

LFIR # 1137

- 1. **Project Title** Sunny Isles Beach Golden Shores Pump Station
- 2. Senate Sponsor Jason Pizzo
- 3. Date of Request 10/31/2019

### 4. **Project/Program Description**

Project involves improvements to the Golden Shores Pump Station, located in the City's most populated single-family home residential neighborhood. Improvements will include repairs to system drainage lines, wells, replacing the generator, upgrading piping and outfalls, back-flow prevention devices and check valves, catch basin and station's monitoring system.

5. State Agency to receive requested funds

Department of Environmental Protection

# State Agency contacted? O Yes No

### 6. Amount of the Nonrecurring Request for Fiscal Year 2020-2021

Type of Funding	Amount
Operations	000
Fixed Capital Outlay	800,000
Total State Funds Requested	800,000

7. Total Project Cost for Fiscal Year 2020-2021 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	800000	32.0 %
Matching Funds		
Federal	00	0 %
State (excluding the amount of this request)	00	0 %
Local	1,700,000	68 %
Other	00	0 %
Total Project Costs for Fiscal Year 2020-2021	2,500,000	100 %

8. Has this project previously received state funding? • Yes • No

If yes, provide the most recent instance:

Fiscal Year	Amount		Specific		
(уууу-уу)	Recurring	Nonrecurring	Appropriation #	Vetoed	

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

If yes, indicate nonrecurring amount per year.



LFIR # 1137

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		
Other Salary and Benefits		
Expense/Equipment/ Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Operational Costs: Oth	er	
Salary and Benefits		
Expense/Equipment/ Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Fixed Capital Construc	tion/Major Renovation:	
Construction/Renovation/ Land/Planning Engineering	Construction of pump station improvements including repairs to system drainage lines, wells, replacing the generator, upgrading piping and outfalls, back-flow prevention devices and check valves, catch basin and station's monitoring system.	800,000
Total State Funds Re	quested (must equal total from question #6)	800,000



LFIR # 1137

### 11. Program Performance

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

Reduce flooding in the Golden Shores neighborhood by upgrading the pump station.

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

Construction of improvements to pump station and connected drainage system.

c. What direct services will be provided to citizens by the appropriation project?

The improvements to the pump station will alleviate flooding in the neighborhood, reducing risk to life and property.

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

The approximately 1,000 residents of Golden Shores, as well as any visitors, contractors working in the area, etc.

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

Reduction in flood events due to heavy rainfall and severe storms that are increasing in frequency, causing damage to property and compromise life safety of citizens.

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?

Non-issuance of state legislature appropriated funds.



### the facility to receive directly or indirectly, any fixed canital outlay funding 12

City	/ of Sunny Isles Be	ach		
Re	questor Contact	t Information		
a.	First Name	Christopher	Last Name	Russo
b.	Organization	City of Sunny Isles Beach		
C.	E-mail Address	crusso@sibfl.net		
d.	Phone Number	(305)792-1776	Ext.	
Re	cipient Contact	Information		
a.	Organization	City of Sunny Isles Beach		
b.	Municipality and	County Miami-Dade		
C.	Organization Typ	De		
	O For-profit E	ntity		
	O Non-Profit 8	501(c) (3)		
	O Non-Profit 5	501(c) (4)		
	Local Entity	,		
	O University o	or College		
	Other (plea	se specify)		
d.	First Name	Kathryn	Last Name	Matos
e.	E-mail Address	kmatos@sibfl.net		
f.	Phone Number	(305)7921811		
Lo	bbyist Contact I	nformation		
a.	Name	Ron Book		
b.	Firm Name	Ronald L. Book, PA		
c.	E-mail Address	ron@rlbookpa.com		

Ext.

d. Phone Number (305)9351866



# Please complete the questions below for Water Projects only.

# 16. Have you applied for alternative state funding? Waste Water Revolving Loan Drinking Water Revolving Loan Small Community Wastewater Treatment Grant Other (please specify) X 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)

- X N/A
- 18. What is the status of construction?

Not yet started.

19. What percentage of the construction has been completed?

0%

20. What is the estimated completion date of construction?

01/31/2021

The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.