

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

LFIR # 3552

1. Project Title	Okeechobee Pe	Okeechobee Pedestrian Overpass Improvements					
2. Senate Sponsor	Ana Maria Rodri	guez					
3. Date of Request	01/16/2024						
4. Project/Program De	escription						
The funds will be us Okeechobee Road a	sed to provide lighti and W 4 Ave.	ng and aesthetic im	provements to the exi	sting pedestrian br	idge located on		
5. State Agency to red	ceive requested fu	unds Departm	ent of Transportation				
State Agency conta	icted? No						
6. Amount of the Nonr	ecurring Request	for Fiscal Year 20	24-2025				
		. 101 110001 1001 20		4	1		
Type of Funding			Amo	unt O			
Operations Fixed Capital Outlay	,			400,000	1		
Total State Funds F				400,000			
Total State I unus I	<u>\equesieu</u>			400,000	J		
7. Total Project Cost f	or Fiscal Year 202	24-2025 (including	matching funds avai	lable for this proj	ect)		
Type of Funding			Amount	Percentage			
Total State Funds R	equested (from que	estion #6)	400,000	80%			
Matching Funds					_		
Federal			0	0%			
State (excluding the amount of this request)			0	0%			
Local			100,000	20%			
Other			0	0%			
<b>Total Project Costs</b>	for Fiscal Year 2	024-2025	500,000	100%			
8. Has this project pre	eviously received	state funding?	No				
Fiscal Year	Amount		Specific	Vetoed	]		
(уууу-уу)	Recurring	Nonrecurring	Appropriation #				
9. Is future funding lik	cely to be request	ed?	No		7		
a. If yes, indicate n	onrecurring amοι	ınt per year.					
b. Describe the sou	rce of funding th	at can be used in I	ieu of state funding.				
					1		
					]		
10. Has the entity req	uesting this proje	ct received any fe	deral assistance rela	ted to the COVID-	19 pandemic?		
Yes	. ,	•			•		
162							

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



11. Status of Construction

Planning

Planning Engineering

14. Program Performance

entrance to the city.

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?

Total State Funds Requested (must equal total from question #6)

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

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400,000

The city received \$66 million in American Rescue Plan funds that were used to defray the costs of first responder salaries for COVID response efforts, to recover lost revenue as a result of COVID, as well as to fund various infrastructure improvements throughout the city.

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

Construction

The subject facilities are owned	by the Florida Department of Transportation.				
3. Details on how the requested s	3. Details on how the requested state 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/Major	or Renovation:	·			
Construction/Renovation/Land/	Total project cost is \$500,000, and the city will contribute \$100,000	400,00			

representing 20% of the cost of this construction.

The funds will be used to improve visibility for pedestrians using the bridge and also to improve the aesthetics of a main

N/A

No

08/01/2024

01/30/2025

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



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Okeechobee Road				ipioveiii	ents to th	e existing	pedestriari bridge located ori
c. What direct ser	vices will	be provided to	citizens by t	he appı	opriation	project?	?
The project will no	ot provide a	a direct service.					
d. Who is the targ	jet popula	tion served by t	his project?	How m	any indiv	riduals ar	e expected to be served?
The project will be	enefit the g	eneral population	n.				
e. What is the exp be measured?	ected ben	efit or outcome	of this proj	ect? Wh	at is the	methodo	ology by which this outcome wil
and pedestrians al	like. The ac he pedestri	esthetic improve ian overpass will	ments will be increase visi	appare	nt upon co	ompletion	g the visual experience for drivers of the project. The added lighting the overpass. The improved lightin
f. What are the su for failing to meet					-		n addition to its standard penalti act?
The City of Hialea Furthermore, the c							tract in the state of Florida. y propose.
15. Requester Contac	t Informati	ion					
a. First Name	Edteban		Last Name	Bovo			
b. Organization	Mayor, City of Hialeah						
c. E-mail Address	ebovo@hialeahfl.gov						
d. Phone Number	(305)883-5800 Ext.						
16. Recipient Contact	Information	on			-		
a. Organization	City of Hialeah						
b. Municipality and	d County	Miami-Dade					
c. Organization Ty	ре						
□For Profit Entity							
□Non Profit 501(d	c)(3)						
□Non Profit 501(d	c)(4)						
☑Local Entity							
□University or Co	ollege						
□Other (please s	pecify)						
d. First Name	Carlos		Last Name	San Jo	se		

e. E-mail Address | csanjose@hialeahfl.gov

**f. Phone Number** (305)883-5800



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#### 17. Lobbyist Contact Information

a. Name	Eduardo S Gonzalez	
b. Firm Name	Sun City Strategies, LLC	
c. E-mail Address	Address egonzalez102@yahoo.com	
d. Phone Number	(786)351-5849	