

LFIR # 1324

1.	Project Title	Winter Park - SR 4	26 & Denning	Drive Intersection	Improvements	
2.	Senate Sponsor	Jason Brodeur				
3.	Date of Request	11/17/2025				
4.	Project/Program Des	scription				
	46 in Seminole County connector to regional Winter Park where it is and Denning Drive who movements and westle	y. It connects Genevarterials SR 434, SR sthe primary east-where the four-lane roabound to southbound ne roadway to or belt will result in signific	va, Oviedo, Go R 436, US 17- est roadway. adway has no d movements. low the capac	oldenrod, Winter Pa 92, and Interstate 4 A major choke poin exclusive left-turn l . As a result, signific ity of a two-lane roa	irk, and Fairview Shore Its most congested so It in that segment is the anes to facilitate eastle ant bottlenecks often adway. Through the ac	egment is in the City of e intersection of SR 426 bound to northbound develop and reduce the Idition of exclusive left-
5.	State Agency to rece	eive requested fund	Is Depa	rtment of Transport	ation	
	State Agency contac	ted? No				
6.	Amount of the Nonre	curring Request fo	r Fiscal Year	2026-2027		
	Type of Funding				Amount	
	Operating					0
	Fixed Capital Outlay				1,350,00	00
	Total State Funds Re	eauested			1,350,00	20
		oquootou			1,330,00	<i>J</i> U
7.	Total Project Cost for	•	2027 (includi	ng matching funds	· ·	<u> </u>
7.		•	2027 (includi	ng matching funds Amount	· ·	<u> </u>
7.	Total Project Cost for	r Fiscal Year 2026-2			s available for this pr	oject)
7.	Total Project Cost for	r Fiscal Year 2026-2		Amount	s available for this pr	oject)
7.	Total Project Cost for Type of Funding Total State Funds Rec	r Fiscal Year 2026-2		Amount	Percentage	oject)
7.	Total Project Cost for Type of Funding Total State Funds Records Matching Funds	r Fiscal Year 2026-2 quested (from questi	ion #6)	Amount	Percentage 000 31 0 0 0 0	oject) % % %
7.	Total Project Cost for Type of Funding Total State Funds Rec Matching Funds Federal State (excluding the a Local	r Fiscal Year 2026-2 quested (from questi	ion #6)	Amount	Percentage 000 31 0 0 0 0 000 69	oject) % % % %
7.	Total Project Cost for Type of Funding Total State Funds Red Matching Funds Federal State (excluding the a	r Fiscal Year 2026-2 quested (from questi	ion #6)	Amount 1,350	Percentage 000 31 0 0 0 0 000 69	oject) % % %
7.	Total Project Cost for Type of Funding Total State Funds Rec Matching Funds Federal State (excluding the a Local	r Fiscal Year 2026-2 quested (from questi	ion #6)	Amount 1,350	Percentage 000 31 0 0 0 0 000 69 0 0	oject) % % % % %
	Total Project Cost for Type of Funding Total State Funds Rec Matching Funds Federal State (excluding the a Local Other	r Fiscal Year 2026-2 quested (from questi amount of this reques for Fiscal Year 2026	st) 6-2027 ate funding?	Amount 1,350	Percentage 000 31 0 0 0 0 000 69 0 0	oject) % % % % %
	Total Project Cost for Type of Funding Total State Funds Rec Matching Funds Federal State (excluding the a Local Other Total Project Costs f Has this project prev If yes, provide the m	r Fiscal Year 2026-2 quested (from questi amount of this reques for Fiscal Year 2026	ion #6) St) 6-2027 ate funding?	3,000 4,350 No Specific	Percentage 000 31 0 0 0 0 00 000 69 0 0 00 000 100	oject) % % % % %
	Total Project Cost for Type of Funding Total State Funds Recommendate Matching Funds Federal State (excluding the a Local Other Total Project Costs for Has this project previous forms and the matching for the m	quested (from questi quested (from questi amount of this request for Fiscal Year 2026 viously received states and recent instance	ion #6) St) 6-2027 ate funding?	3,000 4,350 No Specific	Percentage 000 31 0 0 0 0 00 000 69 0 0 00 000 100	oject) % % % % %
	Total Project Cost for Type of Funding Total State Funds Rec Matching Funds Federal State (excluding the a Local Other Total Project Costs f Has this project prev If yes, provide the m	quested (from questi quested (from questi amount of this request for Fiscal Year 2026 viously received states ost recent instance	st) 6-2027 ate funding?	3,000 4,350 No Specific	Percentage 000 31 0 0 0 0 00 000 69 0 0 00 000 100	oject) % % % % %
8.	Total Project Cost for Type of Funding Total State Funds Rec Matching Funds Federal State (excluding the a Local Other Total Project Costs f Has this project prev If yes, provide the m	quested (from question amount of this requested received states are cost recent instance amount Recurring	ion #6) St) S-2027 Ste funding? Storic Monrecurring	3,000 4,350 No Specific	Percentage 000 31 0 0 0 0 00 000 69 0 0 00 000 100	oject) % % % % %
8.	Total Project Cost for Type of Funding Total State Funds Recommatching Funds Federal State (excluding the a Local Other Total Project Costs for Has this project previous fives, provide the more fiscal Year (yyyy-yy)	quested (from question and provided in the pro	ion #6) St) 6-2027 ate funding? e: nt Nonrecurrin	Amount 1,350 3,000 4,350 No Specific Appropriatio	Percentage 000 31 0 0 0 0 00 000 69 0 0 00 000 100	oject) % % % % %



10. Status of Construction

13. Program Performance

response times for first responders.

