



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2026-2027

LFIR # 1315

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Situated within the City is a vast gravity sewer collection system spanning nearly 91 miles, which the City both owns and manages. Over time, around 17 miles of this system have deteriorated due to natural settling and age, leading to a multitude of issues. The compromised state of these pipes invites an influx of groundwater, necessitates superfluous treatment, triggers sanitary sewer overflows (SSO) from manholes and lift stations, and negatively affects surface water quality. The City has committed efforts to maintain compliance with the FDEP and other regulatory agencies. This Project will rehabilitate approximately 2.5 miles of ailing gravity sewer lines as a determined effort to rectify the City's existing aging sewer piping. This Project includes the installation of folded form liners, the repair of damaged pipe sections, and the removal of intrusions. This Project will improve wastewater management, storm water management, and ground water quality.

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2026-2027

| Type of Funding                    | Amount         |
|------------------------------------|----------------|
| Operating                          | 0              |
| Fixed Capital Outlay               | 750,000        |
| <b>Total State Funds Requested</b> | <b>750,000</b> |

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)       | 750,000          | 50%         |
| <b>Matching Funds</b>                                |                  |             |
| Federal                                              | 0                | 0%          |
| State (excluding the amount of this request)         | 0                | 0%          |
| Local                                                | 750,000          | 50%         |
| Other                                                | 0                | 0%          |
| <b>Total Project Costs for Fiscal Year 2026-2027</b> | <b>1,500,000</b> | <b>100%</b> |

8. Has this project previously received state funding?

If yes, provide the most recent instance:

| Fiscal Year<br>(YYYY-YY) | Amount    |              | Specific<br>Appropriation # | Vetoed |
|--------------------------|-----------|--------------|-----------------------------|--------|
|                          | Recurring | Nonrecurring |                             |        |
|                          |           |              |                             |        |

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

a. If yes, indicate nonrecurring amount per year.

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



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## Complete questions 10 and 11 for Fixed Capital Outlay Projects

### 10. Status of Construction

a. What is the current phase of the project?

☐ Planning ☒ Design ☐ Construction ☐ N/A

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

Yes

c. What is the estimated start date of construction?

07/01/2026

d. What is the estimated completion date of construction?

07/01/2027

e. What funding stream will be used for ongoing operations and maintenance of the project?

Wastewater Fund

11. 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.

City of Cooper City.

### 12. Details on how the requested state funds will be expended

| Spending Category                                                      | Description                                                                                                                                                                                                                                                                                                    | Amount         |
|------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|
| <b>Administrative Costs:</b>                                           |                                                                                                                                                                                                                                                                                                                |                |
| Executive Director/Project Head Salary and Benefits                    |                                                                                                                                                                                                                                                                                                                | 0              |
| Other Salary and Benefits                                              |                                                                                                                                                                                                                                                                                                                | 0              |
| Expense/Equipment/Travel/Supplies/Other                                |                                                                                                                                                                                                                                                                                                                | 0              |
| Consultants/Contracted Services/Study                                  |                                                                                                                                                                                                                                                                                                                | 0              |
| <b>Operational Costs</b>                                               |                                                                                                                                                                                                                                                                                                                |                |
| Salary and Benefits                                                    |                                                                                                                                                                                                                                                                                                                | 0              |
| Expense/Equipment/Travel/Supplies/Other                                |                                                                                                                                                                                                                                                                                                                | 0              |
| Consultants/Contracted Services/Study                                  |                                                                                                                                                                                                                                                                                                                | 0              |
| <b>Fixed Capital Construction/Major Renovation:</b>                    |                                                                                                                                                                                                                                                                                                                |                |
| Construction/Renovation/Land/Planning Engineering                      | Funds will be used to repair and rehabilitate existing sanitary sewer pipes via pipe lining: Cleaning, video inspecting, repair and rehabilitating of approximately 2.5 miles of degraded gravity sewer lines by installing folded form liners, repairing damaged sections of piping, and removing intrusions. | 750,000        |
| <b>Total State Funds Requested (must equal total from question #6)</b> |                                                                                                                                                                                                                                                                                                                | <b>750,000</b> |

### 13. Program Performance

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



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In the year 2023, the City engaged an independent consultant to undertake an initial CCTV inspection of the gravity sewer mains citywide. This investigation was designed to pinpoint the areas of greatest concern within our sewer piping system. As a result of this examination, this project emerged as a site of critical importance. The specific goal to be achieved with State funds is the rehabilitation of approximately 2.5 miles of deteriorated gravity sewer lines. The successful completion of this project will have manifold positive effects. It will enhance the management of wastewater and storm water, improve the quality of ground and surface water, and provide protection to residential properties. Furthermore, the Project will shield residents from potential negative environmental repercussions from Sanitary Sewer Overflows (SSO's).

