

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

LFIR # 2321

| 1. Project Title | Robinson Road Ve Project - Haines Cit | | ian Extension and Im | nprovement | | | |
|---|--|--|--|--|---|--|--|
| 2. Senate Sponsor | Colleen Burton | | | | | | |
| 3. Date of Request | 12/15/2023 | | | | | | |
| 4. Project/Program De | escription | | | | | | |
| alternate route betwee facilitate pedestrian Most importantly, the Another key benefit 544 (Lake Marion). It traffic more efficiently | een 10th and 30th Stre | eet, providing enhaines City Trail, pasafe route to scho improvement is to it East-West ro on these heavily | canced connectivity we comoting outdoor recolor for the growing you he alleviation of trafficute between 10th are dutilized roads. This | vithin the city. Addit creation and healthi uth population resion c congestion on Hind ad 30th Street, the p project is also supp | nson Avenue and CR project will distribute ported by an | | |
| 5. State Agency to red | ceive requested fund | s Departme | ent of Transportation | | | | |
| State Agency conta | ncted? No | | | | | | |
| 6. Amount of the Noni | recurring Request fo | r Fiscal Year 202 | 24-2025 | | | | |
| Type of Funding | | | Amo | unt | | | |
| Operations | | | 70 | 0 | | | |
| Fixed Capital Outlay | | | | 1,200,000 | | | |
| Total State Funds F | | | | 1,200,000 | 1 | | |
| | | | | ,, | 1 | | |
| | | | | | | | |
| 7. Total Project Cost f | or Fiscal Year 2024-2 | 2025 (including r | natching funds ava | ilable for this proj | ect) | | |
| 7. Total Project Cost f Type of Funding | or Fiscal Year 2024-2 | 2025 (including r | natching funds ava | ilable for this proj | ect) | | |
| Type of Funding | or Fiscal Year 2024-2 | | | | ect) | | |
| Type of Funding | | | Amount | Percentage | ect) | | |
| Type of Funding Total State Funds R | | | Amount | Percentage | ect) | | |
| Type of Funding Total State Funds R Matching Funds Federal | | on #6) | Amount 1,200,000 | Percentage 50% | ect) | | |
| Type of Funding Total State Funds R Matching Funds Federal | equested (from questi | on #6) | Amount 1,200,000 | Percentage 50% | | | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the | equested (from questi | on #6) | Amount 1,200,000 | Percentage 50% 0% 0% | | | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other | equested (from questi | on #6) | Amount 1,200,000 0 0 1,200,000 | Percentage 50% 0% 0% 50% | | | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other | equested (from question amount of this requested for Fiscal Year 2024 | on #6) | Amount 1,200,000 0 0 1,200,000 0 | Percentage 50% 0% 0% 50% 50% | | | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre | equested (from question amount of this requested for Fiscal Year 2024 | on #6) | Amount 1,200,000 0 1,200,000 0 2,400,000 No Specific | Percentage 50% 0% 0% 50% 50% | | | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre | equested (from question amount of this request for Fiscal Year 2024 eviously received standard Amour | on #6) | Amount 1,200,000 0 1,200,000 0 2,400,000 No | Percentage 50% 0% 0% 50% 50% 100% | | | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre | equested (from question amount of this request for Fiscal Year 2024 eviously received standard Amour | on #6) I-2025 Ite funding? | Amount 1,200,000 0 1,200,000 0 2,400,000 No Specific | Percentage 50% 0% 0% 50% 50% 100% | | | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre Fiscal Year (уууу-уу) | equested (from question amount of this request for Fiscal Year 2024 eviously received standard Recurring | on #6) H-2025 Inte funding? Interpretation | Amount 1,200,000 0 1,200,000 0 2,400,000 No Specific Appropriation # | Percentage 50% 0% 0% 50% 50% 100% | | | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre Fiscal Year (уууу-уу) 9. Is future funding like | equested (from question amount of this request for Fiscal Year 2024 eviously received state Amount Amount Recurring | on #6) d-2025 ate funding? nt Nonrecurring | Amount 1,200,000 0 1,200,000 0 2,400,000 No Specific | Percentage 50% 0% 0% 50% 50% 100% | | | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre Fiscal Year (уууу-уу) 9. Is future funding like | equested (from question amount of this request for Fiscal Year 2024 eviously received standard Recurring | on #6) d-2025 ate funding? nt Nonrecurring | Amount 1,200,000 0 1,200,000 0 2,400,000 No Specific Appropriation # | Percentage 50% 0% 0% 50% 50% 100% | | | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre Fiscal Year (уууу-уу) 9. Is future funding like a. If yes, indicate n | equested (from question amount of this request for Fiscal Year 2024 eviously received state Amount Amount Recurring | on #6) d-2025 ate funding? nt Nonrecurring per year. | Amount 1,200,000 0 1,200,000 0 1,200,000 0 2,400,000 No Specific Appropriation # | Percentage 50% 0% 0% 50% 100% Vetoed | | | |



