

| 1. Project Title | North Ridge Trail - Polk County | |
|-------------------|---------------------------------|--|
| 2. Senate Sponsor | Ben Albritton | |

3. Date of Request 12/11/2023

4. Project/Program Description

Requesting funding for the construction of a new 2-Lane Road from Deen Still Road north to Sand Mine Road

5. State Agency to receive requested funds

Department of Transportation

State Agency contacted? Yes

6. Amount of the Nonrecurring Request for Fiscal Year 2024-2025

| Type of Funding | Amount |
|-----------------------------|-----------|
| Operations | 0 |
| Fixed Capital Outlay | 9,500,000 |
| Total State Funds Requested | 9,500,000 |

7. Total Project Cost for Fiscal Year 2024-2025 (including matching funds available for this project)

| Type of Funding | Amount | Percentage |
|------------------------------------------------|------------|------------|
| Total State Funds Requested (from question #6) | 9,500,000 | 48% |
| Matching Funds | | |
| Federal | 0 | 0% |
| State (excluding the amount of this request) | 0 | 0% |
| Local | 10,500,000 | 52% |
| Other | 0 | 0% |
| Total Project Costs for Fiscal Year 2024-2025 | 20,000,000 | 100% |

8. Has this project previously received state funding? Yes

| Fiscal Year | Amount | | Specific | Vetoed |
|-------------|-----------|--------------|-----------------|--------|
| (уууу-уу) | Recurring | Nonrecurring | Appropriation # | |
| 2022-23 | 0 | 5,000,000 | 1988A | No |

9. Is future funding likely to be requested?

Yes

9,500,000

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

Local funds

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

Yes

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



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Cares Funding: \$126,467,997.40 (economic development, community health, etc.) Nursing Home COVID Health Services: \$639,271.41 H&D: \$49,464,052.26 (facilities improvements, multi-family rental, rental eviction program, etc.) ARP: \$141,233,774.00 (infrastructure/local govts, safety, etc.) Library Co-op (Federal \$): \$454,338.00 Total Federal \$: \$318,259,433.07

Complete questions 11 and 12 for Fixed Capital Outlay Projects

11. Status of Construction

| a. What is the cu | irrent phase of t | he project? | | |
|------------------------------------------------------|-------------------|----------------------------------|-------|------------|
| O Planning | 🔵 Design | Construction | 🔘 N/A | |
| b. Is the project | Yes | | | |
| c. What is the estimated start date of construction? | | | | March 2024 |

d. What is the estimated completion date of construction?

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.

March 2026

Polk County

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

| 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 through the competitive bid process. | 9,500,000 |
| Total State Funds Requested (must equal total from question #6) 9,500,00 | | |

14. Program Performance

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

Provide an alternative route for traffic traveling north and south parallel to Hwy 27 north of Interstate 4 to alleviate local traffic on Hwy 27.

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



Competitive construction bid and the construction of a new 2-lane roadway.

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

Improved traffic flow through a fast growing area of northeast Polk County.

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

Local residents in northeast Polk County trying to go to local retail and commercial and trying to get to Orlando. Very high commuter population in this area. Adjacent cities populations: Haines City, FL 28,061 and Daveport, FL 7,309.

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

Increase mobility in the northeast corner of Polk County. Traffic counts will be used to measure the effectiveness of these improvements.

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?

Return or reassignment of funding if not used within the proposed agreement time frame.

15. Requester Contact Information

| | a. First Name | Ryan | Last Name | Taylor |
|-----|-----------------------------------|-------------------------------------------|--------------|---------|
| | b. Organization | Polk County Board of County Commissioners | | |
| | c. E-mail Address | ryantaylor@polk-county.net | | |
| | d. Phone Number | (863)534-6429 | Ext. | |
| 16. | 16. Recipient Contact Information | | | |
| | a. Organization | Polk County Board of Cou | inty Commiss | sioners |
| | b. Municipality and | County Polk | | |
| | c. Organization Ty | pe | | |
| | □For Profit Entity | ity | | |
| | □Non Profit 501(c | 501(c)(3) | | |
| | □Non Profit 501(c | lon Profit 501(c)(4) | | |
| | ☑Local Entity | | | |
| | □University or College | | | |
| | □Other (please specify) | | | |
| | d. First Name | Jay | Last Name | Jarvis |
| | e. E-mail Address | jayjarvis@polk-county.net | | |
| | f. Phone Number | (863)535-2200 | | |
| | | | | |

17. Lobbyist Contact Information



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| a. Name | Nicholas V. Iarossi | |
|-------------------|-----------------------------|--|
| b. Firm Name | Capital City Consulting LLC | |
| c. E-mail Address | nick@cccfla.com | |
| d. Phone Number | (850)222-9075 | |