

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

LFIR # 2485

١.	Project Title	St. Augustine - W	rest Augustine St	eplic-to-Sewer 24-25 F	oui wille Ku Alea	
2.	Senate Sponsor	Travis Hutson				
3.	Date of Request	12/14/2023				
4.	Project/Program De	escription				
	increase storm resili septic tanks that cor	ency by constructing tribute to deterioration nealth hazards in the	g a sanitary sewe on of groundwate	r system. The project ver gradity and "float" du	vill connect existing l ring storm events, ca	er and well quality, and homes and eliminate ausing significant using viable on available
5.	State Agency to red	ceive requested fui	nds Depart	ment of Environmental	Protection	
	State Agency conta	cted? Yes				
6.	Amount of the Noni	recurring Request	for Fiscal Year 2	2024-2025		
	Type of Funding			Amo	ount	
	Operations				0	
	Fixed Capital Outlay				5,000,000	
	Total State Funds F	Requested			5,000,000	
7.	Total Project Cost f	or Fiscal Year 2024	I-2025 (includin	g matching funds ava	ilable for this proje	ect)
	Type of Funding			Amount	Percentage	
	Total State Funds R	equested (from que	stion #6)	5,000,000	71%	
	Matching Funds					
	Federal			0	0%	
	State (excluding the	amount of this requ	est)	0	0%	
	Local			2,000,000	29%	
	Other			0	0%	
	Total Project Costs	for Fiscal Year 20	24-2025	7,000,000	100%	
8.	Has this project pro	eviously received s	state funding?	Yes		
	Fiscal Year (уууу-уу)	Amo Recurring	unt Nonrecurring	Specific Appropriation #	Vetoed	
	2021-22	0	300,00	00 LPA0338	No	
9.	Is future funding lik			Yes		
	a. If yes, indicate nb. Describe the sou	_		500,000 lieu of state funding.		
	Utility Fund Reserv	es				
10). Has the entity req	uesting this projec	t received any f	ederal assistance rela	ated to the COVID-1	9 pandemic?
	Yes					



11. Status of Construction

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

The City has applied for and is receiving federal assistance related to the COVID-19 pandemic through the American Rescue Plan Act (ARPA) and FEMA Public Assistance (PA). APRA funding is awarded in the Revenue Replacement, Expenditure Category for \$7,720,659, the City is using these funds in the provision of government services. FEMA-PA awarded \$23,383 for reimbursement of supplies and commodities to protect the City through the crisis.

Complete questions 11 and 12 for Fixed Capital Outlay Projects

a. What is the current phase of the project?							
Planning	O Design	Construction	O N/A				
b. Is the project	No						
c. What is the es	timated start da	te of construction?		Summer 2025			

12. List 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.

Owner is the entity seeking funding - City of St. August	ine

Summer 2026

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

d. What is the estimated completion date of construction?

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	Hire a professional civil engineering firm to design and permit the construction plans.	140,000
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering	Construction costs for a sanitary sewer collection system of approximately 10,993 LF of 8 inch PVC pipe, service laterals and plumbing connections to be installed which will eliminate 136 residential septic tanks and provide up to 51 new connections to gravity sanitary sewer. Within the project area there are 9 St. Johns County parcels that are being evaluated for affordable housing that sewer will be made available to.	4,860,000
Total State Funds Requested (must equal total from question #6)		

14. Program Performance



15.

16.

☑Local Entity

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a. What specific p	urpose or	goal will be ac	hieved by th	e funds requested?	•				
Centralized public	sewer sys	stem, utility servi	ces, eliminati	on of septic systems.					
b. What activities	and servi	ces will be prov	ided to mee	t the intended purpo	ose of	these funds?			
Centralized public of septic tanks and			ces, eliminati	on of septic systems,	, conne	ection to municipal sewer, removal			
c. What direct ser	vices will	be provided to	citizens by t	he appropriation pro	oject?	ı			
Centralized public of septic tanks and	Centralized public sewer system, utility services, elimination of septic systems, connection to municipal sewer, removal of septic tanks and drainfield mounds.								
d. Who is the targ	et populat	tion served by	this project?	How many individu	ıals ar	e expected to be served?			
All citizens/resider citizens in the entir	nts within t e surround	he project area vill be	will be served nefit from the	. Approximately 408 pelimination of enviror	people nmenta	e are expected to be served. All all and health hazards.			
e. What is the exp	ected ben	efit or outcome	of this proj	ect? What is the me	thodo	logy by which this outcome will			
be measured?									
economic activity by management. Impl	by increasions increasions increased	ng assessed hor water managem quality in reside	me value and lent. Improve nts' backyard	making new workford groundwater quality. s; monitoring water qu	ce hou Impro	e quality. Increase or Improve using feasible. Improve wastewater ve surface water quality. Tracking in surface water bodies adjacent to			
-					ider in	addition to its standard penaltie			
				es provided for the		•			
This is a reimburs achieved.	able fundir	ng request. Fund	ds will not be	distributed until delive	erables	s and performance measures are			
acineved.									
Requester Contact	Informati	ion							
a. First Name	Reuben		Last Name	Franklin					
b. Organization	City of St	. Augustine							
c. E-mail Address	rfranklin@citystaug.com								
d. Phone Number	(904)209-	-4323	Ext.						
Recipient Contact	Informatio	on							
a. Organization	City of St	. Augustine							
b. Municipality and	d County	Saint Johns							
c. Organization Ty	ре								
□For Profit Entity									
□Non Profit 501(c	:)(3)								
□Non Profit 501(d	:)(4)								



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□University or Co	llege							
□Other (please sp	pecify)							
d. First Name	Nancy	Last Name	Sikes-Kline					
e. E-mail Address	nsikeskline@citystaug.cor	m						
f. Phone Number	(904)837-6789							
17. Lobbyist Contact I	nformation							
a. Name	Julia Juarez							
b. Firm Name	JEJ & Associates Inc							
c. E-mail Address	ss lena@jejassoc.com							
d. Phone Number	(850)212-8330							
18. Have you applied f	or alternative state fundi	ng?						
то. паче уой аррпей г	or alternative state funding	ng r						
☐ Waste Water R	evolving Loan							
□ Drinking Water	□ Drinking Water Revolving Loan							
☐ Small Commun	☐ Small Community Wastewater Treatment Grant							
☐ Other (please s	pecify)							
☑ N/A								
19. What is the popula	tion economic status?							
☑ Financially Disa	idvantaged Community (ch	. 62-552, F.A	C)					
☐ Financially Disa	☐ Financially Disadvantaged Municipality (ch. 62-552, F.A.C)							
☐ Rural Area of E	□ Rural Area of Economic Concern							
☐ Rural Area of O	☐ Rural Area of Opportunity (s. 288.0656, Florida Statutes)							
□ N/A								
20. What is the status	of construction?							
Construction has r								
21. What percentage o	of the construction has be	en complete	ed?					
0%								

22. What is the estimated completion date of construction?



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08/28/2026			