14. Program Performance

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

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

LFIR # 2321

| Yes | | | |
|---|---|---|---------------------|
| If yes, indicate the amount of fu | inds received and what the f | unds were used for. | |
| Coronavirus State and Local Fisc city used the standard allowance government services such as pub been designated for the North & S and increase the usage. | in the amount of \$10M for loss lic safety and utilities personn | revenue in support of el. The remaining \$3,026,702 | has |
| Complete questions 11 a | nd 12 for Fixed Cap | ital Outlay Projects | |
| 11. Status of Construction | | | |
| a. What is the current phase of t | he project? | | |
| Planning | ○ Construction ○ N/A | A | |
| b. Is the project "shovel ready" | (i.e permitted)? | No | |
| c. What is the estimated start da | ate of construction? | March, 2024 | |
| d. What is the estimated comple | etion date of construction? | Dec, 2024 | |
| 12. List the owners of the facility t relationship between the owner City of Haines City is both owner. | ers of the facility and the ent | tly, any fixed capital outlay f ity. | unding. Include the |
| 13. Details on how the requested s | tate funds will be expended | | |
| Spending Category | | Description | Amount |
| Administrative Costs: | | | |
| Executive Director/Project Head Salary and Benefits | | | C |
| Other Salary and Benefits | | | (|
| Expense/Equipment/Travel/Supplies/ Other | | | C |
| Consultants/Contracted Services/Study | | | C |
| Operational Costs: Other | | | |
| Salary and Benefits | | | (|
| Expense/Equipment/Travel/Supplies/ Other | | | C |
| Consultants/Contracted Services/Study | | | C |
| Fixed Capital Construction/Majo | or Renovation: | | |
| Construction/Renovation/Land/ Planning Engineering | | ign, permitting, and construction | on cost. 1,200,000 |
| Total State Funds Requested (m | nust equal total from question | on #6) | 1,200,000 |

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



15.

16.

□Non Profit 501(c)(4)

☑Local Entity

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

LFIR # 2321

| Additionally, the p healthier lifestyles | Iternate route between 10th and 30th Street, providing enhanced connectivity within the city. roject will facilitate pedestrian access to the future Haines City Trail, promoting outdoor recreation and for citizens. Most importantly, the project will create a safe pedestrian route to school for the growing esiding in this area. |
|---|--|
| b. What activities | and services will be provided to meet the intended purpose of these funds? |
| Design, permitting | g and construction. |
| c. What direct ser | vices will be provided to citizens by the appropriation project? |
| route between 10t utilized roads. This the region. Addition recreation and head | ic congestion on Hinson Avenue and CR 544 (Lake Marion). By providing an alternative East-West h and 30th Street, the project will distribute traffic more efficiently, reducing congestion on these heavily is enhanced connectivity will not only benefit local residents but also improve the overall traffic flow in neally, the project will facilitate pedestrian access to the future Haines City Trail, promoting outdoor althier lifestyles for citizens. Most importantly, the project will create a safe pedestrian route to school for population residing in this area. |
| d. Who is the targ | get population served by this project? How many individuals are expected to be served? |
| This project will s Haines city | erve the residents of Haines city, visitors to the area, and help with commuter traffic traveling through |
| e. What is the exp be measured? | pected benefit or outcome of this project? What is the methodology by which this outcome will |
| | on, pedestrian safety, pedestrian student safety for walking to school. The number of vehicles and se the new road daily will be used to measure success. |
| | ggested penalties that the contracting agency may consider in addition to its standard penaltie t deliverables or performance measures provided for the contract? |
| No additional sug | gested penalties are recommended, standard penalties are sufficient for this project. |
| Requester Contac | t Information |
| a. First Name | Loyd Last Name Stewart |
| b. Organization | Haines City |
| c. E-mail Address | loyd.stewart@hainescity.com |
| d. Phone Number | (863)421-5565 Ext. |
| Recipient Contact | Information |
| a. Organization | City of Haines City |
| b. Municipality an | d County Polk |
| c. Organization Ty | ре |
| □For Profit Entity | |
| □Non Profit 501(| c)(3) |
| c. Organization Ty | ре |



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

LFIR # 2321

| □University or College | | | | | | |
|----------------------------------|-----------------------------|-----------|---------|--|--|--|
| □Other (please specify) | | | | | | |
| d. First Name | Omar | Last Name | DeJesus | | | |
| e. E-mail Address | omar.dejesus@hainescity.com | | | | | |
| f. Phone Number | (863)421-9902 | | | | | |
| 17. Lobbyist Contact Information | | | | | | |
| a. Name | Keaton A Griffin | | | | | |
| b. Firm Name | The Griffin Group | | | | | |
| c. E-mail Address | keaton@thegriffingroup.co | om | | | | |
| d. Phone Number | (863)528-2024 | | | | | |