1. Project Title
EVERGLADES CITY WASTEWATER TREATMENT FACILITY REPLACEMENT

2. Senate Sponsor
Kathleen Passidomo

3. Date of Request
02/12/2021

4. Project/Program Description
THE CITY’S EXISTING WASTEWATER TREATMENT FACILITY IS AT THE END OF ITS USEFUL LIFE, AND IS DAMAGED, MALFUNCTIONING, AND IN VERY POOR CONDITION. THE LACK OF REDUNDANCY, ADVANCED LEVEL OF CORROSION, UNDERSIZED AND INOPERATIVE EQUIPMENT COULD AT ANY MOMENT RESULT IN A COMPLETE FAILURE OF WASTEWATER TREATMENT CAPABILITY AND POTENTIAL WASTEWATER SPILL. THE FACILITY NEEDS A COMPLETE REPLACEMENT OF ALL SYSTEMS TO GUARANTEE COMPLIANCE WITH FDEP RULES. THE FACILITY IS LOCATED IN THE ENVIRONMENTALLY SENSITIVE TEN THOUSAND ISLANDS NATIONAL WILDLIFE REFUGE, EVERGLADES NATIONAL PARK AND THE BIG CYPRESS NATIONAL PRESERVE. THE PROPOSED PROJECT CONSISTS OF CONSTRUCTING A NEW TREATMENT FACILITY AND DEMOLISHING THE EXISTING FACILITY.

5. State Agency to receive requested funds
Department of Environmental Protection

6. Amount of the Nonrecurring Request for Fiscal Year 2021-2022

<table>
<thead>
<tr>
<th>Type of Funding</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operations</td>
<td>0</td>
</tr>
<tr>
<td>Fixed Capital Outlay</td>
<td>4,340,160</td>
</tr>
</tbody>
</table>

Total State Funds Requested: 4,340,160

7. Total Project Cost for Fiscal Year 2021-2022 (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>4,340,160</td>
<td>90%</td>
</tr>
<tr>
<td>Matching Funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Federal</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>State (excluding the amount of this request)</td>
<td>500,000</td>
<td>10%</td>
</tr>
<tr>
<td>Local</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0%</td>
</tr>
</tbody>
</table>

Total Project Costs for Fiscal Year 2021-2022: 4,840,160

8. Has this project previously received state funding?
No

9. Is future funding likely to be requested?
No

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.
10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

No

If yes, indicate the amount of funds received and what the funds were used for.

11. 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>0</td>
</tr>
<tr>
<td>Other Salary and Benefits</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Expense/Equipment/Travel/Supplies/Other</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Consultants/Contracted Services/Study</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td><strong>Operational Costs: Other</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Salary and Benefits</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Expense/Equipment/Travel/Supplies/Other</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Consultants/Contracted Services/Study</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td><strong>Fixed Capital Construction/Major Renovation:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Construction/Renovation/Land/Planning Engineering</td>
<td>CONSTRUCTION OF A NEW WASTEWATER TREATMENT FACILITY</td>
<td>4,340,160</td>
</tr>
</tbody>
</table>

Total State Funds Requested (must equal total from question #6) 4,340,160

12. Program Performance

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

COMPLETE REPLACEMENT OF THE EXISTING WASTEWATER TREATMENT FACILITY TO REDUCE THE RISKS ASSOCIATED WITH THE EXISTING FACILITY AND GUARANTEE COMPLIANCE WITH FDEP RULES AND REGULATIONS. ELIMINATE THE COMBINED DOMESTIC/COMMERCIAL WASTEWATER DISCHARGE TO THE ENVIRONMENTALLY SENSITIVE TEN THOUSAND ISLANDS WILDLIFE REFUGE, EVERGLADES NATIONAL PARK AND THE BIG CYPRESS NATIONAL PRESERVE.

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

PROCUREMENT AND CONSTRUCTION COSTS ASSOCIATED WITH THE REPLACEMENT OF THE FACILITY TO MEET FDEP RULES AND IMPROVE THE OVERALL RELIABILITY OF THE WASTEWATER TREATMENT PLANT.

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

ADEQUATE, RELIABLE, AND SAFE WASTEWATER TREATMENT SERVICE FOR THE COMMUNITY. THIS COMMUNITY RELIES ON THE NATURAL RESOURCES (TOURISM, FISHING, ETC.) OF THE EVERGLADES NATIONAL PARK AND BIG CYPRESS NATIONAL PRESERVE.

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

UP TO 1,300 RESIDENT/BUSINESS USERS IN A RURAL, FINANCIALLY DISADVANTAGED AREA THAT ARE CURRENTLY UTILIZING THE AILING SYSTEM.

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

$1,000 PER DAY UNDER EXISTING FDEP FINAL CONSENT ORDER.

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.

CITY OF EVERGLADES CITY
14. Requestor Contact Information
   a. First Name  HOWELL  Last Name  GRIMM JR.
   b. Organization  CITY OF EVERGLADES CITY
   c. E-mail Address  MAYORGRIMM@CITYOFEVERGLADES.ORG
   d. Phone Number  (239)289-3613  Ext.

15. Recipient Contact Information
   a. Organization  CITY OF EVERGLADES CITY
   b. Municipality and County  Collier
   c. Organization Type
      - ☐ For Profit Entity
      - ☐ Non Profit 501(c)(3)
      - ☐ Non Profit 501(c)(4)
      - ☑ Local Entity
      - ☐ University or College
      - ☐ Other (please specify)
   d. First Name  HOWELL  Last Name  GRIMM JR.
   e. E-mail Address  MAYORGRIMM@CITYOFEVERGLADES.ORG
   f. Phone Number  (239)289-3613

16. Lobbyist Contact Information
   a. Name  ZACHARY LOMBARDO
   b. Firm Name  WOODWARD, PIRES & LOMBARDO, P.A.
   c. E-mail Address  ZLOMBARDO@WPL-LEGAL.COM
   d. Phone Number  (239)649-6555
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
   - [x] Other (please specify) DEO- CDBG-DR
   - [ ] N/A

18. What is the population economic status?
   - [x] Financially Disadvantaged Community (ch. 62-552, F.A.C)
   - [x] Financially Disadvantaged Municipality (ch. 62-552, F.A.C)
   - [x] Rural Area of Economic Concern
   - [x] Rural Area of Opportunity (s. 288.0656, Florida Statutes)
   - [ ] N/A

19. What is the status of construction?
   - Engineering is currently ongoing. Construction will start on or before 07/2022.

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

21. What is the estimated completion date of construction?
    - 7/24/2023