1. **Title of Project:** Brooksville Modify Master Lift Station at Cortez Blvd.

2. **Senate Sponsor:** Wilton Simpson

3. **Date of Submission:** 01/30/2019

4. **Project/Program Description:**
   Modify existing lift station or construct a new lift station to collect and pump sewage flows to the wastewater treatment facility.

5. **State Agency to receive requested funds:** Department of Environmental Protection
   State Agency Contacted? No

6. **Amount of the Nonrecurring Request for Fiscal Year 2019-2020**

<table>
<thead>
<tr>
<th>Type of Funding</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operations</td>
<td></td>
</tr>
<tr>
<td>Fixed Capital Outlay</td>
<td>600,000</td>
</tr>
<tr>
<td><strong>Total State Funds Requested</strong></td>
<td>600,000</td>
</tr>
</tbody>
</table>

7. **Total Project Cost for Fiscal Year 2019-2020 (including matching funds available for this project)**

<table>
<thead>
<tr>
<th>Type of Funding</th>
<th>Amount</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total State Funds Requested (from question #6)</td>
<td>600,000</td>
<td>100.00%</td>
</tr>
<tr>
<td>Federal</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>State (excluding the amount of this request)</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Local</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td><strong>Total Project Costs for Fiscal Year 2019-2020</strong></td>
<td>600,000</td>
<td>100.0%</td>
</tr>
</tbody>
</table>

8. **Has this project previously received state funding?** No

9. **Is future-year funding likely to be requested?** No

10. **Details on how the requested state funds will be expended**

<table>
<thead>
<tr>
<th>Spending Category</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Administrative Costs:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Executive Director/Project Head Salary and Benefits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Salary and Benefits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Expense/Equipment/Travel/Supplies/Other</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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11. Program Performance:

a. **What is the specific purpose or goal that will be achieved by the funds requested?**
   
   To upgrade the lift station facility and prevent raw sewage leaking from the facility during heavy rain events, thereby protecting the health of the surrounding environment, humans, along with wildlife, including water bodies with aquatic life from being contaminated.

b. **What are the activities and services that will be provided to meet the intended purpose of these funds?**
   
   Modifications to lift station include keeping stormwater out of well area during heavy rain events, relocating existing piping, pumps, electrical and all other appurtenances necessary. Upgrade pumps and equipment to meet capacity of flows. Alternate, is to build a new lift station.

c. **What are the direct services to be provided to citizens by the appropriations project?**
   
   Protecting the health and welfare of citizens.

d. **Who is the target population served by this project? How many individuals are expected to be served?**
   
   Target population is most of the southwest area of Brooksville that includes residential homes, apartments, and commercial facilities. Approximately, 3 to 5 thousand individuals will benefit from this project.

e. **What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?**
   
   Expected benefits include minimizing, or eliminating any possible sewage loss, and to handle future increased sewage flows as population increases. On site inspections, a regular maintenance program, metering and monitoring flows from the facility will provide staff necessary data to provide an efficient and continued safe operation of the lift station.

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 in the contract?**
   
   Withhold payment for non-service.

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: Mark Kutney
   b. Organization: City Manager, City of Brooksville
   c. E-mail Address: mkutney@cityofbrooksville.us
   d. Phone Number: (352)540-3810 Ext. N/A

14. Recipient Contact Information:
   a. Organization: City of Brooksville
   b. County: Hernando
   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: Jon Dowler
   e. E-mail Address: jdowler@cityofbrooksville.us
   f. Phone Number: (352)540-3860

15. Lobbyist Contact Information
   a. Name: Shawn Foster
   b. Firm Name: Sunrise Consulting Group
   c. E-mail Address: foster@scgroup.us
   d. Phone Number: (727)808-4131 Ext. N/A

Please complete the questions below for Water Projects only

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
18. **What is the status of construction?** No construction as of yet.

19. **What percentage of construction has been completed?** 0

20. **What is the estimated completion date of construction?** 8/31/2020