



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2021-2022

LFIR # 2093

1. Project Title
2. Senate Sponsor
3. Date of Request

**4. Project/Program Description**

Sand and Grit Sand and Grit Removal Grants for Wastewater Treatment Facilities This request is for continuation funding of a statewide DEP administered grants program from the Federal Grants Trust Fund (not General Revenue) which allows publicly owned utilities to remove sand and grit from wastewater treatment plants and associated collection systems which remain in operation. Distribution is on a first-come, first-serve basis with local matches, except that waiver of the match is allowed for publicly owned and utilities in rural counties, and impoverished counties and municipalities.

5. State Agency to receive requested funds

State Agency contacted?  Yes

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

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	2,000,000
<b>Total State Funds Requested</b>	<b>2,000,000</b>

**7. Total Project Cost for Fiscal Year 2021-2022 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	2,000,000	100%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2021-2022</b>	<b>2,000,000</b>	<b>100%</b>

8. Has this project previously received state funding?  Yes

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2018-19	2,000,000		1600	No

9. Is future funding likely to be requested?  Yes
- a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

NA

**10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?**

No



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2021-2022

LFIR # 2093

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**

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	After DEP selects local publicly owned utilities for grants, the publicly owned utilities will conduct public procurements for contracted sand/grit removal services. (Grant amounts will vary based on differing sizes, needs.)	2,000,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>2,000,000</b>

**12. Program Performance**

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

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

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

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

**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?**



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2021-2022

LFIR # 2093

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.

All facilities eligible are publicly owned.



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2021-2022

LFIR # 2093

#### 14. Requestor Contact Information

a. First Name  Last Name

b. Organization

c. E-mail Address

d. Phone Number  Ext.

#### 15. Recipient Contact Information

a. Organization

b. Municipality and County

#### c. Organization Type

- For Profit Entity
- Non Profit 501(c)(3)
- Non Profit 501(c)(4)
- Local Entity
- University or College
- Other (please specify) Over 300 Florida Publicly Owned Utilities

d. First Name  Last Name

e. E-mail Address

f. Phone Number

#### 16. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number