



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** Orlando Parramore Shingle Creek Basin

2. **Senate Sponsor:** Linda Stewart

3. **Date of Submission:** 01/11/2018

4. **Project/Program Description:**

Construction of a stormwater pond to provide treatment in the upper reaches of the Shingle Creek basin.

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
	5,600,000	5,600,000

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	2,000,000	35.7%
Other	0	0.0%
TOTAL	2,000,000	35.7 %

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 5,600,000

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

Local Funding Initiative Request - Fiscal Year 2018-2019

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?

No

11. Program Performance:

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

Water quality improvements to Clear Lake and the upper reaches of Shingle Creek.

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

A stormwater pond to treat redevelopment sites in the Northeast portion of the Clear Lake basin.

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 type="checkbox"/> Consultants/Contracted Services/Study		
Operational Costs		
<input type="checkbox"/> Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

Fixed Capital Construction/Major Renovation		
<input checked="" type="checkbox"/> Construction/Renovation/Land/Planning Engineering	Land acquisition, design, and construction.	7,600,000
TOTAL		7,600,000

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

Reduction in requirement to improve Shingle Creek water quality by other means.

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

Citizens in the Southwest area of Orlando, approximately 68,000 individuals.

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

Improved water quality. Sampled and measured water quality improvements.

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?

Nothing over and above liquidated damages as mandated on contract.

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 Orlando

13. Requestor Contact Information:

- a. **Name:** Rick Howard
- b. **Organization:** City of Orlando
- c. **Email:** richard.howard@cityoforlando.net
- d. **Phone Number:** (407)246-3222

14. Recipient Contact Information:

- a. **Organization:** City of Orlando
- b. **County:** Orange
- 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:** Rick Howard



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

e. E-mail Address: richard.howard@cityoforlando.net

f. Phone Number: (407)246-3222

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

a. Name: John Wayne Smith

b. Firm: Peebles & Smith

c. Email: john@psmf.net

d. Phone Number: (850)681-7383

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?

Not initiated.

19. What percentage of construction has been completed?

0%

20. What is the estimated completion date of construction?

June 2019