

LFIR # 3466

<b>1. Project litie</b> Labelle waste water i reatment Facility	1. Project Title	LaBelle Waste Water Treatment Facility
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2. Senate Sponsor Kathleen Passidomo

3. Date of Request 01/12/2024

#### 4. Project/Program Description

The requested funds will be used to replace the exsiting Wastewater Treatment Facility. The city is currently under a consent order with the Florida Department of Environmental Protection

#### 5. State Agency to receive requested funds

Department of Environmental Protection

State Agency contacted? No

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

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	17,800,000
Total State Funds Requested	17,800,000

#### 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)	17,800,000	94%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	1,200,000	6%
Other	0	0%
Total Project Costs for Fiscal Year 2024-2025	19,000,000	100%

#### 8. Has this project previously received state funding?

Fiscal Year	Amo	ount	Specific	Vetoed
(уууу-уу)	Recurring	Nonrecurring	Appropriation #	

#### 9. Is future funding likely to be requested?

Yes

No

a. If yes, indicate nonrecurring amount per year.

17,200,000

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

City will continue to explore grant opportunities at state and federal level, also exploring potential of state revoloving loan fund.

#### 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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\$2,600,000 in ARPA funding. These funds were used on existing water and waste water infrastructure projects

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

### 11. Status of Construction

a. What is the current phase of the project?

📀 Planning 🛛 🔘 Design 💦 🔵 Construction 🔵 N/A

b.	ls	the	project	"shovel	ready"	(i.e	permitted)?	
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c. What is the estimated start date of construction?

- 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.

No

July 2024

June 2027

The facility is owned and operated by the City of LaBelle

#### 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	Planning, design and construction administration. To include site plans capaicty needs, technical spcifications and footprint of new facility	4,000,000
Operational Costs: Other		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/ Other		0
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Majo	or Renovation:	
Construction/Renovation/Land/ Planning Engineering	The funds will be used for the design & construction of the new WWTF, disposal, lift stations and force-main improvements. Which collectively will address the consent order and provide the city with a facility to meet current and future demands including septic to sewer conversions which are currently underway.	13,800,000
Total State Funds Requested (m	nust equal total from question #6)	17,800,000

#### 14. Program Performance

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



Under administrative consent order with FDEP the city is required to construct a new wastewater treatment facility. The funds requested will be used for planning, design & construction of a new WWTF. Through grant awards the city has begun conversion of more than 1,000 septic tanks. this additional flow can not be handled by the existing WWTF. The city is located in the Caloosahatchee River BMAP thus, underscoring the critical need for the WWTF in order to reduce or eliminate nutrient discharges.

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

tHE appropriation will fund planning, design, engineering and construction of the new wastewater facility

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

The City is under a consent decree for their outdated wastewater plant. In addition, the city is located within the Caloosahatchee BMAP. This project will assit the city in meeting is nutrient reduction goals and provide safe sanitary sewer for the residents

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

Existing residents of the City as well as the nearly 1,800 septic tanks which are curently being converst to wastewater services. Roughly 3,000 residents in all.

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

#### be measured?

Satisfy the Consent Decree and meeting our portion of the nutrient reduction to be in compliance with BMP. Lastly, it will help the city to eliminate all septic tanks in there jurisdiction.

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?

The city will be out of compliance with the timeline and requirments included in the department's conset decree.

#### **15. Requester Contact Information**

a. First Name	Julie	Last Name	Wilkins		
b. Organization	City of LaBelle				
c. E-mail Address	juliewilkins@citylabelle.cc	m			
d. Phone Number	(863)675-2872	Ext.			
16. Recipient Contact	Information				
a. Organization	City of LaBelle				
b. Municipality and	b. Municipality and County Hendry				
c. Organization Ty	c. Organization Type				
□For Profit Entity	□For Profit Entity				
□Non Profit 501(c	□Non Profit 501(c)(3)				
□Non Profit 501(c	□Non Profit 501(c)(4)				
☑Local Entity					
□University or Co	□University or College				



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□Other	(please specify)
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d. First Name	Julie	Last Name	Wilkins	
e. E-mail Address				
f. Phone Number	(863)675-2872			
17. Lobbyist Contact	Information			
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a. Name	James Randolph Spratt		
b. Firm Name	Magnolia Strategies LLC		
c. E-mail Address	jim@magnoliastrategiesllc.com		
d. Phone Number	(850)228-1296		

## Please complete the questions below for Water Projects only.

### 18. Have you applied for alternative state funding?

- ☑ Waste Water Revolving Loan
- Drinking Water Revolving Loan
- □ Small Community Wastewater Treatment Grant
- □ Other (please specify)
- D N/A

#### 19. What is the population economic status?

- □ Financially Disadvantaged 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)

D N/A

### 20. What is the status of construction?

Pre planning, design.

## 21. What percentage of the construction has been completed?

N/A

## 22. What is the estimated completion date of construction?

10/25/2025