



# The Florida Senate

## Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** LaBelle Zone A Septic Tank to Sewer Conversion project

2. **Senate Sponsor:** Kathleen Passidomo

3. **Date of Submission:** 11/17/2017

4. **Project/Program Description:**

The LaBelle Zone A Septic Tank Conversion to Central Sewer will complete the conversion of Zone A septic tanks to central sewer in the City of LaBelle. Water quality will potentially be improved in the Caloosahatchee River (C-43) for residents of the city and the region upon completion. This project mitigates river water quality issues

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
	3,128,500	3,128,500

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	0	0.0%
Other	0	0.0%
TOTAL	0	0.0 %

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 3,128,500

9. **Previous Year Funding Details:**

- Has funding been provided in a previous state budget for this activity? No
- In the previous 5 fiscal years, how many years was funding provided? (Optional)
- What is the most recent fiscal year the project was funded?
- Were the funds provided in the most recent fiscal year subsequently vetoed?
- Complete the following Worksheet.



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<b>FY:</b>	<b>Input Prior FY Appropriation for this project for FY 2017-18</b> (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
<b>Column:</b>	<b>A</b>	<b>B</b>	<b>C</b>
<b>Funds Description:</b>	<b>Prior Year Recurring Funds *</b>	<b>Prior Year Nonrecurring Funds *</b>	<b>Total Funds Appropriated (Column A + Column B)</b>
<b>Input Amounts:</b>			

**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 will be improved in the Caloosahatchee River (C-43) and users will move from using a septic tank to the city central sewer treatment facility.

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

N/A

**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		



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Fixed Capital Construction/Major Renovation		
<input checked="" type="checkbox"/> Construction/Renovation/Land/Planning Engineering	Construction of lift station and infrastructure associated with septic tank to sewer conversion.	3,128,500
TOTAL		3,128,500

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

Allows for normal waste water services to all city customers in Zone A.

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

Zone A in the City of LaBelle and surrounding area, 1,500

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

Normal waste water services to all city customers in Zone A. Customer Utility Billing invoices.

**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?**

Cancel funding.

**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 LaBelle

**13. Requestor Contact Information:**

- a. **Name:** David Lyons
- b. **Organization:** City of LaBelle
- c. **Email:** davealyons@hotmail.com
- d. **Phone Number:** (863)228-0008

**14. Recipient Contact Information:**

- a. **Organization:** City Of LaBelle
- b. **County:** Hendry
- c. **Organization Type:**
  - For Profit
  - Non Profit 501(c) (3)
  - Non Profit 501(c) (4)
  - Local Entity
  - University or College



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Other (Please specify)

**d. Contact Name:** Ron Zimmerly

**e. E-mail Address:** rzimmerly@citylabelle.com

**f. Phone Number:** (863)517-0235

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

**a. Name:** Joe Spratt

**b. Firm:** Spratt & Associates

**c. Email:** josephrspratt@yahoo.com

**d. Phone Number:** (863)517-0235

**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?**

Planning Stage

**19. What percentage of construction has been completed?**

0%

**20. What is the estimated completion date of construction?**

July 2019