

LFIR # 1580

| 1. Project Title | Mayo Lift Station & Sanitary Sewer Improvements |
|------------------|---|
| | |

2. Senate Sponsor Jennifer Bradley

3. Date of Request 11/28/2021

4. Project/Program Description

To survey and map the existing wastewater collection system, prepare a utility infrastructure assessment report, engineer and permit the rehabilitation of five (5) lift stations, and provide Construction Engineering & Inspection throughout the duration of the project. This request will put the Town in a position to address functional issues and environmental concerns within its aging wastewater collection system.

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 | 484,403 | |
| Fixed Capital Outlay | 1,408,150 | |
| Total State Funds Requested | 1,892,553 | |

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) | 1,892,553 | 100% |
| Matching Funds | | |
| Federal | 0 | 0% |
| State (excluding the amount of this request) | 0 | 0% |
| Local | 0 | 0% |
| Other | 0 | 0% |
| Total Project Costs for Fiscal Year 2022-2023 | 1,892,553 | 100% |

8. Has this project previously received state funding? No

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

9. Is future funding likely to be requested?

Yes

500,000

a. If yes, indicate nonrecurring amount per year.

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

It is difficult for the Town to seek other funding sources due to the match requirements. State Revolving Fund, USDA funding, Alternative Water Source funding through the Water Management Disitrict and others were explored.

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.

N/A

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

| Spending Category | Description | |
|---|--|-----------|
| 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 | Survey and map the existing wastewater collection system, prepare a utility infrastructure assessment report, engineer and permit the rehabilitation of five (5) lift stations, and provide Construction Engineering & Inspection throughout the duration of the construction project. | 484,403 |
| Fixed Capital Construction/Maj | or Renovation: | |
| Construction/Renovation/Land/ Planning Engineering | Rehabilitate all five (5) lift stations. Complete and operational with all electrical, water service, pumps, valve, fittings, wet well lining, valve boxes, etc., per FDEP regulatory requirements. | 1,408,150 |
| Total State Funds Requested (r | nust equal total from question #6) | 1,892,553 |

12. Program Performance

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

There are several goals that will be achieved that will greatly benefit the environment:(1) Surveying, mapping, and assessing existing wastewater collection system will identify areas of critical concern. The Town can then create a Capital Improvement Plan for sewer. (2) The existing lift stations do not have back-up generators, redundant pumps, nor water supply. Inclement weather puts these stations out of commission; causing needed by-pass pumping and spills. Rehabilitation will alleviate. (3) Maintenance and Operational costs are expected to decrease with new efficient and reliable equipment.

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

(1) Survey and Engineering will deliverable the Wastewater Collection System Assessment Report identifying all areas of critical concern. Engineering will create, with input from the Town, a Capital Improvement Plan (CIP) that can be used to fund additional improvements. (2) The Town will advertise and hire Contractor to rehabilitate its five lift stations which will lower the cost of operation and maintenance as well as reduce negative impacts to the environment by reducing/eliminating spills. During permitting, Engineering will prepare an Operation and Maintenance Manual for the lift stations.

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

Citizens of Mayo will be relieved from the odors, health hazards, and other illnesses associated with effluent spills and/or overflows. They will be able to shower and flush toilets during and after large storm events.

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



The Town of Mayo has approximately 1,500 citizens. The collection system also serves several restaurants and commercial businesses which serve citizens from Lafayette County. The Town of Mayo is the only city in Lafayette County; therefore, it can be expected to serve a portion of the approximate 9,000 County residents patronizing commercial, industrial, and restaurant uses within the Town.

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 benefit the environment by reducing/eliminating lift station overflows/spills. The operation and maintenance costs will be reduced due to the efficiency and effectiveness of the new equipment. A plan will be formulated to address issues/concerns identified in the Utility Assessment Report.

Methodology of Measurement: Overflows/spills are required to be reported to FDEP. These reports can be quantified. Operation and maintenance cost savings will be realized during the annual budget session. The CIP will outline additional work needed to repair other leaking, broken, and damaged parts of the system.

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 contracting agency can require the Town to repay the funds as defined by an agreed upon payment plan. All funds that are not used or remain unused at the time shall be returned.

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.

The Town of Mayo own and maintain the wastewater collection system and treatment plant.



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14. Requestor Contact Information

| | a. First Name | William | Last Name | Menadier, PE | |
|----------------------------------|---------------------------|---------------------------------|-----------|--------------|--|
| | b. Organization | Dewberry Engineers Inc | | | |
| | c. E-mail Address | wmenadier@dewberry.com | | | |
| | d. Phone Number | (850)974-0162 | Ext. | | |
| 15. | Recipient Contact | Information | | | |
| | a. Organization | Town of Mayo | | | |
| | b. Municipality and | nicipality and County Lafayette | | | |
| | c. Organization Ty | pe | | | |
| | □For Profit Entity | | | | |
| | □Non Profit 501(c)(3) | | | | |
| | □Non Profit 501(c | INon Profit 501(c)(4) | | | |
| | ☑Local Entity | al Entity | | | |
| | □University or Co | or College | | | |
| | □Other (please specify) | | | | |
| | d. First Name | Wayne | Last Name | Hamlin | |
| | e. E-mail Address | | | | |
| | f. Phone Number | | | | |
| 16. Lobbyist Contact Information | | | | | |
| | a. Name Jennifer K. Kelly | | | | |
| | b. Firm Name | Foley & Lardner LLP | | | |
| | c. E-mail Address | s jkelly@foley.com | | | |
| | d. Phone Number | (850)933-2822 | | | |



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) No, the Town cannot afford match req
- D 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)
- D N/A

19. What is the status of construction?

No construction, project is contingent upon funding

20. What percentage of the construction has been completed?

0

21. What is the estimated completion date of construction?

unknown