1. **Title of Project**: Pompano Beach Deep Well Replacement

2. **Senate Sponsor**: Gary Farmer

3. **Date of Submission**: 02/14/2019

4. **Project/Program Description**:
   Emergency Construction of a class I injection well to dispose of non hazardous membrane concentrate, of Potable water treatment plant by-product for a 10 MGD Water Plant serving the Cities of Pompano Beach, Lighthouse and Lauderdale by the Sea.

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>2,000,000</td>
</tr>
<tr>
<td><strong>Total State Funds Requested</strong></td>
<td><strong>2,000,000</strong></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>2,000,000</td>
<td>25.97%</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>5,700,000</td>
<td>74.03%</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><strong>7,700,000</strong></td>
<td><strong>100.0%</strong></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Fiscal Year (yyyy-yy)</th>
<th>Recurring</th>
<th>NonRecurring</th>
<th>Specific Appropriation #</th>
<th>Vetoed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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 Administrative Costs</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<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>
</tbody>
</table>
11. Program Performance:

a. What is the specific purpose or goal that will be achieved by the funds requested?
   It will allow us to meet our SFWMD consumptive use permit (CUP). Ensure water quality standards are met. Ensuring adequate water supply for Pompano Beach, Lighthouse Point and Lauderdale by the Sea.

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

c. What are the direct services to be provided to citizens by the appropriations project?
   The emergency construction of this well will allow the City to continue providing the highest quality water to the citizens meeting all Federal and State regulations.

d. Who is the target population served by this project? How many individuals are expected to be served?
   The Cities total population served is 82,611.

e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?
   No SFWMD CUP violations or FDEP water quality violations. Continued service to communities that we serve. New well passes all of the testing required by FDEP.

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?
   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.
   The City of Pompano Beach

13. Requestor Contact Information:
   a. Name: A. Randolph Brown
b. Organization: City of Pompano Beach

c. E-mail Address: randolph.brown@copbfl.com

d. Phone Number: (954)545-7044

14. Recipient Contact Information:
   a. Organization: City of Pompano Beach
   b. County: Broward
   c. Organization Type:
      ○ For Profit
      ○ Non Profit 501(c) (3)
      ○ Non Profit 501(c) (4)
      ○ Local Entity
      ○ University or College
      ○ Other (Please specify) Local Government
   d. Contact Name: A. Randolph Brown
   e. E-mail Address: randolph.brown@copbfl.com
   f. Phone Number: (954)545-7044

15. Lobbyist Contact Information
   a. Name: Mario Bailey
   b. Firm Name: Becker & Poliakoff
   c. E-mail Address: MBailey@beckerlawyers.com
   d. Phone Number: (954)364-6094

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
   □ Rural Area of Opportunity (s. 288-0656, Florida Statutes)
   ☒ N/A
18. **What is the status of construction?** Permit submitted to FDEP

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

20. **What is the estimated completion date of construction?** 12/31/2019