

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

**LFIR # 3405** 

1. Project Title	Tradewinds Drai	nage Project - F	Hurricane	Irma and Hurri	cane lan	
2. Senate Sponsor	Jonathan Martin					
3. Date of Request	01/12/2024					
4. Project/Program D	escription					
Sanibel. The flooding	ng issues in this neig	hborhood were	exacerb	ated by Hurrica	ne Ian. Approximate	ne Tradewinds area of aly \$700,000 has been City has appropriated
5. State Agency to re	ceive requested fu	nds Divis	ion of En	nergency Manaç	gement	
State Agency conta	acted? Yes					
6. Amount of the Non	recurrina Reauest	for Fiscal Year	r 2024-20	025		
Type of Funding					ount	
Operations				Aiik	0	
Fixed Capital Outla	J				3,500,000	
Total State Funds					3,500,000	T .
					0,000,000	I
7. Total Project Cost	for Fiscal Year 202	4-2025 (includi	ing mato	hing funds ava	ailable for this proj	ect)
Type of Funding			F	Mount	Percentage	
	Requested (from que	estion #6)		3,500,000	79%	
Matching Funds						
Federal	Federal			700,000	16%	
State (excluding the	amount of this requ	uest)		0	0%	1
Local				233,000	5%	1
Other				0	0%	1
Total Project Cost	s for Fiscal Year 20	024-2025		4,433,000	100%	
8. Has this project pr	eviously received	state funding?	No			
Fiscal Year	Amount		Specific		Vetoed	
(уууу-уу)	Recurring	Nonrecurrin	g Ap	propriation #		
9. Is future funding li	kely to be requests	ad?	No			
J	•		INO			]
a. If yes, indicate r	_					
b. Describe the so						1
No other funding s	ources, other than t	hose shown on	page 1, a	are available at	this time.	
10. Has the entity req	uesting this projec	ct received any	federal	assistance rel	ated to the COVID-	19 pandemic?
Yes						
If yes, indicate the	amount of funds	received and w	hat the	funds were use	ed for.	



11. Status of Construction

14. Program Performance

Planning

a. What is the current phase of the project?

Design

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

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CARES Act funding - \$440,081. Funds were used for COVID testing for City employees, purchase of personal protective equipment, work space protective barriers, legal services and payroll related to managing the pandemic.

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

Construction

City of Sanibel		
ony or carrison		
B. Details on how the requested s	tate funds will be expended	
Spending Category	Description	Amount
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/Majo	or Renovation:	
Construction/Renovation/Land/ Planning Engineering	Flood mitigation and stormwater improvement project.	3,500,000
Total State Funds Requested (m	nust equal total from question #6)	3.500.00

N/A

Yes

October 2024

April 2025

Mitigation of neighborhood flooding to the streets serving 65 homes and 3 motels in the Tradewinds neighborhood.

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

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

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

Construction services to improve the stormwater system.



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Flood mitigation a	nd stormwater improvemer	nts in the Tra	dewinds neight	borhood.		
d. Who is the targ	et population served by t	this project?	How many in	dividuals ar	e expected to be served?	
Residents and vis	itors in the Tradewinds nei	ghborhood of	Sanibel. 500+			
e. What is the exp be measured?	ected benefit or outcome	of this proj	ect? What is t	he methodo	logy by which this outcome wi	II
Flood mitigation a completion of the p		nts in the Tra	dewinds neighl	borhood. Flo	oding will be mitigated upon	
	ggested penalties that the deliverables or performate				addition to its standard penal act?	tie
Failure to adequate funding or contract		erformance m	easures as cor	ntractually re	quired may lead to reduction in	_
15. Requester Contact	t Information					
a. First Name	Dana	Last Name	Souza			
b. Organization	City of Sanibel					
c. E-mail Address	dana.souza@mysanibel.d	com				
d. Phone Number	(239)472-3700	Ext.				
16. Recipient Contact	Information					
a. Organization	City of Sanibel					
b. Municipality and	d County Lee					
c. Organization Ty	ре					
□For Profit Entity						
□Non Profit 501(c	c)(3)					
□Non Profit 501(c	c)(4)					
☑Local Entity						
□University or Co	llege					
□Other (please sp	pecify)					
d. First Name	Steve	Last Name	Chaipel			
e. E-mail Address	steve.chaipel@mysanibe	l.com				
f. Phone Number	(239)472-3700					
17. Lobbyist Contact I	nformation					
a. Name	Angela P. Dempsey					
b. Firm Name	PooleMcKinley					



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c. E-mail Address	angela@poolemckinley.com	
d. Phone Number	(850)681-1980	