
Local Funding Initiative Request - Fiscal Year 2018-2019

- Non Profit 501(c) (4)
- Local Entity
- University or College
- Other (Please specify)

**d. Contact Name:** J.C. Jimenez
**e. E-mail Address:** jcjimenez@bayharborislands-fl.gov
**f. Phone Number:** (305)866-6241

15. If there is a registered lobbyist, fill out the lobbyist information below.
   - a. Name: David Caserta
   - b. Firm: David Caserta Government Relations
   - c. Email: flagovernment@aol.com
   - d. Phone Number: (305)401-3005

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?
   - Ongoing

19. What percentage of construction has been completed?
   - 10%

20. What is the estimated completion date of construction?
   - June 20, 2019