

LFIR # 1397

| 1. Project Title | Hawthorne Aven | Hawthorne Avenue Drainage Improvements | | | | | | | | |
|--|--|---|---|-------------------------------|------|--|--|--|--|--|
| 2. Senate Sponsor | Shevrin Jones | | | | | | | | | |
| 3. Date of Request | 11/19/2025 | | | | | | | | | |
| 4. Project/Program D | escription | | | | | | | | | |
| The Town of Surfside seeks state funding to construct stormwater drainage improvements in Focus Area 4, the neighborhood between Hawthorne Avenue and Irving Avenue from 89th to 90th Street. This area experiences recurring roadway and yard flooding due to undersized infrastructure that cannot handle major rainfall events. The project will expand system capacity by upsizing stormwater pipes, adding new inlets and outfalls to Biscayne Bay, and restoring affected roadways and surfaces. These upgrades will reduce flood depths, improve drainage efficiency, and enhance long-term resilience consistent with the Town's Stormwater Master Plan. | | | | | | | | | | |
| 5. State Agency to re | 5. State Agency to receive requested funds Department of Environmental Protection | | | | | | | | | |
| State Agency conta | • | | | | | | | | | |
| 6. Amount of the Non | | for Fiscal Year 20 | 26-2027 | | | | | | | |
| Type of Funding | Type of Funding | | | unt | | | | | | |
| Operating | Operating | | | 0 | | | | | | |
| Fixed Capital Outlay | Fixed Capital Outlay | | | 650,000 | | | | | | |
| Total State Funds Requested | | | 650,000 | | | | | | | |
| | for F ioral Voor 000 | | | | 4 | | | | | |
| 7. Total Project Cost f | TOT FISCAL YEAR 2020 | 6-2027 (including | matching funds avai | ilable for this proje | ect) | | | | | |
| 7. Total Project Cost f Type of Funding | for Fiscal Year 2020 | 5-2027 (including | Amount | lable for this proje | ect) | | | | | |
| Type of Funding | Requested (from que | , - | | | ect) | | | | | |
| Type of Funding Total State Funds R Matching Funds | | , - | Amount | Percentage 50% | ect) | | | | | |
| Type of Funding Total State Funds R Matching Funds Federal | Requested (from que | stion #6) | Amount 650,000 | Percentage 50% | ect) | | | | | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the | | stion #6) | Amount 650,000 0 | Percentage 50% 0% 0% | ect) | | | | | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local | Requested (from que | stion #6) | Amount 650,000 0 0 650,000 | Percentage 50% 0% 0% 50% | ect) | | | | | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other | Requested (from que | stion #6) | Amount 650,000 0 0 650,000 0 | Percentage 50% 0% 0% 50% 50% | ect) | | | | | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other | Requested (from que | stion #6) | Amount 650,000 0 0 650,000 | Percentage 50% 0% 0% 50% | ect) | | | | | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pr | Requested (from que amount of this requested for Fiscal Year 20 | stion #6) lest) 26-2027 state funding? | Amount 650,000 0 0 650,000 0 | Percentage 50% 0% 0% 50% 50% | ect) | | | | | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pr If yes, provide the | Requested (from que e amount of this requested se for Fiscal Year 20 reviously received se | stion #6) pest) 26-2027 state funding? ace: | Amount 650,000 0 650,000 0 1,300,000 No Specific | Percentage 50% 0% 0% 50% 50% | ect) | | | | | |
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| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pr If yes, provide the Fiscal Year (уууу-уу) | e amount of this requested (from que e amount of this requested for Fiscal Year 20 reviously received sometimes amost recent instantian Recurring | stion #6) 26-2027 state funding? ace: bunt Nonrecurring | Amount 650,000 0 650,000 0 1,300,000 No Specific Appropriation # | Percentage 50% 0% 0% 50% 100% | ect) | | | | | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pr If yes, provide the | e amount of this requested (from que e amount of this requested for Fiscal Year 20 reviously received sometimes amost recent instantian Recurring | stion #6) 26-2027 state funding? ace: bunt Nonrecurring | Amount 650,000 0 650,000 0 1,300,000 No Specific | Percentage 50% 0% 0% 50% 100% | ect) | | | | | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pr If yes, provide the Fiscal Year (yyyy-yy) 9. Is future-year fund | e amount of this requested (from que e amount of this requested for Fiscal Year 20 reviously received sometimes amost recent instantian Recurring | stion #6) 26-2027 state funding? ace: bunt Nonrecurring uested? | Amount 650,000 0 650,000 0 1,300,000 No Specific Appropriation # | Percentage 50% 0% 0% 50% 100% | ect) | | | | | |
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| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pr If yes, provide the Fiscal Year (yyyy-yy) 9. Is future-year fund a. If yes, indicate r | Requested (from que e amount of this requested security received s | stion #6) 26-2027 state funding? ce: unt Nonrecurring uested? nt per year. | Amount 650,000 0 650,000 1,300,000 No Specific Appropriation # | Percentage 50% 0% 0% 50% 100% | ect) | | | | | |



