



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2023-2024

LFIR # 2185

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

4. Project/Program Description

Price Boulevard is a vital local roadway that profoundly affects local and regional transportation. Prior to the impact of Hurricane Ian, it was already clear that widening and improving this artery was paramount in order to improve safety, community connectivity, modal diversity and efficiency. The road was devastated due to flooding cause by Ian. Following the damage to it and to City infrastructure by the storm, it became clear that these improvements should be fast tracked. North Port is proposing to widen the existing two-lane roadway to five lanes, add a multi-use path on both sides of the road, and add pedestrian crosswalks and add new signalization with emergency vehicle preemption. These improvements now include vital mitigation measures to prevent the sort of damages experienced as a result of flooding and bridge washouts during and immediately after Ian. We are requesting state funding to assist with an expected project shortfall of \$15 million.

5. **State Agency to receive requested funds**

State Agency contacted? Yes

6. Amount of the Nonrecurring Request for Fiscal Year 2023-2024

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	15,000,000
Total State Funds Requested	15,000,000

7. Total Project Cost for Fiscal Year 2023-2024 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	15,000,000	22%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	52,000,000	78%
Other	0	0%
Total Project Costs for Fiscal Year 2023-2024	67,000,000	100%

8. **Has this project previously received state funding?** No

Fiscal Year (YYYY-YY)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. **Is future funding likely to be requested?** No

a. **If yes, indicate nonrecurring amount per year.**

b. **Describe the source of funding that can be used in lieu of state funding.**

City voters approved renewal of the One-Cent sales tax and approved bonding sales tax for construction in the amount of \$52,00,000. With the Hurricane Ian mitigation, we expect to have a budget shortfall of around \$15 million.



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10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

Yes

If yes, indicate the amount of funds received and what the funds were used for.

\$62,202 CARES provider relief fund for first responder costs, \$2,022,694 Coronavirus Local Fiscal Recovery Fund (county allocation) for Fire/PD response, \$182,229 from FDLE Emergency Supplemental Funding for PD preparedness, \$4,213,680 Coronavirus Local Fiscal Recovery Fund (direct allocation) for water and sewer infrastructure, \$5,237 for resident assistance.

Complete questions 11 and 12 for Fixed Capital Outlay Projects

11. Status of Construction

a. What is the current phase of the project?

Planning Design Construction

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

12. List the owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

City of North Port, FL

13. Details on how the requested state funds will be expended

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	Construction of improved waterway crossings on Price Blvd.	15,000,000
Total State Funds Requested (must equal total from question #6)		15,000,000

14. Program Performance

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



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1) Address failed waterway crossings and replace the Myakkahatchee Creek Bridge as part of the widening project

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

Roadway Improvements
 Signing and Pavement Markings
 Signalization
 Lighting
 Structures
 Utilities
 Landscape and Irrigation
 Construction and Engineering Inspection

c. What direct services will be provided to citizens by the appropriation project?

Protect Evacuation Route
 Transportation Efficiency
 Transportation Safety
 Emergency Response Efficiency and Service
 Safety
 State of Good Repair
 Freight Movement and Job Creation
 Climate Change, Resiliency and the Environment
 Equity, Multimodality and Quality of Life

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

The targeted population includes residents of North Port, Sarasota County and others who are using this east/west connector road approximately two miles south of I-75.

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

- 1 - Address increase in traffic accidents.
- 2 - Address unsafe conditions for emergency and service vehicles.
- 3 - Address unreliable drainage system exacerbated by climate change.
- 4 - Address barriers to emergency evacuation centers.
- 5 - Improve system operations and travel time reliability.
- 6 - Improve multi-modal transportation systems that incorporate affordable transportation options to improve the mobility of people and goods.
- 7 - Harden and improve infrastructure to mitigate impacts of future natural disasters.

f. 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 the contract?

Suggested penalty would be repayment of the appropriation amount.

15. Requester Contact Information

a. First Name **Last Name**

b. Organization

c. E-mail Address

d. Phone Number **Ext.**

16. Recipient Contact Information

a. Organization

b. Municipality and County



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c. Organization Type

- For Profit Entity
- Non Profit 501(c)(3)
- Non Profit 501(c)(4)
- Local Entity
- University or College
- Other (please specify)

d. First Name Last Name

e. E-mail Address

f. Phone Number

17. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number