



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2022-2023

LFIR # 2373

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Road provides connectivity to over 40,000 people in Broward County and beyond. Connects over 4,000 local residents. Road serves residential, commercial, and low industrial facilities. The roadway provides the only other alternative to A1A as an evacuation route within its boundaries. The city's vision is to improve the existing drainage system, implement sea-level rising measures (i.e., valves, pumps, etc.), and prepare the roadway and neighborhood to withstand the impacts of future drainage events including King tides, etc. There are insufficient sidewalks to provide a safe passage for children and residents. The project will address sidewalk connectivity. Street lighting is lacking and the public has voiced their concerns for safety. The city has partnered with the Florida Power and Light (FPL) to replace old and outdated sodium halide fixtures with new, more efficient LED-based units. The new lights will provide better coverage. Lastly, roadway alignment is crucial for safety.

5. State Agency to receive requested funds

State Agency contacted?

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

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	950,000
<b>Total State Funds Requested</b>	<b>950,000</b>

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)	950,000	16%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	4,978,768	84%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2022-2023</b>	<b>5,928,768</b>	<b>100%</b>

8. Has this project previously received state funding?

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. Is future funding likely to be requested?

a. If yes, indicate nonrecurring amount per year.

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



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#### 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.

CARES Act - \$7,078,608.33 (COVID-19 testing/contact tracing, food program, housing support, payroll for public health and safety, PPE, small business assistance.)  
ARPA - \$12,847,029 (public health emergency response, vaccination incentive program, COVID-19 testing, rental assistance, water and sewer utility bill assistance, housing, small business assistance, small business relief, etc.)

#### 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	Construction of sea level rise (prevention and protection) elements; new sidewalk; roadway resurfacing and realignment (asphalt paving, striping, signage); new LED lights' required landscape.	950,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>950,000</b>

#### 12. Program Performance

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

Increase number of pedestrians walking in the area by providing adequate sidewalk facilities with total connectivity. Provide measures to protect from future sea level rising. Increase number of pedestrians walking in the area by providing adequate sidewalk facilities with total connectivity. Roadway and pedestrian safety will be targeted by increasing lighting coverage and roadway alignment.

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

Construction of new facilities including sea-level rising measures (i.e., valves, pumps, etc.); roadway reconstruction to realign travel lanes in each direction; construction of a new 6' wide sidewalk along the east side of the roadway; and installation of new Memphis Holophane light fixtures using LED technology.

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

The \$950,000.00 request will be strictly used to supplement and pay for construction costs.

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

Over 4,000 residents are affected and over 40,000 vehicles traverse the area served by the roadway connecting Atlantic Boulevard (south) with NE 14th Street Causeway (north).

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



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be measured?

Address future sea level rising impacts and improve localized drainage deficiencies in an area that's prone to flooding. Provide connectivity by adding missing pedestrian facilities, and realign roadway connecting two City bridges: Atlantic Boulevard Bridge and NE 14th Street Causeway Bridge.

**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 city will implement liquidated damages in the amount of \$1,000.00 per day. Standard penalties for the contract with the state 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.**

City of Pompano Beach



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#### 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)

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