

**LFIR # 1372** 

1. Project Title	Pompano Beach - North Rive Corridor	rside C	Drive Multimodal Safe	ety and Resilience		
2. Senate Sponsor	Tina Polsky					
3. Date of Request	11/18/2025					
4. Project/Program De	escription					
corridor serves more 12,000 daily trips. The	nance a critical one mile roadway to than 44,000 people in Broward ne corridor connects two major rocuation route to A1A. These impror.	County oadway	y, including over 4,00 ys that provide acces	00 local residents, a ss to the barrier islar	nd accommodates nd, and serves as the	
5. State Agency to re	ceive requested funds De	partme	ent of Transportation			
State Agency conta	icted? No	•				
	recurring Request for Fiscal Ye	ear 20:	26-2027			
Type of Funding			Amo	ount		
Operating				0		
Fixed Capital Outlay			895,000			
Total State Funds I	Requested			895,000		
7. Total Project Cost f	or Fiscal Year 2026-2027 (inclu	ıding r	matching funds ava	ilable for this proje	ect)	
Type of Funding			Amount	Percentage		
	equested (from question #6)		895,000	14%		
Matching Funds				201		
Federal Control of the control of th			0	0%		
State (excluding the amount of this request)			5,405,000	0%		
	Local			86%		
Other			0	0%		
Total Project Costs	for Fiscal Year 2026-2027		6,300,000	100%		
	eviously received state funding most recent instance:	g?	No			
Fiscal Year	Amount		Specific	Vetoed		
(уууу-уу)	Recurring Nonrecur	ring	Appropriation #			
•	ng likely to be requested? onrecurring amount per year.		No			



10. Status of Construction

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

LFIR # 1372

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

a. What is the current phase of the project?	
○ Planning	4
b. Is the project "shovel ready" (i.e permitted)?	Yes
c. What is the estimated start date of construction?	01/15/2026
d. What is the estimated completion date of construction?	01/15/2027
e. What funding stream will be used for ongoing operations	and maintenance of the project?
Maintenance in the annual budget, and CIP in future if necessary	ary.
11. List the owners of the facility to receive, directly or indirec relationship between the owners of the facility and the entire	
City of Pompano Beach	

#### 12. 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		0	
Operational Costs			
Salary and Benefits		0	
Expense/Equipment/Travel/Supplies/Other		0	
Consultants/Contracted Services/Study		0	
Fixed Capital Construction/Major	or Renovation:		
Construction/Renovation/Land/ Planning Engineering	Construction elements include installation of ADA-compliant continuous sidewalks to improve pedestrian connectivity, upgraded LED street lighting to enhance corridor visibility and safety, stormwater drainage improvements with sea level rise adaptation measures to increase roadway resilience, full-depth pavement resurfacing to extend the service life of the corridor, and associated enhancements to pedestrian crossings, curbs, and emergency vehicle access points.	895,000	
Total State Funds Requested (must equal total from question #6)			

#### 13. Program Performance

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



**LFIR # 1372** 

These enhancements will provide safer pedestrian access for children and a significant elderly population who use the corridor to reach important destinations for recreation, mobility, and social engagement. Our stormwater upgrades will

also support emergency response operations, as this is a major route for first responders. Together, these improvements will create a safer, more accessible corridor. b. What activities and services will be provided to meet the intended purpose of these funds?

These improvements will create a safer, more accessible, and resilient transportation corridor that supports daily mobility, emergency preparedness, and community connectivity.

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

Safer pedestrian access for children and a significant elderly population who use the corridor to reach important destinations for recreation, mobility, and daily needs.

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

All 4,000 residents and visitors- over 44,000 people.

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

The benefits are safety, pedestrian and traffic flow and will be measured by reporting pedestrian-related incidents and improved safety perceptions among residents. Enhanced lighting, sidewalks, and drainage will decrease environmental and crime-related risks, with surveys showing higher levels of safety and greater pedestrian activity during evening

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?

Notification with opportunity to cure. The City uses Liquidated Damages of \$1,000/day for failure to complete a project on a timply fachion

on a timely labilion.
4. 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):
5. 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#:



**LFIR # 1372** 

	project c	ost listed on the	e FEMA proj	ect worksneet:		
6. Has the entity app	lied for o	r received state	assistance t	or this project (otl	ner than this rec	quest)?
☐ Yes, Applied						
☐ Yes, Received						
□ No						
☐ No, but intends to	n apply					
a. If yes, specify the Commerce):		n and state ager	ncy (ex. Loca	al Government Em	ergency Bridge	Loan, Departme
. Requester Contact	Informat	ion				
a. First Name	Earl		Last Name	Bosworth		
b. Organization	City of Po	ompano Beach				
c. E-mail Address	earl.bosv	vorh@copbfl.com	n			
d. Phone Number	(954)786	-4601	Ext.			
Daniminut Control	lf = = 4!					
. Recipient Contact						
a. Organization	City of Po	ompano Beach				
a. Organization b. Municipality and	City of Po	ompano Beach				
a. Organization b. Municipality and c. Organization Type	City of Po	ompano Beach				
<ul><li>a. Organization</li><li>b. Municipality and</li><li>c. Organization Type</li><li>□For Profit Entity</li></ul>	City of Po	ompano Beach				
a. Organization b. Municipality and c. Organization Typ  □For Profit Entity  □Non Profit 501(c	City of Po	ompano Beach				
<ul><li>a. Organization</li><li>b. Municipality and</li><li>c. Organization Type</li><li>□For Profit Entity</li></ul>	City of Po	ompano Beach				
a. Organization b. Municipality and c. Organization Typ  □For Profit Entity  □Non Profit 501(c	City of Po	ompano Beach				
a. Organization b. Municipality and c. Organization Typ  □For Profit Entity  □Non Profit 501(c)  □Non Profit 501(c)	City of Po	ompano Beach				
a. Organization b. Municipality and c. Organization Typ  □For Profit Entity  □Non Profit 501(c)  □Non Profit 501(c)  □Local Entity	City of Po	ompano Beach				
a. Organization b. Municipality and c. Organization Typ  For Profit Entity  Non Profit 501(c)  Non Profit 501(c)  Local Entity  University or Co	City of Po	ompano Beach	Last Name	Bosworth		
a. Organization b. Municipality and c. Organization Typ  For Profit Entity  Non Profit 501(c)  Non Profit 501(c)  Local Entity  University or Co  Other (please sp	City of Port County  City of P	ompano Beach		Bosworth		

Robert Schenck

a. Name



**LFIR # 1372** 

b. Firm Name	The Legis Group	
c. E-mail Address	Rob@legisgroupfl.com	
d. Phone Number	(352)585-7338	

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