

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

**LFIR # 2766** 

1. Project Title	NW/NE 71st Str	eet Roadway Imp	rovements		
2. Senate Sponsor	Alexis Calatayu	d			
3. Date of Request	12/26/2023				
4. Project/Program De					
, ,	<u> </u>	:	NIM/NIE 74 Others f	NIC O A	NIM 7 A The
roadway and asso roadway improveme and gutter and broke	ents include paveme	ent rehabilitation, i	ng NW/NE 71 Street, f new bicycles lanes, ne	rom NE 2 Avenue to w pavement markino	gs, and associated curb
5. State Agency to re	ceive requested fu	ınds Depart	ment of Transportation		
State Agency conta	acted? No				
S. Amount of the Non	recurring Request	for Fiscal Year 2	2024-2025		
Type of Funding			Amo	ount	
Operations				0	
Fixed Capital Outlay				1,500,000	
Total State Funds	Requested			1,500,000	
'. Total Project Cost f	or Fiscal Year 202	4-2025 (including	g matching funds ava	ilable for this proje	ect)
Type of Funding			Amount	Percentage	
Total State Funds R	equested (from que	estion #6)	1,500,000	100%	
Matching Funds			-		
Federal			0	0%	
State (excluding the	amount of this req	uest)	0	0%	
Local			0	0%	
Other		_	0	0%	
Total Project Costs		•	1,500,000	100%	I
3. Has this project pro	eviously received	state funding?	No		I
Fiscal Year (yyyy-yy)		ount I	Specific Appropriation #	Vetoed	
(9999-99)	Recurring	Nonrecurring	Арргорпацоп #		
9. Is future funding lil	kelv to be request	ed?	No		
_	•				1
a. If yes, indicate n	onrecurring amou	int per year.			I
b. Describe the so	urce of funding th	at can be used in	lieu of state funding		
10.11 41 45					40
0. Has the entity req	uesting this proje	ct received any f	ederal assistance rela	ated to the COVID-	19 pandemic?
10. Has the entity req	uesting this proje	ct received any f	ederal assistance rela	ated to the COVID-	19 pandemic?



11. Status of Construction

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This entity received \$10,000,000 in funds to help residents in the form of grocery gift cards and local business assistance

### Complete questions 11 and 12 for Fixed Capital Outlay Projects

13	City of Miami  3. Details on how the Spending Category	•	ate funds will be expende	ed  Description	Amount
13		ne requested st	ate funds will be expende	ed	
	City of Miami				
12			o receive, directly or indirers or s of the facility and the e		tlay funding. Include the
	d. What is the est	imated complet	tion date of construction?	Winter of 2025	
	c. What is the est	imated start da	te of construction?	Fall of 2024	
	b. Is the project "	shovel ready" (	i.e permitted)?	No	
	Planning	<ul><li>Design</li></ul>	Construction N	I/A	

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		0
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering	Construction of approximately 1 mile of pavement rehabilitation, new bicycle lanes, new pavement markings, and associated curb and gutter and broken sidewalk replacement.	1,500,000
<b>Total State Funds Requested (m</b>	ust equal total from question #6)	1,500,000

### 14. Program Performance

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

Improve pedestrian, bicycle, and vehicular safety, and improve the quality of life for residents.

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

Construction of approximately 1 mile of pavement rehabilitation, new bicycle lanes, new pavement markings, and associated curb and gutter and broken sidewalk replacement



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	There will be no direct services provided to citizens.						
d. Who is the tar	ho is the target population served by this project? How many individuals are expected to be served?						
	ation are the residents of NW/NE 71 Street between NE 2 Avenue and NW 7 Avenue. The project is approximately 14,000 residents.						
e. What is the ex be measured?	is the expected benefit or outcome of this project? What is the method sured?				dology by which this outcome will		
Improved pedestrian and vehicular safety. This will be measured by comparing the number of vehicular and pe accidents after construction is complete to the number of accidents currently being reported at the locations using sensors and on-site inspections.  f. What are the suggested penalties that the contracting agency may consider in addition to its standard					e number of vehicular and pedestrian reported at the locations using		
					r in addition to its standard penalti		
				es provided for the co	•		
Failure to meet of the audit the C	leliverables ity could be	or performance i	measures shons up to revo	ould subject the City to a ocation of funding.	an audit and depending on the results		
5. Requester Conta	ct Informat	ion					
a. First Name	Arthur		Last Name	Noriega, V			
b. Organization	City of Miami ss anoriega@miamigov.com						
c. E-mail Address							
d. Phone Number	(305)416	-1025	Ext.				
6. Recipient Contac	ecipient Contact Information						
a. Organization	City of M	iami					
b. Municipality ar	nd County	Miami-Dade					
c. Organization T	ype						
□For Profit Entit	y						
	(c)(3)						
□Non Profit 501	(6)(3)						
□Non Profit 501 □Non Profit 501							
□Non Profit 501	(c)(4)						
□Non Profit 501 ☑Local Entity	(c)(4)						
□Non Profit 501  □Local Entity □University or C	(c)(4)		Last Name	Santana			
□Non Profit 501  □Local Entity □University or C □Other (please	ollege specify)  Juvenal	@miamigov.com	Last Name	Santana			

17. Lobbyist Contact Information



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