

LFIR # 1435

| 1. Project Title         | Monticello Water Losses-Water Conservation |                 |   |                       |  |
|--------------------------|--|-----------------|---|-----------------------|--|
| 2. Senate Sponsor        | Loranne Ausley                             |                 |   |                       |  |
| 3. Date of Request       | 02/05/2021                                 |                 |   |                       |  |
| 4. Project/Program De    | escription                                 |                 |   |                       |  |
| and leaking water lin    | ies owned, operated                        | d and maintaine | (approximately 200,000<br>d by the City of Montice<br>nanticipated breaks and | llo. The project will | promote water                                |
| 5. State Agency to red   | ceive requested fur                        | nds Depart      | ment of Environmental   | Protection            |  |
| State Agency conta       | cted? No                                   |                 |   |                       |  |
| 6. Amount of the Noni    | ecurring Request                           | for Fiscal Year |   |                       | 1  |
| Type of Funding          |  |                 | Amo   | ount                  | 1  |
| Operations               |  |                 |   | 0                     | 1  |
| Fixed Capital Outlay     |  |                 |   | 150,000               | 1  |
| Total State Funds I      | Requested                                  |                 |   | 150,000               | 1  |
| . Total Project Cost f   | or Fiscal Year 2021                        | I-2022 (includi | ng matching funds ava   | ailable for this proj | ect)   |
| Type of Funding          |  |                 | Amount  | Percentage            | 1  |
| Total State Funds R      | equested (from que:                        | stion #6)       | 150,000   | 100%                  | <u>,                                    </u> |
| Matching Funds           |  |                 |   |                       |  |
| Federal                  |  |                 | 0   | 0%                    | 7  |
| State (excluding the     | amount of this requ                        | est)            | 0   | 0%                    | 1  |
| Local                    |  |                 | 0   | 0%                    | 7  |
| Other                    |  |                 | 0   | 0%                    | -  |
| Total Project Costs      | for Fiscal Year 20                         | 21-2022         | 150,000   | 100%                  |  |
| 3. Has this project pro  | eviously received s                        | state funding?  | Yes   |                       |  |
| Fiscal Year              | Amount                                     |                 | Specific  | Vetoed                |  |
| (уууу-уу)                | Recurring                                  | Nonrecurring    | Appropriation #   |                       |  |
| 2016-17                  | 0  | 270,0           | 000   | No                    |  |
| 9. Is future funding lik | cely to be requeste                        | d?              | Yes   |                       |  |
| a. If yes, indicate n    | onrecurring amour                          | nt per year.    | 150,000   |                       |  |
|                          | _  |                 | n lieu of state funding   |                       | -  |
| CWSRF (Clean Wa          | ater State Revolving                       | Fund)           |   |                       | ]  |
| 40 Haa 4ba               |  | 4               | fordered and television 1   | -4-44-44-00/25        | 40 man day: 1-0                              |
| IU. Has the entity req   | uesting this projec                        | t received any  | federal assistance rel  | ated to the COVID-    | 19 pandemic?                                 |
| No                       |  |                 |   |                       |  |
| If yes, indicate the     | amount of funds re                         | eceived and w   | hat the funds were use  | ed for.               |  |



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

| Spending Category   | Description  | Amount  |  |  |
|---|--|---------|--|--|
| Administrative Costs:   |  |         |  |  |
| Executive Director/Project Head Salary and Benefits                     |  | 0       |  |  |
| Other Salary and Benefits   |  | 0       |  |  |
| Expense/Equipment/Travel/Supplies/<br>Other                             |  | 0       |  |  |
| Consultants/Contracted<br>Services/Study                                |  | 0       |  |  |
| Operational Costs: Other  |  |         |  |  |
| Salary and Benefits   |  | 0       |  |  |
| Expense/Equipment/Travel/Supplies/<br>Other                             |  | 0       |  |  |
| Consultants/Contracted<br>Services/Study                                |  | 0       |  |  |
| Fixed Capital Construction/Major Renovation:                            |  |         |  |  |
| Construction/Renovation/Land/<br>Planning Engineering                   | ARCHITECTURAL, ENGINEERING AND CONSTRUCTION SERVICES | 150,000 |  |  |
| Total State Funds Requested (must equal total from question #6) 150,000 |  |         |  |  |

#### 12. Program Performance

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

This project will result in conservation of potable water and improve the overall system efficiency. Additionally, current adverse water resource impacts will be reduced by replacing the leaking water mains. Leaking water mains provide the potential for compromise of water quality in the system that may impact public health and safety.

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

Engineering and construction of the waterlines.

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

The project will ensure a safe supply of potable water to the citizens of Monticello as well as a more efficient system.

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

This project will provide services to the entire City of Monticello. The city's population is 2,425 citizens.

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

This project will reduce water losses by approximately 200,000 gallons per month. The water losses will be measured by monthly operating reports.

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 the contract?

The Auditor General audits for both the City and State agencies.

13. 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.



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|      |    |     |          |



#### **The Florida Senate**

### Local Funding Initiative Request Fiscal Year 2021-2022

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| 14. Requestor Contact Information |                                   |                    |       |  |  |  |
|-----------------------------------|-----------------------------------|--------------------|-------|--|--|--|
| a. First Name                     | Raymond                           | Last Name          | Clark |  |  |  |
| b. Organization                   | City on Monticello                | City on Monticello |       |  |  |  |
| c. E-mail Address                 | rclark@mymonticello.net           |                    |       |  |  |  |
| d. Phone Number                   | (850)342-0293                     | Ext.               |       |  |  |  |
| 15. Recipient Contac              | 15. Recipient Contact Information |                    |       |  |  |  |
| a. Organization                   | City on Monticello                |                    |       |  |  |  |
| b. Municipality ar                | nd County Jefferson               |                    |       |  |  |  |
| c. Organization T                 | ype                               |                    |       |  |  |  |
| □For Profit Entit                 | У                                 |                    |       |  |  |  |
| □Non Profit 501                   | (c)(3)                            | c)(3)              |       |  |  |  |
| □Non Profit 501                   | c)(4)                             |                    |       |  |  |  |
| ☑Local Entity                     |                                   |                    |       |  |  |  |
| □University or C                  | ollege                            |                    |       |  |  |  |
| □Other (please                    | pecify)                           |                    |       |  |  |  |
| d. First Name                     | Raymond                           | Last Name          | Clark |  |  |  |
| e. E-mail Address                 | rclark@mymonticello.net           |                    |       |  |  |  |
| f. Phone Number                   | (850)342-0293                     |                    |       |  |  |  |
| 16. Lobbyist Contact Information  |                                   |                    |       |  |  |  |
| a. Name                           | None                              |                    |       |  |  |  |
| b. Firm Name                      | None                              |                    |       |  |  |  |
| c. E-mail Address                 |                                   |                    |       |  |  |  |
| d. Phone Number                   |                                   |                    |       |  |  |  |



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#### Please complete the questions below for Water Projects only.

| 17. | 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  |
| 18. | 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  |
| 19. | What is the status of construction?                          |
|     | Partially complete, awaiting funds                           |
| 20. | What percentage of the construction has been completed?      |
|     | 25%  |
| 21. | What is the estimated completion date of construction?       |
|     | 12/30/2022   |