Project Title: Port St. Joe - First Street Sewer Lift Station

Senate Sponsor: Bill Montford

Date of Request: 10/08/2019

Project/Program Description:
Repair of Sanitary Sewer System after Hurricane Michael.

State Agency to receive requested funds: Department of Environmental Protection

State Agency contacted?: Yes

Amount of the Nonrecurring Request for Fiscal Year 2020-2021

<table>
<thead>
<tr>
<th>Type of Funding</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operations</td>
<td>000</td>
</tr>
<tr>
<td>Fixed Capital Outlay</td>
<td>1,000,000</td>
</tr>
<tr>
<td><strong>Total State Funds Requested</strong></td>
<td>1,000,000</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Type of Funding</th>
<th>Amount</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total State Funds Requested (from question #6)</td>
<td>1000000</td>
<td>100.0 %</td>
</tr>
<tr>
<td><strong>Matching Funds</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Federal</td>
<td>00</td>
<td>0 %</td>
</tr>
<tr>
<td>State (excluding the amount of this request)</td>
<td>00</td>
<td>0 %</td>
</tr>
<tr>
<td>Local</td>
<td>00</td>
<td>0 %</td>
</tr>
<tr>
<td>Other</td>
<td>00</td>
<td>0 %</td>
</tr>
<tr>
<td><strong>Total Project Costs for Fiscal Year 2020-2021</strong></td>
<td>1,000,000</td>
<td>100 %</td>
</tr>
</tbody>
</table>

Has this project previously received state funding? Yes

Fiscal Year (yyyy-yy) | Amount Recurring | Amount Nonrecurring | Specific Appropriation # | Vetoed |
|----------------------|------------------|--------------------|-------------------------|--------|

Is future-year funding likely to be requested? Yes
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>
<tr>
<td>Consultants/Contracted Services/Study</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Operational Costs: Other</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Salary and Benefits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Expense/Equipment/Travel/Supplies/Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Consultants/Contracted Services/Study</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Fixed Capital Construction/Major Renovation:</strong></td>
<td>Land - $50,000 Engineering - $80,000 Construction - $870,000</td>
<td>1,000,000</td>
</tr>
<tr>
<td><strong>Total State Funds Requested (must equal total from question #6)</strong></td>
<td></td>
<td>1,000,000</td>
</tr>
</tbody>
</table>
The Florida Senate
Local Funding Initiative Request
Fiscal Year 2020-2021

11. Program Performance
   a. What specific purpose or goal will be achieved by the funds requested?
      Reduction of backups and sewer spills.
   
   b. What activities and services will be provided to meet the intended purpose of these funds?
      Treatment of Sewer and reduction of environmental hazards to St. Joseph Bay.
   
   c. What direct services will be provided to citizens by the appropriation project?
      Treatment of Sewer.
   
   d. Who is the target population served by this project? How many individuals are expected to be served?
      90% of City residents, approximately 3,000.
   
   e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?
      Properly working 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?
      $50 per day.
12. **The owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.**

City of Port St. Joe.

13. **Requestor Contact Information**
   a. First Name: Charlotte  
   b. Organization: City of Port St. Joe  
   c. E-mail Address: cpierce@psj.fl.gov  
   d. Phone Number: (850)229-8261  

14. **Recipient Contact Information**
   a. Organization: City of Port St. Joe  
   b. Municipality and County: Gulf  
   c. Organization Type:
      - [ ] For-profit Entity  
      - [ ] Non-Profit 501(c) (3)  
      - [ ] Non-Profit 501(c) (4)  
      - [x] Local Entity  
      - [ ] University or College  
      - [ ] Other (please specify)  
   d. First Name: Jim  
   e. E-mail Address: janderson@psj.fl.gov  
   f. Phone Number: (850)2298261  

15. **Lobbyist Contact Information**
   a. Name: None  
   b. Firm Name: None  
   c. E-mail Address:  
   d. Phone Number:  Ext.  

Page 4 of 5
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)
   - 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?**
    - Currently evaluating the proposed site.

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

20. **What is the estimated completion date of construction?**
    - 04/30/2021

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