



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** 96th Street Paving & Drainage Improvements

2. **Senate Sponsor:** Rene Garcia

3. **Date of Submission:** 11/06/2017

4. **Project/Program Description:**

NW South River Drive Streetscape & Drainage Improvement Phase II (NW 122nd Street to NW 116th Way)

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 Transportation

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
	500,000	500,000

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	550,000	52.4%
Other	0	0.0%
TOTAL	550,000	52.4 %

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 1,050,000

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.



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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?

No

11. Program Performance:

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

Infrastructure and Capital Improvements that will enhance the community by providing safety and access. The project will provide for safe streets with the Complete Streets Design Concepts, including the improvements of new side-walks, bicycle routes and improved access to employment centers.

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

Construction (Roadway Resurfacing, Landscaping, Lighting, ADA Sidewalks, Bike Lane, Drainage, etc.)

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		



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<input checked="" type="checkbox"/> Consultants/Contracted Services/Study	Construction Engineering & Inspection	50,000
Fixed Capital Construction/Major Renovation		
<input checked="" type="checkbox"/> Construction/Renovation/Land/Planning Engineering	Construction	1,000,000
TOTAL		1,050,000

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

Construction (roadway resurfacing, landscaping, lighting, ADA sidewalks, bike lane and drainage).

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

General Public that utilizes 96th street.

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

The expected outcomes will provide safety for pedestrians, bicyclists, and motorists and reduce flooding.

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?

No payment will be made for deliverables deemed unsatisfactory.

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.

Town of Medley

13. Requestor Contact Information:

- a. **Name:** Jorge Corzo
- b. **Organization:** Town of Medley
- c. **Email:** jcorzo@townofmedley.com
- d. **Phone Number:** (305)887-9547

14. Recipient Contact Information:

- a. **Organization:** Town of Medley
- b. **County:** Miami-Dade
- c. **Organization Type:**
 - ☐ For Profit
 - ☐ Non Profit 501(c) (3)
 - ☐ Non Profit 501(c) (4)
 - ☒ Local Entity



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☐ University or College

☐ Other (Please specify)

d. Contact Name: Jorge Corzo

e. E-mail Address: jcorzo@townofmedley.com

f. Phone Number: (305)887-9541

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

a. Name: Nelson Diaz

b. Firm: Southern Strategy Group

c. Email: diaz@sostrategy.com

d. Phone Number: (305)421-6304