

LFIR # 1160

1. Project Title	Coral Gables Gravity Sa	itary Sewer Pipe Rehabilitation
2. Senate Sponsor	Ileana Garcia	
3. Date of Request	11/4/2025	
4. Project/Program D	escription	
work will include the	rehabilitation of aging sewe	n issues within a portion of Coral Gables' sanitary sewer system. The r pipes through construction methods such as cement grouting, sliplipe lining, spot repairs, and minor pipe replacements.
5. State Agency to re	ceive requested funds	Department of Environmental Protection
State Agency conta	acted? No	
6. Amount of the Non	recurring Request for Fisc	al Year 2026-2027
Type of Funding		Amount
Operating		0
Fixed Capital Outlay		450,000
	Requested	450.000

7. Total Project Cost for Fiscal Year 2026-2027 (including matching funds available for this project)

Type of Funding	Amount	Percentage	
Total State Funds Requested (from question #6)	450,000	50%	
Matching Funds			
Federal	0	0%	
State (excluding the amount of this request)	0	0%	
Local	450,000	50%	
Other	0	0%	
Total Project Costs for Fiscal Year 2026-2027	900,000	100%	

8. Has this project previously received state funding? If yes, provide the most recent instance:

Fiscal Year	Amo	ount	Specific	Vetoed	
(уууу-уу)	Recurring	Nonrecurring	Appropriation #		
2025-26	0	500,000	1555	No	

9. Is future-year funding likely to be requested?

500,000

Yes

Yes

a. If yes, indicate nonrecurring amount per year.

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

City uses sanitary sewer operating funds for this activity. State funding will augment funding amount available for projects.

Complete questions 10 and 11 for Fixed Capital Outlay Projects



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0. Status	of Cor	struction
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a. What is the cur	rent phase of the	project?				
Planning	O Design	Construction	O N/A			
b. Is the project "	shovel ready" (i.e	e permitted)?		Yes		
c. What is the est	imated start date	of construction?		11/1/2026		
d. What is the est	imated completio	on date of construc	ction?	12/31/2027		
e. What funding s	tream will be use	d for ongoing ope	rations a	nd maintenance of	the project?	
City uses sanitary	y sewer operating	funds for this activit	y.			
		eceive, directly or of the facility and		y, any fixed capital o	outlay funding	. Include the
City of Coral Gal	bles (Owner)					
2. Details on how th	ne requested state	e funds will be exp	ended			

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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					
Salary and Benefits		0			
Expense/Equipment/Travel/Supplies/ Other		0			
Consultants/Contracted Services/Study		0			
Fixed Capital Construction/Major Renovation:					
Construction/Renovation/Land/ Planning Engineering	This project will rehabilitate inflow and infiltration issues within a portion of Coral Gables' sanitary sewer system. The work will include the rehabilitation of aging sewer pipes through construction methods such as cement grouting, slip-lining, cured-in-place pipe lining, fold-and-form pipe lining, spot repairs, and minor pipe replacements.	450,000			
Total State Funds Requested (must equal total from question #6) 450,000					

13. Program Performance

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

This project will rehabilitate inflow and infiltration issues within a portion of Coral Gables' sanitary sewer system. The work will include the rehabilitation of aging sewer pipes through construction methods such as cement grouting, sliplining, cured-in-place pipe lining, fold-and-form pipe lining, spot repairs, and minor pipe replacements.

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



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The City will contract out the services for pipe sewer rehabilitation work.
c. What direct services will be provided to citizens by the appropriation project?
N/A
d. Who is the target population served by this project? How many individuals are expected to be served?
City Wide improvements to service all residents within sanitary sewer basins.
e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?
Reduce the infiltration of stormwater and groundwater into the sanitary sewer system, less frequent occurrences of sanitary sewer overflows and reduce impact to the quality of groundwater and adjacent water bodies and a reduction of sewer bills from Miami-Dade County for the treatment of raw sewage.
f. What are the suggested penalties that the contracting agency may consider in addition to its standard penalti
for failing to meet deliverables or performance measures provided for in the contract?
City requires a performance bond and establishes liquidated damages in construction contractor agreements to address nonperformance of work and delays in project delivery.
14. Is this project related to mitigation, response, or recovery from a natural disaster? No
a. If Yes, what phase best describes the project?
☐ Mitigation (reducing or eliminating potential loss of life or property)
□ Response (addressing the immediate and short-term effects of a natural disaster)
□ Recovery (assisting communities return to normal operations, including rebuilding damaged infastructure)
b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):
15. Has the entity applied for or received federal assistance for this project?
☐ Yes, Applied
☐ Yes, Received
□ No
□ No, but intends to apply
a. If yes, provide the FEMA project worksheet ID#:
b. Provide the total project cost listed on the FEMA project worksheet:
16. Has the entity applied for or received state assistance for this project (other than this request)?
☐ Yes, Applied
☐ Yes, Received



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	□ No	
	☐ No, but intends t	o apply
	a. If yes, specify th Commerce):	e program and state agency (ex. Local Government Emergency Bridge Loan, Department of
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Ρl	ease complet	e questions 17 through 21 for Water Projects only.
17.	Have you been aw	arded or applied for alternative state funding for this project?
	□ Water Quality I	mprovement Grant Program
	☐ Resilient Florid	a Grant Program
	☐ Wastewater Re	volving Loan
	□ Drinking Water	Revolving Loan
	☐ Small Commun	ity Wastewater Treatment Grant
	☐ Other (please s	pecify, ex. Alternative Water Supply Grants)
	☑ N/A	
18.	What is the popula	ation economic status?
	☐ Financially Disa	advantaged Community (ch. 62-552, F.A.C)
	☐ Financially Disa	advantaged Municipality (ch. 62-552, F.A.C)
	☐ Rural Area of E	conomic Concern
	☐ Rural Area of C	Opportunity (s. 288.0656, Florida Statutes)
	☑ N/A	
19.	What is the status	of construction?
	Shovel Ready	
20.	What percentage of	of the construction has been completed?
	0	
21.	What is the estima	ted completion date of construction? 12/31/2027
22.	Requester Contac	t Information
	a. First Name	Peter Last Name Iglesias
	b. Organization	City of Coral Gables



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c. E-m	ail Address	piglesias@coralgables.com							
d. Pho	ne Number	(305)460	-5204	Ext.					
23. Recipi	23. Recipient Contact Information								
a. Org	anization	City of Co	oral Gables			_			
b. Mur	nicipality and	d County	Miami-Dade						
c. Orga	c. Organization Type								
□Foi	Profit Entity								
□No	n Profit 501(d	:)(3)							
□No	n Profit 501(d	:)(4)							
☑Loc	☑Local Entity								
□Un	iversity or Co	College							
□Oth	ner (please sp	ecify)							
d. Firs	t Name	Peter		Last Name	Iglesias				
e. E-m	ail Address	ess piglesias@coralgables.com							
f. Pho	ne Number	(305)460	-5204	Ext.					
24. Lobbyist Contact Information									
a. Nan	ne	Jared Rosenstein							
b. Firn	n Name	Capital City Consulting LLC							
c. E-m	ail Address	jared@cccfla.com							
d Pho	ne Number	(786)247-8716							

The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.