



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** City of Gulfport – Private Lateral Lines – Replacement Incentive Program.

2. **Senate Sponsor:** Darryl Rouson

3. **Date of Submission:** 01/17/2018

4. **Project/Program Description:**

To create a City sponsored program to assist private homeowners in replacing their home’s defective Sanitary Sewer Lateral(s) that connect to the City’s Sanitary Sewer System.- The goal of the program is to reduce the amount of private property ground and surface water inflow and infiltration (I&I), subsequently entering the City’s Sanitary Sewer System for conveyance for treatment from defective privately owned Sanitary Sewer Lateral(s).- Removing the inflow and infiltration (I&I) will assist in providing recurring capacity within the City’s system. This reduction will assist in reducing system discharges from the City’s Sanitary Sewer System.

5. **State Agency Contacted?** Yes

a. If yes, which state agency? Department of Environmental Protection

b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested?

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
	250,000	250,000

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	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):** 250,000

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?



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- d. Were the funds provided in the most recent fiscal year subsequently vetoed?
- e. Complete the following Worksheet.

FY:	Input Prior FY Appropriation for this project for FY 2017-18		
	A	B	C
	(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?

To create a City sponsored program to assist private homeowners in replacing their home's defective Sanitary Sewer Lateral(s) that connect to the City's Sanitary Sewer System.- The goal of the program is to reduce the amount of private property ground and surface water inflow and infiltration (I&I), subsequently entering the City's Sanitary Sewer System for conveyance for treatment from defective privately owned Sanitary Sewer Lateral(s).- Removing the inflow and infiltration (I&I) will assist in providing recurring capacity within the City's system. This reduction will assist in reducing system discharges from the City's Sanitary Sewer System.

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

To place funding in place to assist residents with a cost share program for private lateral rehabilitation

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		



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Operational Costs		
<input checked="" type="checkbox"/> Salary and Benefits		.5 FTE 27,500
<input checked="" type="checkbox"/> Expense/Equipment/Travel/Supplies/Other	SEWER LATERAL LINES	222,500
<input type="checkbox"/> Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation		
<input type="checkbox"/> Construction/Renovation/Land/Planning Engineering		
TOTAL		250,000

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

To create a City sponsored program to assist private homeowners in replacing their home's defective Sanitary Sewer Lateral(s) that connect to the City's Sanitary Sewer System.

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

Residents of the City of Gulfport - dependent on number of participants and available funding.

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

Reduction will assist in reducing system discharges from the City's Sanitary Sewer System.

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?

N/A

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.

N/A

13. Requestor Contact Information:

- a. **Name:** James E. O'Reily, City Manager
- b. **Organization:** City of Gulfport
- c. **Email:** joreilly@mygulfport.us
- d. **Phone Number:** (727)893-1009

14. Recipient Contact Information:

- a. **Organization:** City of Gulfport
- b. **County:** Pinellas



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c. Organization Type:

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

d. Contact Name: James E. O'Reilly, City Manager

e. E-mail Address: joreilly@mygulfport.us

f. Phone Number: (727)893-1009

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

a. Name: None

b. Firm: None

c. Email:

d. Phone Number:

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?

Pending Approval

19. What percentage of construction has been completed?

0%- September, 2020



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20. What is the estimated completion date of construction?

October 2021