

LFIR # 2655

Fiscal Year (yyyy-yy) 9. Is future funding lia. If yes, indicate i	Amount Recurring Nonrecur ikely to be requested? nonrecurring amount per year. ource of funding that can be use	Specific Appropriation #	Vetoed		
Total Project Cost 8. Has this project project project project (yyyy-yy) 9. Is future funding line	Amount Recurring Nonrecur ikely to be requested?	Specific Appropriation #	Vetoed		
Total Project Cost 8. Has this project project project project (yyyy-yy)	Amount Recurring Nonrecur	Specific Appropriation #	Vetoed		
Total Project Cost 8. Has this project Projec	reviously received state funding	Specific Appropriation #	Vetoed		
Total Project Cost 8. Has this project Projec	reviously received state funding	Specific Appropriation #	Vetoed		
Total Project Cost 8. Has this project Projec	reviously received state funding	Specific	Vetoed		
Total Project Cost		g? No			
	10 101 1 10001 1001 1001 1001				
	s for Fiscal Year 2022-2023	5,500,000	100%		
LOUI.		0	0%		
Local		3,500,000	64%		
	e amount of this request)	0	0%		
Federal		1,000,000	18%		
Matching Funds					
	Requested (from question #6)	1,000,000	18%		
7. Total Project Cost	for Fiscal Year 2022-2023 (inclu	uding matching funds avai	lable for this project)	
Total State Funds	Requested		1,000,000		
Fixed Capital Outla	у		1,000,000		
Operations			0		
Type of Funding		Amou	unt		
State Agency cont 6. Amount of the Nor	acted? No nrecurring Request for Fiscal Yo	ear 2022-2023			
5. State Agency to re	eceive requested funds De	epartment of Transportation			
accessibility for use bike/pedestrian ma businesses. This re	complish five main priorities: expanders of transit, bicycle, and pedestruster plan; enhanced public accessed evelopment will enhance the pribleza of Fort Myers Beach.	ian facilities; enhance opport sibility to the public beach: q	tunities consist with the enerate increased tou	e town's adopted rism for local	
4. Project/Program D	•				
3. Date of Request	01/26/2022				
	Kathleen Passidomo				
2. Senate Sponsor					
 Project Title Senate Sponsor 	Fort Myers Beach Times Squ	are Renovation			



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

\$23,629.75 on April 7, 2021 used for COVID-19 related expenses. ARPA funds – received \$1,770,000 to date and expect another \$1,770,000 in June of 2022. No funds have been spent as of yet, in pre-planning stages for expenditures.

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

Spending Category	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/Majo	r Renovation:			
Construction/Renovation/Land/ Planning Engineering	Multi-modal complete streets opportunities: including construction of sidewalks, ADA upgrades, transit/bus accessibility/lanes, bicycle lanes, and lighting	1,000,000		
Total State Funds Requested (must equal total from question #6) 1,000,000				

12. Program Performance

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

Redevelopment to the primary tourism commercial corridor within the economic center/pedestrian plaza of Fort Myers Beach. The project will accomplish five main priorities: expand multi-modal complete streets opportunities, increase safety and accessibility for users of transit, bicycle and pedestrian facilities; enhance opportunities consist with the town's adopted bike/pedestrian master plan; enhanced public accessibility to the public beach; generate increased tourism for local businesses.

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

Construction of multi-modal complete streets opportunities: including construction of sidewalks, ADA upgrades, transit/bus accessibility/lanes, bicycle lanes, and lighting.

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

Expand multi-modal complete streets opportunities, increase safety and accessibility for users of transit, bicycle and pedestrian facilities; enhance opportunities consist with the town's adopted bike/pedestrian master plan; enhanced public accessibility to the public beach; generate increased tourism for local businesses.

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

Residents and tourists to the area. Times Square is one of the most visited attractions in Lee County for tourism. The improvements will only provide more attraction to the area in conjunction with other private developments occurring.

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 enhancements will provide compliance with ADA and provide a safe pathway. Increase foot traffic and safety for pedestrians to access public transportation stops. Economic increases for businesses in the surrounding downtown area of Fort Myers Beach and increase of bed tax dollars by providing a clean and safe destination. Measured by meeting ADA requirements, by increased ridership, and increased bed tax dollars.

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?

Non-payment until contract parameters are met.

13.	The owners of the facility to receive, directly or indirectly, any fixed capital outlay fund	ling. Include the
	relationship between the owners of the facility and the entity.	_

Town of Fort Myers Beach.



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14. Red	questor Contact	Informat	ion					
a. F	irst Name	Roger		Last Name	Hernstadt			
b. C	Organization	Town of Fort Myers Beach						
c. E	-mail Address	roger@fmbgov.com						
d. F	Phone Number	(239)765-0202 Ext .						
15. Recipient Contact Information								
a. C	Organization	Town of F	ort Myers Beach	1				
b. N	flunicipality and	d County	Lee					
c. C	c. Organization Type							
	□For Profit Entity							
	□Non Profit 501(c)(3)							
	□Non Profit 501(c)(4)							
☑	☑Local Entity							
	☐University or College							
	Other (please sp	ecify)						
d. F	First Name	Chelsea		Last Name	O'Riley			
e. E	-mail Address	chelsea@	fmbgov.com		<u> </u>			
f. P	hone Number	(239)765-0202						
16 I oh	hvist Contact I							
	Debute Contact Information Name Ronald L. Book							
	irm Name		Book PA					
	-mail Address							
	Phone Number							