

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

LFIR # 3511

| 1. Project Title | LaBelle- Helms F | LaBelle- Helms Road Looped Water Lines | | | | | |
|---|---|--|---------------|---------------------------------------|-----------------------|-------------------|--|
| 2. Senate Sponsor | Kathleen Passido | omo | | | | | |
| 3. Date of Request | 12/01/2023 | | | | | | |
| 4. Project/Program De | escription | | | | | | |
| The requested fund consent order with the | ls will be used to rep he Florida Departme | olace the exsiting | ng W nenta | astewater Treatment | Facility. The city is | currently under a | |
| 5. State Agency to re | ceive requested fu | nds Depa | artme | ent of Environmental I | Protection | | |
| State Agency conta | acted? No | | | | | | |
| 6. Amount of the Non | recurring Request | for Fiscal Yea | r 202 | 24-2025 | | | |
| Type of Funding | | | | Amount | | | |
| Operations | | | | | 0 | | |
| Fixed Capital Outlay | 1 | | | | 5,000,000 | | |
| Total State Funds I | Requested | | | | 5,000,000 | | |
| 7. Total Project Cost f Type of Funding | or riscar rear 202 | 4-2023 (IIICIUU | iiig i | Amount | Percentage | | |
| Total State Funds R | equested (from que | estion #6) | | 5,000,000 | 100% | | |
| Matching Funds | | , | | , , , , , , , , , , , , , , , , , , , | | | |
| Federal | | | | 0 | 0% | | |
| State (excluding the | amount of this requ | uest) | | 0 | 0% | | |
| Local | | | | 0 | 0% | | |
| Other | | | | 0 | 0% | | |
| Total Project Costs for Fiscal Year 2024-2025 | | | | 5,000,000 | 100% | | |
| 3. Has this project pro | | |) | No | | | |
| Fiscal Year | Amo | Amount | | Specific | Vetoed | | |
| (уууу-уу) | Recurring | Nonrecurring | ng | Appropriation # | | | |
| | | | | | | | |
| 9. Is future funding lil | vely to be requests | ad2 | | No | | | |
| • | | | | | | | |
| a. If yes, indicate n | onrecurring amou | nt per year. | | | | | |
| b. Describe the sou | urce of funding tha | nt can be used | in li | eu of state funding. | | | |
| | | | | | | | |
| 10. Has the entity req | uesting this projec | ct received any | v fed | leral assistance rela | ted to the COVID- | 19 pandemic? | |
| Yes | 3 × × × × × | | | | | • | |
| | | | | | | | |
| If yes, indicate the | amount of funds i | received and v | vhat | the funds were used | d for. | | |



11. Status of Construction

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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

| a. What is the current phase of the project? | | | | | |
|---|-----------|--|--|--|--|
| ○ Planning ○ Design | /A | | | | |
| b. Is the project "shovel ready" (i.e permitted)? | Yes | | | | |
| c. What is the estimated start date of construction? | July 2023 | | | | |
| d. What is the estimated completion date of construction? | June 2026 | | | | |
| 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. | | | | | |
| 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 | Engineering services, design, and construction | 500,000 |
| 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 and installation of the looped waterline and water main upgrades. | 4,500,000 |
| Total State Funds Requested (must equal total from question #6) 5,000,000 | | |

14. Program Performance

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

This appropriation will provide upgraded drinking water lines to the southern part of the city. The project will provide the infrastructure to accommodate the needs of the residents as well as allow for growth including sustaining fire suppression and the jail expansion.

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



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The appropriation will cover the planning, design and construction and installation of the water lines and associated infrastructure.

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

Current drinking water lines are aging and cannot provide operating pressure or capacity for existing residents not to mention the the increased demand associated with the jail expansion and fire suppression activities.

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

All of the current residents of the City of LaBelle as well as new residents and businesses. Current population of the city is roughly 3,000 people

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

Allows the city to meet existing and future drinking water needs, accommodate growth on the southern end of the city and support fire suppression and jail expansion.

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 of LaBelle Ordinance 2011-17 outlines detailed provisions and penalties for failure to meet deliverables. These include but are not limited to cost recovery and suspension from bid eligibility for up to 3 years.

| 15. Requester Contact | Informat | ion | | |
|-----------------------------------|------------------------------|-------|-----------|---------|
| a. First Name | Julie Last Name Wilkins | | Wilkins | |
| b. Organization | City of LaBelle | | | |
| c. E-mail Address | juliewilkins@citylabelle.com | | | |
| d. Phone Number | (863)675 | -2872 | Ext. | |
| 16. Recipient Contact | Information | on | | |
| a. Organization | tion City of LaBelle | | | |
| b. Municipality and County Hendry | | | | |
| c. Organization Type | | | | |
| □For Profit Entity | | | | |
| □Non Profit 501(c)(3) | | | | |
| □Non Profit 501(c)(4) | | | | |
| ☑Local Entity | | | | |
| □University or College | | | | |
| □Other (please sp | pecify) | | | |
| d. First Name | Julie | | Last Name | Wilkins |
| e. E-mail Address | | | | |
| f. Phone Number | (863)675 | -2872 | | |



7/01/2026

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| 17. | Lobbyist Contact I | nformation | | | | |
|---|--|--|--|--|--|--|
| | a. Name James Randolph Spratt | | | | | |
| | b. Firm Name Magnolia Strategies LLC | | | | | |
| | c. E-mail Address jim@magnoliastrategiesllc.com | | | | | |
| | d. Phone Number (850)228-1296 | | | | | |
| | - | e the questions below for Water Projects only. or alternative state funding? | | | | |
| | ☑ Waste Water Re | evolving Loan | | | | |
| | ☑ Drinking Water Revolving Loan | | | | | |
| | □ Small Community Wastewater Treatment Grant | | | | | |
| | ☐ Other (please specify) | | | | | |
| | □ N/A | | | | | |
| 19. | What is the popula | tion 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) | | | | | |
| | □ N/A | | | | | |
| 20. | What is the status | of construction? | | | | |
| not started | | | | | | |
| 21. What percentage of the construction has been completed? | | | | | | |
| | 0 | | | | | |
| 22. | What is the estimate | ted completion date of construction? | | | | |