

The Florida Senate Local Funding Initiative Request

Fiscal Year 2022-2023

LFIR # 1630

1. Project Title	North Ridge Trail								
2. Senate Sponsor	Danny Burgess								
3. Date of Request	10/27/2021								
4. Project/Program De	escription								
Request funding for	the construction of	a new 2-lane i	road f	rom Deen	Still Road	to Sand Mine Road	d in Polk County Florida.		
5. State Agency to red	eive requested fu	nds Depa	artme	ent of Trans	portation				
State Agency conta	cted? No								
6. Amount of the Nonr	ecurring Request	for Fiscal Yea	r 202	22-2023					
Type of Funding				Amount					
Operations				0					
Fixed Capital Outlay				5,000,000					
Total State Funds F	Requested					5,000,000			
7. Total Project Cost fo	or Fiscal Year 202:	2-2023 (includ	lina r	natching f	unds avai	ilable for this proi	ect)		
-	51 1 100di 10di 202	2 2020 (1110144) 		
Type of Funding	a supporte d'Arrana supo	ation #C)		Amoun		Percentage			
Total State Funds Romatching Funds	equestea (from que	Stion #6)		5,	,000,000	100%			
Federal					0	0%			
State (excluding the amount of this request)					0	0%			
Local					0	0%			
Other					0	0%			
Total Project Costs	for Fiscal Year 20	22-2023		5	,000,000	100%			
10141110,001 00010	101110001100120				,000,000	10070	I		
8. Has this project pre	eviously received s	state funding?	?	Yes					
Fiscal Year	Amount			Specific		Vetoed			
(yyyy-yy)	Recurring	Nonrecurri	ng	Appropriation #	ation #				
2021-22	0	9,500	,000		1915A	No			
9. Is future funding lik	cely to be requeste	ed?		Yes					
a. If yes, indicate nonrecurring amount per year.				5,000,000					
b. Describe the sou	· ·				funding.				
Local government t									
<u> </u>]		
10. Has the entity requ	uesting this projec	t received an	y fed	eral assist	ance rela	ted to the COVID-	19 pandemic?		
Yes									
If yes, indicate the	amount of funds r	eceived and v	what	the funds	were use	d for.			
The Polk Board of Odisinfecting. DOJ Coto clean before using	OVID grant \$299,84	8 used for 2nd	126 r I set o	nillion - PP of bunker g	E, medica ear to hav	ll supplies, medical e an additional set			



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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/Major Renovation:						
Construction/Renovation/Land/ Planning Engineering	Construction through the competitive bid process.	5,000,000				
Total State Funds Requested (must equal total from question #6)						

12. Program Performance

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

Increase flow of traffic and relieve traffic congestion along US 27.

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

Perform a competitive bid process for the construction of this new road.

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

Improved traffic flow through a fast growing area of northeast Polk County.

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

Northeast Polk County is a gateway to and from Orlando, Florida. There is a high commuter population in this area. Adjacent cities population: Haines City: 28,061, Davenport: 7,309.

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

Increase mobility to the northeast corner of Polk County. Traffic counts will continue to be the measure of improvement and outcome.

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?

Return of funding if not used within the proposed agreement time.

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.

This would be a county road. Polk County Board of County Commissioners will be the entity responsible for this road.



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14. Reque	stor Contact	Informati	ion						
a. Firs	t Name	Ryan		Last Name	Taylor				
b. Org	anization	Polk County Board of County Commissioners							
c. E-m	ail Address	ryantaylor@polk-county.net							
d. Pho	ne Number	(863)534-6475 Ext.							
15. Recipi	ent Contact	Informatio	on						
a. Org	anization	Polk County Board of County Commissioners							
b. Mur	nicipality and	d County Polk							
c. Organization Type									
□Fo	□For Profit Entity								
□No	on Profit 501(c)(3)								
□No	□Non Profit 501(c)(4)								
☑Lo	☑Local Entity								
□Un	□University or College								
□Other (please specify)									
d. Firs	t Name	Jay		Last Name	Jarvis				
e. E-m	ail Address	jayjarvis@polk-county.net							
f. Pho	ne Number								
16. Lobbyist Contact Information									
a. Nan	ne	Nicholas V. Iarossi							
b. Firn	n Name	Capital City Consulting LLC							
c. E-m	ail Address	nick@cccfla.com							
d. Pho	d. Phone Number (850)222-9075								