

LFIR # 1536

| 1. Project Title Ormond Beach UV Disinfection | n Conversion |
|---|--------------|
|---|--------------|

2. Senate Sponsor Travis Hutson

3. Date of Request 10/25/2021

4. Project/Program Description

The advanced wastewater treatment process at the City of Ormond Beach's water Reclamation Facility currently utilizes sodium hypochlorite to provide disinfection within the chlorine contact chambers. The use of chlorine requires operators to dose the treatment process with a Liquid Chlorine, a hazardous chemical that must be constantly monitored and adjusted to ensure disinfection of the process stream and minimization of disinfection by products. Recent volatility in the chemical market has had dramatic effect on the operating cost of a chlorine system. This project proposes the conversion of the existing chlorine contact chambers to UV treatment through the installation of an ultraviolet light treatment system. This system provides a reliable disinfection of waste effluent greatly reducing the use of chemicals treating the effluent later distributed as reclaimed water to City customers.

5. State Agency to receive requested funds

Department of Environmental Protection

State Agency contacted? No

6. Amount of the Nonrecurring Request for Fiscal Year 2022-2023

| Type of Funding | Amount |
|-----------------------------|-----------|
| Operations | 0 |
| Fixed Capital Outlay | 1,500,000 |
| Total State Funds Requested | 1,500,000 |

7. Total Project Cost for Fiscal Year 2022-2023 (including matching funds available for this project)

| Type of Funding | Amount | Percentage |
|--|-----------|------------|
| Total State Funds Requested (from question #6) | 1,500,000 | 50% |
| Matching Funds | | |
| Federal | 0 | 0% |
| State (excluding the amount of this request) | 1,500,000 | 50% |
| Local | 0 | 0% |
| Other | 0 | 0% |
| Total Project Costs for Fiscal Year 2022-2023 | 3,000,000 | 100% |

8. Has this project previously received state funding?

| Fiscal Year | Amount | | Specific | Vetoed | |
|-------------|-----------|--------------|-----------------|--------|--|
| (уууу-уу) | Recurring | Nonrecurring | Appropriation # | | |
| | | | | | |

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?



Yes

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

\$4,900,000 from the Federal government for COVID-19 pandemic. If measurements are not met, funds should be returned

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/Major Renovation: | | | | |
| Construction/Renovation/Land/ Planning Engineering | Planning, engineering and construction of UV Disinfection System. | 1,500,000 | | |
| Total State Funds Requested (must equal total from question #6) 1,500,000 | | | | |

12. Program Performance

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

Improved wastewater treatment.

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

Upgraded process for the disinfection of treated wastewater effluent.

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

None

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

Citywide and adjacent communities. 40,000 plus individuals 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?

Significant reduction of chemical use for safer and less expensive treatment. Outcome measured by testing chemical levels.

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?

If measurements are not met, funds should be returned.



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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 Ormond Beach



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14. Requestor Contact Information

| | a. First Name | Joyce | | Last Name | Shanahan | |
|----------------------------------|--------------------------|----------------------------------|--|-----------|------------|--|
| | b. Organization | City of Ormond Beach | | | | |
| | c. E-mail Address | shanahan@ormondbeach.org | | | | |
| | d. Phone Number | (386)676 | | | | |
| 15. | Recipient Contact | ntact Information | | | | |
| | a. Organization | City of Ormond Beach | | | | |
| | b. Municipality and | d County Volusia | | | | |
| | c. Organization Ty | nization Type | | | | |
| | □For Profit Entity | Intity | | | | |
| | □Non Profit 501(c | c)(3) | | | | |
| | □Non Profit 501(c | c)(4) | | | | |
| | ☑Local Entity | | | | | |
| | □University or Co | bllege | | | | |
| | □Other (please sp | specify) | | | | |
| | d. First Name | Brian | | Last Name | Rademacher | |
| | e. E-mail Address | brian.rademacher@ormondbeach.org | | | | |
| | f. Phone Number | (386)676-3266 | | | | |
| 16. Lobbyist Contact Information | | | | | | |
| | a. Name | Douglas S. Bell | | | | |
| | b. Firm Name | Metz Husband & Daughton PA | | | | |
| | c. E-mail Address | doug.bell@mhdfirm.com | | | | |
| | d. Phone Number | (850)205-9000 | | | | |



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?

Planning phase of construction / construction is not ready

20. What percentage of the construction has been completed?

zero

21. What is the estimated completion date of construction?

01/01/2024