Planning

a. What is the current phase of the project?

O 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?

The Florida Senate Local Funding Initiative Request Fiscal Year 2026-2027

N/A

No

01/04/2027

06/25/2027

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Complete questions 10 and 11 for Fixed Capital Outlay Projects

Construction

As the facility is SR 426, FDOT w acquired, and is providing the nee	ill continue to operate and maintain the roadway. The City of Winter ded additional right of way, as a match to facilitate this improvement	Park has
List the owners of the facility to relationship between the owner	receive, directly or indirectly, any fixed capital outlay funding. s of the facility and the entity.	Include the
City of Winter Park		
Details on how the requested sta	·	
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		<u>.</u>
Salary and Benefits		
Expense/Equipment/Travel/Supplies/ Other		
Consultants/Contracted Services/Study		
Fixed Capital Construction/Major	or Renovation:	
Construction/Renovation/Land/ Planning Engineering	Design, Surveying, & Geo-technical Investigation - 250,000 Construction - 1,000,000 Construction Engineering & Inspection - 100,000	1,350,0
Total State Funda Beguested (n	nust equal total from question #6)	1,350.0

These funds will result in significant improvement to safety, significant decrease in congestion, and decreased

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

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



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Engineering designs and studies, the construction of turn lanes and traffic signal modifications, and project oversight consistent with FDOT's best practices, will be performed.

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

Citizens will benefit from significant safety improvements, much improved travel time, and reduction in response times by First Responders.

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

The target population comprises the residents and businesses in Southeast Seminole County and Northeast Orange County, including a number of incorporated cities. Over 130,000 residents are expected to be served by the improvements.

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

The expected benefits will include reduction in crashes and injuries, significantly improved travel time for commuters, and reduction to First Responder travel times. Standard Before and After engineering and planning studies, as well as industry standard capacity and level of service analyses will predict and measure the outcomes.

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?

Liquidated Damages, as prescribed in FDOT's Standard Specifications, will be used as penalties for contractor failure to meet deliverable and performance measures.

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) Name of the natural disaster (or Executive Order # for events not under a federal declaration): Second		
 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): 5. Has the entity applied for or received federal assistance for this project? Yes, Applied Yes, Received No No, but intends to apply 	4. Is t	his project related to mitigation, response, or recovery from a natural disaster? No
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): B. Has the entity applied for or received federal assistance for this project? Yes, Applied Yes, Received No.	a. If	Yes, what phase best describes the project?
□ 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): 5. Has the entity applied for or received federal assistance for this project? □ Yes, Applied □ Yes, Received □ No □ No, but intends to apply		Mitigation (reducing or eliminating potential loss of life or property)
b. Name of the natural disaster (or Executive Order # for events not under a federal declaration): 5. Has the entity applied for or received federal assistance for this project? Yes, Applied Yes, Received No No, but intends to apply		Response (addressing the immediate and short-term effects of a natural disaster)
5. Has the entity applied for or received federal assistance for this project? Yes, Applied Yes, Received No		Recovery (assisting communities return to normal operations, including rebuilding damaged infastructure
☐ Yes, Applied ☐ Yes, Received ☐ No ☐ No, but intends to apply	b. N	ame of the natural disaster (or Executive Order # for events not under a federal declaration):
☐ Yes, Applied ☐ Yes, Received ☐ No ☐ No, but intends to apply		
□ No, but intends to apply		
□ No, but intends to apply		Yes, Received
	□ 1	No
a. If yes, provide the FEMA project worksheet ID#:	□ 1	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)?



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☐ Yes, Applied				
☐ Yes, Received				
□ No				
☐ No, but intends t	o apply			
a. If yes, specify th Commerce):	e program and state ager	ncy (ex. Loca	ıl Governmen	t Emerge
7. Requester Contac	t Information			
a. First Name	Charles	Last Name	Ramdatt	
b. Organization	Department of Public Wor Park	rks & Transpo	ortation, City of	Winter
c. E-mail Address	cramdatt@cityofwinterpar	k.org		
d. Phone Number	(407)599-3242	Ext.		
b. Municipality and	-			
c. Organization Ty	pe			
□For Profit Entity				
□Non Profit 501(d	c)(3)			
□Non Profit 501(d	c)(4)			
☑Local Entity				
□University or Co	llege			
□Other (please sp	pecify)			
d. First Name	Charles	Last Name	Ramdatt	
e. E-mail Address	cramdatt@cityofwinterpar	k.org		
f. Phone Number	(407)599-3242	Ext.		
9. Lobbyist Contact I	nformation			1
a. Name	Angela M. Drzewiecki			
b. Firm Name	GrayRobinson PA			
c. E-mail Address	angela.drzewiecki@gray-	robinson.com	<u> </u>	



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d. Phone Number	(850)577-9090

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