

LFIR # 1944

of

1. Project Title	Town of Hilliard	- 6th Street Paving	n Proiect			
•		Jan Janoor I aviing	,		I	
2. Senate Sponsor	Aaron Bean					
3. Date of Request	12/08/2021					
4. Project/Program De	escription					
Hilliard. The propose disabilities and woul	ed paving project w d lead to an expan	ould allow for the c sion of local jobs a	development of afford	dable housing for ser to work closer to hor	ne. The project would	
5. State Agency to red	ceive requested fu	unds Departr	nent of Transportatio	n		
State Agency conta	cted? Yes					
		to Final Vary	000 0000			
6. Amount of the Noni	recurring Reques	TOT FISCAL YEAR 2	022-2023		1	
Type of Funding			An	nount		
Operations  Fixed Capital Outland	,			175 000	=	
Fixed Capital Outlay  Total State Funds I				175,000 1 <b>75,000</b>		
Total Otate I ulius I	requesteu			173,000	ш	
7. Total Project Cost f	or Fiscal Year 202	22-2023 (including	matching funds av	ailable for this proj	ject)	
Type of Funding			Amount	Percentage	]	
Total State Funds R	equested (from qu	estion #6)	175,000	100%	<u>,                                      </u>	
Matching Funds						
Federal	Federal			0%	<u>,                                     </u>	
State (excluding the	amount of this req	uest)	(	0%	1	
Local			(	0%	<u>,                                    </u>	
Other			(	0%	<u>,                                    </u>	
<b>Total Project Costs</b>	for Fiscal Year 2	022-2023	175,000	100%		
8. Has this project pre	eviously received	state funding?	No			
Fiscal Year	Amount		Specific	Vetoed	1	
(уууу-уу)	Recurring	Nonrecurring	Appropriation #	10000		
					-	
9. Is future funding like	cely to be request	ed?	No			
a. If yes, indicate n	onrecurring amou	ınt per year.				
b. Describe the sou	arce of funding th	at can be used in	lieu of state fundin	a.		
10. Has the entity req	uesting this proje	ct received any fe	ederal assistance re	lated to the COVID-	-19 pandemic?	
No						
			44 4h a £ 4- :			
it yes, indicate the	amount of funds	received and wha	at the funds were us	sea tor.		



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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			
<b>Fixed Capital Construction/Majo</b>	r Renovation:				
Construction/Renovation/Land/ Planning Engineering	The paving of 6th Street is expected to require engineering and road paving and the installation of sidewalks to cover 375 feet to help ensure that the road meets municipal standards and allow for the proper management of traffic flow in and out of the targeted economic development zone for housing.	175,000			
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?

The Town of Hilliard will be able to pave 6th Street to municipal standards and this will allow for the expansion of economic development in the area that would generate additional affordable housing in the community. Dayspring Health is is property owner adjacent to 6th Street and has planned to develop a mixed-use planned unit development that would create affordable housing for seniors and adults with disabilities as well as workforce housing in this area. The 353 feet of paving would help ensure the safe egress and affordability.

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

The Town of Hilliard desires to expand employment and create local jobs for residents who reside in the town. The funds used to make the infrastructure improvements on 6th Street will help improve the economic development of the area that is expected to result in direct employment and indirect employment that will help improve the local economy. This road is adjacent to land parcels that will allow for commercial and residential development and will allow economic development to proceed, which is expected to create new jobs.

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

This project will improve the quality of life of citizens with additional road paving of what is at present a gravel road. This will improve quality of life by enhancing the area with sidewalks and will also allow for greater economic development inside the Town of Hilliard.

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

The 6th Street paving project will allow for economic development of affordable housing that will serve the needs of seniors and those with disabilities and will create new employment opportunities.

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



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The expected outcome is to have 375 feet of paved road and sidewalks along 6th Street east of US 1 in the Town of Hilliard.

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 town should have 18 months to complete the project as described. Standard contract penalties are sufficient.

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 Hilliard owns the street that will be paved, 6th Street.



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14.	Requestor Contact	Informat	ion			
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	c. E-mail Address	lpurvis@townofhilliard.com				
	d. Phone Number	(904)845-3555 <b>Ext</b> .				
15.	15. Recipient Contact Information					
	a. Organization	Town of Hiliard				
	b. Municipality and County Nassau					
	c. Organization Type					
	□For Profit Entity					
	□Non Profit 501(c	c)(3)				
	□Non Profit 501(d	c)(4)				
	☑Local Entity					
	□University or College					
	□Other (please specify)					
	d. First Name	Lisa		Last Name	Purvis	
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	f. Phone Number					
16.	16. Lobbyist Contact Information					
	a. Name	Douglas Arlington Holder Jr				
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