

The Florida Senate Local Funding Initiative Request Fiscal Year 2023-2024

LFIR # 1110

1. Project Title	West Miami Ph	ase IV Potable	Water Improve	ment Projec	t			
2. Senate Sponsor	Ileana Garcia							
3. Date of Request	02/02/2023							
4. Project/Program De	scription							
causing disruptions in	v, the system suffe n service, damage	ers from docun e to infrastructu	nented persister ure, and potentia	nt leakage, a al contamina	is well as intermitte ition. The funding v	and projected ent failures and ruptures will go to construction of St and west of 62nd		
5. State Agency to rec	eive requested f	unds De	partment of Env	rironmental I	Protection			
State Agency conta	cted? No							
6. Amount of the Nonr	ecurring Reques	t for Fiscal Ye	ear 2023-2024					
Type of Funding				Amo	unt			
Operations					0			
Fixed Capital Outlay				1,500,000				
Total State Funds R	Requested				1,500,000			
7. Total Project Cost fo	or Fiscal Year 20	23-2024 (inclu	ıding matching	funds avai	lable for this proj	ect)		
Type of Funding			Amou	ınt	Percentage			

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	1,500,000	31%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	3,335,000	69%
Local	0	0%
Other	0	0%
Total Project Costs for Fiscal Year 2023-2024	4,835,000	100%

8. Has this project previously received state funding?

Yes

Fiscal Year	Amo	ount	Specific	Vetoed
(уууу-уу)	Recurring	Nonrecurring	Appropriation #	
2021-22	0	2,000,000		No

9. IS future funding likely to be requested?	re funding likely to be requested?
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Yes

a. If yes, indicate nonrecurring amount per year.

1,500,000

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

If state funding is not received the City would defer the project for a year while alternate sources of non-state funding can be identified.

10.	. Ha	as t	he entit	y rec	questing	g this	pro	ject	receive	ed any	, fec	dera	ass	istanc	e re	elated	to t	the	CO	VID)-19	panc	lemi	c?
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Yes	



11. Status of Construction

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

Potable Water Improvements, Drainage Improvements, ADA EV Jitney Bus for Community Center and Police Premium Pay - American Rescue Program

Complete questions 11 and 12 for Fixed Capital Outlay Projects

a. What is the current phase of the project?							
	ODesign	Construction					
b. Is the projec	b. Is the project "shovel ready" (i.e permitted)?						
c. What is the	12/31/2023						

d. What is the estimated completion date of construction? 12/31/2024

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 West Miami		

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	Professional Engineering Services for the Design, Permitting and Bidding Assistance Professional Engineering Services for the Construction Engineering Inspections and Administration	150,000						
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 Water Main extensions and replacement in the Area of the City identified as Phase IV	1,350,000						
Total State Funds Requested (must equal total from question #6) 1,500,000								

14. Program Performance

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



□University or College

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	population of the City, the system sold, in addition to being undersized to serve the existing and projected population of the City, the system suffers from documented persistent leakage, as well as intermittent failures and ruptures causing disruptions in service, damage to infrastructure, and potential contamination. The funding will go to construction of the potable water replacement project in the Phase IV area of the project which is north of SW 16th St and west of 62nd Ave.										
	b. What activities and services will be provided to meet the intended purpose of these funds?										
	Engineering, design	gn, and construction of	the potable wate	er main improvements for	the Phase IV area.						
	c. What direct ser	vices will be provided	to citizens by t	the appropriation projec	et?						
		Improved potable water services through increased water pressure and reduced risk of interruptions in water service or contamination from antiquated pipe ruptures									
	d. Who is the targ	et population served b	y this project?	How many individuals	are expected to be served?						
	This project target	ts approximate 25% of t	he City's resider	ntial population or approxi	imately 2500 residents.						
	e. What is the exp be measured?	ected benefit or outco	ome of this proj	ect? What is the method	dology by which this outcome will						
	contamination fron	Improved potable water services through increased water pressure and reduced risk of interruptions in water service or contamination from antiquated pipe ruptures. The outcome will be measure by the reduction in the estimated 150 million gallons of water that is wasted per year and noticeable increase in water pressure for citizens.									
15.	The City is commi	itted to the success of the City fail to meet this overnents to meet the de	nis project. The deliverable, the p		is fully function potable water system City to be responsible for the cost of						
	a. First Name	Yolanda	Last Name	Aguilar							
	b. Organization	City of West Miami									
	c. E-mail Address	yolandaaguilar@cityof									
	d. Phone Number	(305)772-4775	Ext.								
16.	Recipient Contact	Information									
a. Organization City of West Miami											
	b. Municipality and	d County Miami-Dade)								
(c. Organization Ty	pe									
	□For Profit Entity										
	□Non Profit 501(d	c)(3)									
	□Non Profit 501(d	c)(4)									
	☑Local Entity										



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	□Other (please sp	pecify)								
	d. First Name	Yolanda	Last Name Aguilar							
	e. E-mail Address	olandaaguilar@cityofwestmiami.org								
	f. Phone Number	(305)772-4775								
17.	Lobbyist Contact I	nformation								
	a. Name	Jonathan P. Kilman								
	b. Firm Name	Converge Government A	ffairs of Florida, Inc.							
	c. E-mail Address	jonathan@convergegov.c	om							
	d. Phone Number	(305)423-4131								
	Please complete the questions below for Water Projects only. 18. Have you applied for alternative state funding?									
	☐ Waste Water R	evolving Loan								
	□ Drinking Water	Revolving Loan								
	☐ Small Commun	ity Wastewater Treatment	Grant							
	☐ Other (please s	pecify)								
	☑ N/A									
19.	What is the popula	tion economic status?								
	☐ Financially Disa	advantaged Community (ch	. 62-552, F.A.C)							
	☑ Financially Disa	advantaged Municipality (ch	n. 62-552, F.A.C)							
	☐ Rural Area of E	conomic Concern								
	☐ Rural Area of C	opportunity (s. 288.0656, Fl	orida Statutes)							
	□ N/A									
20.	What is the status	of construction?								
	Planning									
21.	What percentage of	of the construction has be	een completed?							
	0%									
22.	What is the estima	ted completion date of co	onstruction?							
	12-31-2024									