

The Florida Senate Local Funding Initiative Request Fiscal Year 2024-2025

LFIR # 1547

1. Project Title	City of Winter Park	Fairbanks & D	enning Intersection Impi	rovements	
2. Senate Sponsor	Jason Brodeur				
3. Date of Request	11/17/2023				
4. Project/Program D	escription				
The City currently hane to reduce the bublic partnerships eastbound (EB) left intersection and the Overall, this would	has a budgeted and accoption and accoption and the SB the for the developers to continuous at this interest corridor overall. It is the the area to the new corridor over all.	tive project at the nrough movement dedicate some I section. The W ext level and au	Denning Dr. is one of the his intersection to construent. Phase I. In addition and for public rights of war and EB left turn lanes gment the existing projection of the projec	uct a southbound (to this enhanceme vay to construct bo will greatly improv	SB) protected right turn nt, there are private- th westbound (WB) and e the efficiency of the
5. State Agency to re	eceive requested fund	ds Depart	ment of Transportation		
State Agency cont	•				
6. Amount of the Nor	nrecurring Request for	or Fiscal Year 2	2024-2025		
Type of Funding			Amou	unt	
Operations				0	
Fixed Capital Outla	у		500,000		
Total State Funds	Requested			500,000	
7. Total Project Cost	for Fiscal Year 2024-	2025 (including	g matching funds avail	lable for this proje	ect)
Type of Funding	for Fiscal Year 2024-	2025 (including	g matching funds avail Amount	lable for this proje Percentage	ect)
Type of Funding Total State Funds F	for Fiscal Year 2024- Requested (from quest				ect)
Type of Funding			Amount	Percentage	ect)
Type of Funding Total State Funds F Matching Funds Federal	Requested (from quest	ion #6)	Amount	Percentage 34% 0%	ect)
Type of Funding Total State Funds F Matching Funds Federal		ion #6)	Amount 500,000 0	Percentage 34%	ect)
Type of Funding Total State Funds F Matching Funds Federal	Requested (from quest	ion #6)	Amount 500,000	Percentage 34% 0% 0% 66%	ect)
Type of Funding Total State Funds F Matching Funds Federal State (excluding the	Requested (from quest	ion #6)	Amount 500,000 0	Percentage 34% 0% 0%	ect)
Type of Funding Total State Funds F Matching Funds Federal State (excluding the Local Other	Requested (from quest	ion #6)	Amount 500,000 0 0 950,000	Percentage 34% 0% 0% 66%	ect)
Type of Funding Total State Funds F Matching Funds Federal State (excluding the Local Other Total Project Cost	Requested (from quest	st) 4-2025	Amount 500,000 0 0 950,000 0	Percentage 34% 0% 0% 66% 0%	ect)
Type of Funding Total State Funds F Matching Funds Federal State (excluding the Local Other Total Project Cost 8. Has this project professed Year	Requested (from quest e amount of this request es for Fiscal Year 202	ion #6) st) 4-2025 ate funding?	Amount 500,000 0 950,000 0 1,450,000 No Specific	Percentage 34% 0% 0% 66% 0%	ect)
Type of Funding Total State Funds F Matching Funds Federal State (excluding the Local Other Total Project Cost 8. Has this project pr	Requested (from quest e amount of this request es for Fiscal Year 2026 reviously received sta	ion #6) st) 4-2025 ate funding?	Amount 500,000 0 950,000 0 1,450,000	Percentage 34% 0% 0% 66% 100%	ect)
Type of Funding Total State Funds F Matching Funds Federal State (excluding the Local Other Total Project Cost 8. Has this project professed Year	Requested (from quest e amount of this request s for Fiscal Year 2024 reviously received sta	ion #6) st) 4-2025 ate funding?	Amount 500,000 0 950,000 0 1,450,000 No Specific	Percentage 34% 0% 0% 66% 100%	ect)
Type of Funding Total State Funds F Matching Funds Federal State (excluding the Local Other Total Project Cost 8. Has this project project project for (yyyy-yy) 9. Is future funding lighted	Requested (from quest e amount of this request s for Fiscal Year 2024 reviously received sta	ion #6) st) 4-2025 ate funding? nt Nonrecurring ?	Amount 500,000 0 950,000 0 1,450,000 No Specific	Percentage 34% 0% 0% 66% 100%	ect)
Type of Funding Total State Funds F Matching Funds Federal State (excluding the Local Other Total Project Cost 8. Has this project professed Year (yyyy-yy) 9. Is future funding life a. If yes, indicate residues and state of the state of	Requested (from quest e amount of this request es for Fiscal Year 202 reviously received sta Amou Recurring ikely to be requested nonrecurring amount	ion #6) st) 4-2025 ate funding? nt Nonrecurring ? a per year.	Amount 500,000 0 950,000 1,450,000 No Specific Appropriation #	Percentage 34% 0% 0% 66% 100%	ect)



