

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

LFIR # 1027

Fiscal Year (yyyy-yy) 9. Is future funding li a. If yes, indicate r	s for Fiscal Year 2023-2024 eviously received state funding? Amount Recurring Nonrecurring kely to be requested? nonrecurring amount per year. urce of funding that can be used	No Specific Appropriation #	Vetoed	
Other Total Project Cost B. Has this project pr Fiscal Year (уууу-уу) 9. Is future funding li	eviously received state funding? Amount Recurring Nonrecurrin kely to be requested?	No Specific Appropriation #		
Other Total Project Cost 8. Has this project pr Fiscal Year	eviously received state funding? Amount	No Specific		
Other Total Project Cost 8. Has this project pr Fiscal Year	eviously received state funding? Amount	No Specific		
Other Total Project Cost 8. Has this project pr	eviously received state funding?	800,000 No		
Other Total Project Cost		800,000	100%	
Other	s for Fiscal Year 2023-2024		100%	
		U		
Local		0	0%	
- tate (extending the	sure and respective	0	0%	
	e amount of this request)	0	0%	
Matching Funds Federal		0	0%	
	Requested (from question #6)	800,000	100%	
Type of Funding		Amount	Percentage	
. Total Project Cost	for Fiscal Year 2023-2024 (includi	ng matching funds avai	lable for this proje	ect)
Total State Funds	Requested		800,000	
Fixed Capital Outla			800,000	
Operations			0	
Type of Funding		Amou	unt	
6. Amount of the Non	recurring Request for Fiscal Year	2023-2024		
State Agency cont	acted? Yes			
5. State Agency to re	ceive requested funds Depa	rtment of Environmental F	Protection	
health, safety of res Blvd. areas. Keep of	idents, visitors, businesses, propert itizens employed, businesses open in a Rural Area of Economic Opport	y and State waters betwe and operating, maintainin	en SW 1st & 3rd St g revenues in finar	t. & W. Canal St.& MLh ncially disadvantaged
4. Project/Program D	escription repair old, undersized, stormwater p	inos & convoyanco comp	onants to provent fl	looding protect life
3. Date of Request	01/18/2023			
	Lori Berman			
2. Senate Sponsor				
1. Project Title 2. Senate Sponsor	Belle Glade Stormwater Convey	ance improvements		



11. Status of Construction

Planning

a. What is the current phase of the project?

ODesign

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

Docoived \$10,094,196	Head for loce of rovenue	and public safety services.	
NECEIVEU DIV.UO4. 100.	Deed IOLIOSS OF LEVELINE	and bublic salety services.	

Complete questions 11 and 12 for Fixed Capital Outlay Projects

Construction

	Administrative Costs:				
	Spending Category		Description		Amount
13	. Details on how the requested sta	ate funds will be expended			
	The City of Belle Glade is the ow	ner and the entity.			
12	2. List the owners of the facility to relationship between the owner			outlay funding. Inc	lude the
	d. What is the estimated complet	ion date of construction?	06/30/2024		
	c. What is the estimated start dat	te of construction?	07/01/2023		
	b. Is the project "shovel ready" (i	i.e permitted)?	Yes		

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/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering	Contractual services for engineering during construction, bidding, permitting, project management and construction	800,000
Total State Funds Requested (m	ust equal total from question #6)	800,000

14. Program Performance

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

Protection of life, health and safety of citizenry and business community.

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

Activities include seeking contractual project management and construction services through the City's procurement policies.



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

Protection of life, health, safety for citizenry and the public from dangerous flooding and unsafe conditions, reduction of accidents, protection of property with repair/replacement of old failing stormwater infrastructure. Reduction of TMDL's, pollutants, phosphorus and nitrogen by replacing/repairing/upgrading with improved piping, baffle boxes, water quality/quantity components.

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

Target population is the City of Belle Glade, which is a financially disadvantaged municipality (ch. 62-552, F.A.C.) that is located in a Rural Area of Economic Concern/Rural Area of Opportunity (s. 288.0656, Florida Statutes). The number of individuals expected to be served include the visitors, residents and businesses of the City of Belle Glade and the surrounding Lake Okeechobee Region areas such as Pahokee, South Bay and Canal Point, which exceeds 30,000.

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

Expected outcome is completion of the stormwater conveyance improvements, reduction in loss of use of roadways, safety improved; property damage decreased, less flooding, safer transportation, improved stormwater infrastructure protects the general public and environment with installation of water quality/quantity components. Certification of project.

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?

Non-payment of invoices until milestones achieved; implementation of corrective action plan.

15. Requester Contact Information			
a. First Name	Steve	Last Name	Wilson
b. Organization	City of Belle Glade		
c. E-mail Address	swilson@belleglade-fl.c	om	
d. Phone Number	(561)996-0100	Ext.	
16. Recipient Contact	16. Recipient Contact Information		
a. Organization	City of Belle Glade		
b. Municipality and	d County Palm Beach		
c. Organization Type			
□For Profit Entity			
□Non Profit 501(c	□Non Profit 501(c)(3)		
□Non Profit 501(c)(4)			
☑Local Entity			
□University or College			
□Other (please sp	□Other (please specify)		
d. First Name	Robert	Last Name	Rease
e. E-mail Address	rrease@belleglade-fl.co	m	



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(Disease November	(504)000 0400		
f. Phone Number	(561)996-0100		
17. Lobbyist Contact I	nformation		
a. Name	Connie Carpenter Vanassche		
b. Firm Name	CAS Governmental Services LLC		
c. E-mail Address	ccvgovser@gmail.com		
d. Phone Number	(561)924-7702		
•	e the questions below for Water Projects only.		
☐ Waste Water R			
□ Drinking Water	Revolving Loan		
☐ Small Commun	□ Small Community Wastewater Treatment Grant		
☐ Other (please s	pecify)		
☑ N/A			
19. What is the popula	ation economic status?		
☐ Financially Disa	advantaged Community (ch. 62-552, F.A.C)		
☑ Financially Disa	advantaged Municipality (ch. 62-552, F.A.C)		
☑ Rural Area of E	conomic Concern		
☑ Rural Area of C	☑ Rural Area of Opportunity (s. 288.0656, Florida Statutes)		
□ N/A			
20. What is the status	of construction?		
Not Ready			
21. What percentage of	of the construction has been completed?		
0	ted completion data at accommendation?		
06/30/2024	ted completion date of construction?		