

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

LFIR # 3029

1. Project Title	Washington Cou Drainage Project		Building Environmer	ntal Mitigation &			
2. Senate Sponsor	Jay Trumbull						
3. Date of Request	01/08/2024						
4. Project/Program De	scription						
County Government amplified over time w constitutional officers Building, Planning, I rear services not only Ambulance Barn, the	Annex Building. The increased use an acceptance and the E911 Addressing & the Government are washington Courrent parking factorial and the Eurrent parking factorial areas and the E911 and the E911 areas areas and the E911 areas	ne rear access ro due to our growin d Property Appra & Mapping and th Anex Building, bu nty MAintence Ba cilities. A total wa	ad has drainage and g county. The Governiser. Other agencies e Board of County Cut also the Emergencier, and The ARC of	l environmental mitigarnment Annex building housed at the Annex comissioners. The curry Managment Service f Washington- Holmes	ations for the Washington ation issue that have been g houses two include Driver's License, rent access road in the es Office, their is Counties. We have the with resurfacing of the		
5. State Agency to rec	eive requested fu	ı nds Depar	tment of Environmen	tal Protection			
State Agency contact	cted? No						
6. Amount of the Nonro	acurring Poguest	for Fiscal Voar	2024-2025				
	ecurring Nequest	- Ioi i iscai i cai			1		
Type of Funding Operations			A	mount	1		
Operations Fixed Capital Outlay				2,237,474			
Total State Funds R	equested		2,237,474				
Total State Fallacin				_,,	<u> </u>		
7. Total Project Cost fo	or Fiscal Year 202	4-2025 (includin	g matching funds a	available for this pro	ject)		
Type of Funding			Amount	Percentage			
Total State Funds Re	equested (from que	estion #6)	2,237,4	74 100%	, 0		
Matching Funds					4		
Federal				0 0%	-		
State (excluding the	amount of this requ	uest)		0 0%	-		
Local				0 0%			
Other				0 0%	, 0		
Total Project Costs	for Fiscal Year 20	024-2025	2,237,4	74 100%	o l		
8. Has this project pre	viously received	state funding?	No		_		
Fiscal Year	Amount		Specific	Vetoed			
(уууу-уу)	Recurring	Nonrecurring	Appropriation	#	1		
9. Is future funding like	aly to be request	ad2	No				
•	•		INU		\neg		
a. If yes, indicate no	onrecurring amou	int per year.					
b. Describe the sou	rce of funding tha	at can be used i	n lieu of state fundi	ng.			



Yes

14. Program Performance

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

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4 4 1111		-		
4.4 million was received and used	d for first responders (EMS, La	aw Enforcement).		
omplete questions 11 a	nd 12 for Fixed Cap	ital Outlay Project	ts	
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	01/01/2025			
d. What is the estimated comple	tion date of construction?	12/01/2025		
Washington County		itý.		
Washington County Details on how the requested st	tate funds will be expended			
	tate funds will be expended	Description		Amount
Details on how the requested so Spending Category Administrative Costs:	tate funds will be expended			Amount
Details on how the requested st	tate funds will be expended			
Details on how the requested st Spending Category Administrative Costs: Executive Director/Project Head	tate funds will be expended			C
Details on how the requested so Spending Category Administrative Costs: Executive Director/Project Head Salary and Benefits	tate funds will be expended			C
Spending Category Administrative Costs: Executive Director/Project Head Salary and Benefits Other Salary and Benefits Expense/Equipment/Travel/Supplies/	tate funds will be expended			C C
Details on how the requested statement of the second of th	tate funds will be expended			C C
Details on how the requested statement of the statement o	tate funds will be expended			C C C
Details on how the requested st Spending Category Administrative Costs: Executive Director/Project Head Salary and Benefits Other Salary and Benefits Expense/Equipment/Travel/Supplies/ Other Consultants/Contracted Services/Study Operational Costs: Other	tate funds will be expended			C C
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Details on how the requested so Spending Category Administrative Costs: Executive Director/Project Head Salary and Benefits Other Salary and Benefits Expense/Equipment/Travel/Supplies/Other Consultants/Contracted Services/Study Operational Costs: Other Salary and Benefits Expense/Equipment/Travel/Supplies/Other Consultants/Contracted Services/Study Fixed Capital Construction/Majorations				C C C C C
Details on how the requested statement of the consultants of the consu		Description nd Drainage Design , alon	ng with	Amount 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

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

Complete Water Mitigation and Drainage Design along with resurfacing of parking lot area

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



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	Complete Water a	and Draina	ge Design along	with resurfac	ing of parking	lot area		
	c. What direct ser	vices will	be provided to	citizens by t	he appropriat	ion project?	?	
	Drainage Mitigation design will remedy water overflow into adjoining properties as well as City of Chipley maintained roadways and recently paved South Blvd				ipley maintained			
d. Who is the target population served by this project? How many individuals are expected to be serv				be served?				
	General and County Employees and everyone using services housed in the Annex Building along with EMS and TARC and Washington County Maintenance Barn				rith EMS and The			
e. What is the expected benefit or outcome of this project? What is the methodology by which this outcom be measured?				this outcome will				
	To remedy water overflow into a joining properties as well as City of Chipley maintained roadways & recently paved South Blvd							
	f. What are the su for failing to meet							s standard penalties
	None							
15.	Requester Contact	t Informati	ion					
	a. First Name	Jeff		Last Name	Massey			
b. Organization Washington County Board of County Comissioners								
	c. E-mail Address	nail Address jmassey@washingtonfl.com						
	d. Phone Number	(850)638	-6200	Ext.				
16.	6. Recipient Contact Information							
	a. Organization Washington County Board of County Commisoners							
	b. Municipality and	d County	Washington					
	c. Organization Ty	pe						
	□For Profit Entity							
	□Non Profit 501(d	c)(3)						
	□Non Profit 501(d	c)(4)						
	☑Local Entity							
	□University or College							
	□Other (please specify)							
	d. First Name	Candace		Last Name	Thames			
	e. E-mail Address							
	f. Phone Number	er (850)326-6884						



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Lobbyist Contact I	nformation				
a. Name	Christopher L. Carmody				
b. Firm Name	GrayRobinson PA				
c. E-mail Address chris.carmody@gray-robinson.com					
d. Phone Number	(407)843-8880				
•	e the questions below for Water Projects only. or alternative state funding?				
☐ Drinking Water Revolving Loan					
□ Small Community Wastewater Treatment Grant					
☐ Other (please specify)					
☑ N/A					
What is the popula	tion economic status?				
☐ Financially Disa	dvantaged Community (ch. 62-552, F.A.C)				
☐ Financially Disadvantaged Municipality (ch. 62-552, F.A.C)					
☑ Rural Area of Economic Concern					
☐ Rural Area of Opportunity (s. 288.0656, Florida Statutes)					
□ N/A					
What is the status	of construction?				
Not ready					
What percentage o	f the construction has been completed?				
0					
	ted completion date of construction?				
	a. Name b. Firm Name c. E-mail Address d. Phone Number ease complete Have you applied f Waste Water R Drinking Water Small Commun Other (please s N/A What is the popula Financially Disa Financially Disa Rural Area of E Rural Area of O N/A What is the status Not ready What percentage o				