Yes

and medical supplies.

14. Program Performance

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10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

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

Complete questions 11 and 12 for Fixed Capital Outlay Projects

Winter Park was a sub-recipient to CARES Act funding through Orange County for PPE, safety,

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500,000

complete queenene : : a		na canay i rejecte	
11. Status of Construction			
a. What is the current phase of t	he project?		
Planning • Design	○ Construction ○ N/	A	
b. Is the project "shovel ready"	(i.e permitted)?	No	
c. What is the estimated start da	te of construction?	FY2024-25	
d. What is the estimated comple	tion date of construction?	FY2025-26	
12. List the owners of the facility t relationship between the owner	o receive, directly or indirectry or the facility and the en	ctly, any fixed capital outlay funding. Inc tity.	clude the
The City of Winter Park is the prand in turn provide benefit to its		d would receive direct benefit from capital o	outlay funding
13. Details on how the requested s	tate funds will be expended	Description	Amount
Administrative Costs:		Description	Amount
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
	or Renovation:		0

Total State Funds Requested (must equal total from question #6)

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



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The funds will be utilized for infrastructure enhancements, vehicular connectivity, safety, quality of life and potential land acquisition in order to construct protected westbound (phase I) and eastbound (phase II) left turn lanes at the intersection of S.R. 426 (Fairbanks Avenue) and Denning Drive.

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

The two westbound and eastbound left turn lanes will be constructed under the direction and cooperation under this program, Florida Department of Transportation, and local transportation engineers. The project will follow all required solicitation requirements as well as mobilization of traffic and safety standards to ensure the enhancement is properly constructed and used by the general public.

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

The citizens will be able to maneuver a protected left turn lane at the intersection without causing a bottleneck for through movements on a congested and high volume state road. Over the past five years, there has been a total of 48 accidents at this location (almost 10 crashes per year) and on occasion, caused property damage. The improvement will dramatically mitigate these issues and improve quality of life.

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

As a primary thoroughfare, approximately 34,000 households, 6400 businesses, 70,000 employees, and 76,000 residents are located within a three (3) mile ring of the proposed project area. There are about 26,000 vehicles daily along this corridor that travels east and west, all of which would see value.

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

The safety and efficiency of the intersection will be improved for pedestrian, transit, and multimodal users alike. The methodology used to measure the outcome will be the Highway Capacity Manual released by the Transportation Research Board of the National Academies of Sciences, Engineering, and Medicine in the United States.

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?

Clawbacks on funding, locally sourced funding only.

5. Requester Contact Information			
a. First Name	Randy	Last Name	Knight
b. Organization	City of Winter Park		
c. E-mail Address	rknight@cityofwinterpark.c	org	
d. Phone Number	(407)599-3235	Ext.	
6. Recipient Contact Information			
a. Organization	City of Winter Park		
b. Municipality and	d County Orange		
c. Organization Type			
□For Profit Entity			
□Non Profit 501(c)(3)			
□Non Profit 501(c)(4)			
☑Local Entity			



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□University or	r College
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□Other (please specify)

d. First Name	Randy	Last Name	Knight
e. E-mail Address	rknight@cityofwinterpark.	org	
f. Phone Number	(407)599-3235		

17. Lobbyist Contact Information

a. Name	Angela M. Drzewiecki
b. Firm Name	GrayRobinson PA
c. E-mail Address	angela.drzewiecki@gray-robinson.com
d. Phone Number	(850)577-9090