



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** Oviedo Twin Rivers Golf Course Reclaimed Water Improvements

2. **Senate Sponsor:** David Simmons

3. **Date of Submission:** 12/04/2017

4. **Project/Program Description:**

Reclaimed Water Infrastructure Improvements on an existing golf course

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:**

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
	150,000	150,000

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	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):** 150,000

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.



The Florida Senate

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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:	A	B	C
Funds Description:	Prior Year Recurring Funds *	Prior Year Nonrecurring Funds *	Total Funds Appropriated (Column A + Column B)
Input Amounts:			

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

Yes

a. If yes, indicate non-recurring amount per year.

\$500,000 for construction

11. Program Performance:

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

Increased reclaimed water storage and usage creating a more sustainable wastewater system for the City of Oviedo

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

To add infrastructure improvements within an exsisting golf course to create a sustainable reclaimed water utility. Improvements include expanded storage for diurnal supply by expanding exsisting ponds, creating new ponds and adding piping and pumping facilities.

c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
<input type="checkbox"/> Executive Director/Project Head Salary and Benefits		
<input type="checkbox"/> Other Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input checked="" type="checkbox"/> Consultants/Contracted Services/Study	Technical Engineering Design, including survey, geotechnical, environmental,	150,000



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

	hydrogeological and civil engineering	
Operational Costs		
<input type="checkbox"/> Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation		
<input type="checkbox"/> Construction/Renovation/Land/Planning Engineering		
TOTAL		150,000

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

Increased reclaimed water storage and usage to better conserve groundwater

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

Residents and Businesses utilizing irrigation systems. Approximately 3053 homes and 83 commercial

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

To lower potable water usage and increase reclaimed usage measured in gallons per capita of potable water usage.

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?

Does Not Apply

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 City of Oviedo

13. Requestor Contact Information:

- a. **Name:** Bobby Wyatt
- b. **Organization:** The City of Oviedo
- c. **Email:** bwyatt@cityofoviedo.net
- d. **Phone Number:** (407)971-5648

14. Recipient Contact Information:



The Florida Senate

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a. Organization: The City of Oviedo

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) Local Government

d. Contact Name: Bryan Cobb

e. E-mail Address: bcobb@cityofoviedo.net

f. Phone Number: (407)971-5506

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

d. Phone Number: (407)843-8880

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?

N/A



The Florida Senate

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19. What percentage of construction has been completed?

0

20. What is the estimated completion date of construction?

N/A