

LFIR # 1440

1. Project Title	Apalachicola IGA Lift S	Station Impro	vement and Repair Pi	roject				
2. Senate Sponsor	Loranne Ausley							
3. Date of Request	02/05/2021							
4. Project/Program D	escription							
problems, and issue	Station serves greater Apa es with the electric control eive uninterrupted sewer s	panel. This a	ppropriation would m	ake critically needed	d repairs so that citizens			
5. State Agency to re	S. State Agency to receive requested funds Depar			tment of Environmental Protection				
State Agency cont	acted? No							
6. Amount of the Non	recurring Request for Fi	scal Year 20	21-2022					
Type of Funding			Amo	unt				
Operations				0				
Fixed Capital Outla	Fixed Capital Outlay			50,000				
Total State Funds	Requested			50,000	I			
7. Total Project Cost	for Fiscal Year 2021-202	2 (including	matching funds ava	ilable for this proje	ect)			
Type of Funding	Type of Funding			Percentage				
	Requested (from question a	#6)	50,000	67%				
Matching Funds								
Federal			0	0%				
State (excluding the amount of this request)			0 35,000	0%				
Local Other			25,000 0	33% 0%				
	s for Fiscal Year 2021-20	22	75,000	100%				
	eviously received state f	·	No					
	•			Water I				
Fiscal Year (yyyy-yy)	Amount Recurring No	nrecurring	Specific Appropriation #	Vetoed				
(3333 337	Recuiring	inecurring						
9. Is future funding li	kely to be requested?		No	,				
•		· voor						
-	nonrecurring amount per	-						
b. Describe the so	urce of funding that can	be used in I	ieu of state funding.		1			
10. Has the entity red	questing this project rece	eived anv fed	deral assistance rela	ted to the COVID-	19 pandemic?			
No No	, 5 - 1, -,				•			
		_						
If yes, indicate the	e amount of funds receiv	ed and what	the funds were use	d 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/ Other		0
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering	This important Lift station serves greater Apalachicola. Currently it has severe corrosion on pipes and guardrails, infiltration problems, and issues with the electric control panel. This project would make critically needed repairs and will add electronic monitoring stations to 15 vacuum sewer pits in that area.	50,000
Total State Funds Requested (m	ust equal total from question #6)	50,000

12. Program Performance

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

This appropriation would make critically needed repairs so that citizens and businesses receive uninterrupted sewer service, and add electronic monitoring stations to (15) vacuum sewer pits in that area.

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

The City of Apalachicola will provide a \$ 25,000 grant match.

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

With improvements to the lift station, citizens and businesses will receive better service.

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

The target population is the 2,450 residents of Apalachicola and its tens of thousands of annual visitors.

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

Improved sewer service to the citizens of Apalachicola and visitors to the area.

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?

Any additional penalties would be imposed by the City of Apalachicola.

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 lift station is owned by the City of Apalachicola.



The Florida Senate Local Funding Initiative Request

Fiscal Year 2021-2022

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14.	. Requestor Contact	Informat	ion			
	a. First Name	Kevin		Last Name	Begos	
	b. Organization	City of Apalachicola				
	c. E-mail Address	kbegos@	kbegos@cityofapalachicola.com			
	d. Phone Number	(850)653-9319 Ext.				
15.	. Recipient Contact	Information				
	a. Organization	City of Ap	palachicola			
	b. Municipality and	l County	Franklin			
	c. Organization Ty	pe				
	□For Profit Entity					
	□Non Profit 501(d)(3)				
	□Non Profit 501(c	2)(4)				
	□Local Entity					
	□University or College					
	☑Other (please sp	☑Other (please specify) Municipality				
	d. First Name	Kevin		Last Name	Begos	
	e. E-mail Address kbegos@cityofapalachicola.com					
	f. Phone Number	(850)653-9319				
16.	16. Lobbyist Contact Information					
	a. Name	None				
	b. Firm Name	None				
	c. E-mail Address					
	d. Phone Number	per				



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Please complete the questions below for Water Projects only.

17. I	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?
	Not started yet
20. \	What percentage of the construction has been completed?
	0%
21. \	What is the estimated completion date of construction?
	The City estimates construction will take one year from the receipt of funding.