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

Funds will be used to repair and rehabilitate existing sanitary sewer pipes via pipe lining (lining of existing sanitary sewer pipes). Activities to be provided to meet the intended purpose of these funds include the cleaning and video inspection of the gravity sewer collection system and constructing/rehabilitating of approximately 2.5 miles of degraded gravity sewer lines by installing folded form liners, repairing damaged sections of piping, and removing intrusions. The least disruptive and most cost effective means of sewer pipe rehabilitation is by internal lining. The lining has a lifespan (extended life) that is comparable to a new pipe constructed by conventional trench excavation.

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

Improvements will mitigate volume of inflow and infiltration into the sanitary sewer system. Repairs will mitigate sanitary sewer overflows (SSO). The potential harm to the public if this Project is not funded includes the further degrading and deteriorating of the piping, which may lead to environmental harms such as contaminated ground water and ecosystems.

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

All City residents - 34,400. Direct services to citizens include improved ground water quality and surface water quality, and enhanced protection of residential homes from sanitary sewer overflows (SSO). This Project will improve wastewater management, storm water management, and ground water quality.

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

Expected benefits include, improved ground water quality and environment, extended life cycle of existing sewer piping, reduced excess rainfall/infiltration or inflow/ground water for treatment during heavy rains, reduced flows through manholes and lift stations, prevented sanitary sewer overflows (SSO) into sensitive water bodies of the State, improved wastewater management and ground/surface water quality, and the protection of residential property from other adverse environmental impacts. The methodology by which outcomes will be measured includes flows and volumes at wastewater treatment plant on an annual avg. daily basis, measured mechanical repairs at lift stations, monitored run times of the pumps at lift stations, and measured operational efficiency.

**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 in the contract?**

Non-payment of invoices until milestones achieved; implementation of corrective action plan. Revocation of state funding. The contracting agency may consider rejection of deliverables and a corrective action plan to permit the Grantee to remedy the rejection. If a remedy is not possible, the contracting agency may consider the return of funds or an invoice reduction.

**14. Is this project related to mitigation, response, or recovery from a natural disaster?** ☐ Yes

**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 infrastructure)

**b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):**



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Mitigation: Future storms sanitary sewer overflows (reducing/eliminating potential loss of property)

**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
- ☒ No
- ☐ No, but intends to apply

**a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):**

## Please complete questions 17 through 21 for Water Projects only.

**17. Have you been awarded or applied for alternative state funding for this project?**

- ☐ Water Quality Improvement Grant Program
- ☐ Resilient Florida Grant Program
- ☐ Wastewater Revolving Loan
- ☐ Drinking Water Revolving Loan
- ☐ Small Community Wastewater Treatment Grant
- ☐ Other (please specify, ex. Alternative Water Supply Grants)
- ☒ N/A

**18. What is the population economic status?**



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- ☐ 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

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

Expected to start 07/01/2026

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

0

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

7/1/2027

#### 22. Requester Contact Information

a. First Name  Last Name

b. Organization

c. E-mail Address

d. Phone Number  Ext.

#### 23. Recipient Contact Information

a. Organization

b. Municipality and County

#### c. Organization Type

- ☐ For Profit Entity
- ☐ Non Profit 501(c)(3)
- ☐ Non Profit 501(c)(4)
- ☒ Local Entity
- ☐ University or College
- ☐ Other (please specify)

d. First Name  Last Name

e. E-mail Address

f. Phone Number  Ext.



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#### 24. Lobbyist Contact Information

|                   |                                                |
|-------------------|------------------------------------------------|
| a. Name           | <input type="text" value="Rana G. Brown"/>     |
| b. Firm Name      | <input type="text" value="Ronald L. Book PA"/> |
| c. E-mail Address | <input type="text" value="rana@rlbookpa.com"/> |
| d. Phone Number   | <input type="text" value="(305)935-1866"/>     |

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