10. Status of Construction

13. Program Performance

Planning

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?

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

N/A

No

10/01/2026

09/30/2027

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650,000

Complete questions 10 and 11 for Fixed Capital Outlay Projects

Construction

| e. What funding stream will be us | sed for ongoing operations and maintenance of the project? | | | | | |
|---|--|----------|--|--|--|--|
| Ongoing operations and maintena supports maintenance of all storm | Ongoing operations and maintenance will be funded through the Town of Surfside's Stormwater Utility Fund, which supports maintenance of all stormwater infrastructure within the Town. | | | | | |
| . List the owners of the facility to relationship between the owner | o receive, directly or indirectly, any fixed capital outlay funding. Inc is of the facility and the entity. | lude the | | | | |
| The Town of Surfside will receive | e the funds and carry out the work within Town limits. | | | | | |
| Details on how the requested sta | ate 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 | | | | | | |
| Salary and Benefits | | (| | | | |
| Expense/Equipment/Travel/Supplies/Other | | (| | | | |
| Consultants/Contracted Services/Study | | (| | | | |
| Fixed Capital Construction/Major | or Renovation: | | | | | |
| Construction/Renovation/Land/ Planning Engineering | Funds will be used to pay a licensed construction contractor for the installation of new stormwater pipes, inlets, manholes, and outfall connections to Biscayne Bay, including all associated roadway and surface restoration work. | 650,000 | | | | |

The project will reduce chronic flooding in Focus Area 4 by increasing stormwater conveyance capacity and adding new outfall connections to Biscayne Bay. These improvements will strengthen the Town's stormwater system, enhance roadway access during heavy rainfall, and protect nearby homes and infrastructure from flood-related damages.



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

Funds will be used solely for construction of the stormwater drainage improvements, including installation of upsized stormwater pipes, new manholes and inlets, supplemental outfall structures to Biscayne Bay, and roadway and surface restoration.

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

The project will directly reduce flooding impacts for residents and businesses in the project area by improving stormwater conveyance and roadway drainage, ensuring safer travel and property access during heavy rainfall events.

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

The project serves residents, businesses, and visitors in the Focus Area 4 neighborhood and indirectly benefits the broader Surfside community through improved flood protection and emergency access. The population target is general and >800.

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

The expected outcome is reduced flood depth and duration within the project area. Effectiveness will be measured through field observation during storm events, maintenance records, and reductions in resident service requests related to flooding.

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?

Penalties may include withholding payment or reimbursement until all construction milestones are met and the Town verifies substantial completion in accordance with approved plans and specifications.

| ls t | 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. N | lame of the natural disaster (or Executive Order # for events not under a federal declaration): |
| | |
| На | s the entity applied for or received federal assistance for this project? |
| □ ' | Yes, Applied |
| □ ' | Yes, Received |
| | No |
| | No, but intends to apply |
| _ 1£ | yes, provide the FEMA project worksheet ID#: |
| a. IT | yes, provide the reliand project worksheet ib. |

b. Provide the total project cost listed on the FEMA project worksheet:



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| 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 o Commerce): |
| Ρle | ease 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? |
| | ☐ 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? |
| | Will commence in late 2026 |
| 20. | What percentage of the construction has been completed? |
| | 0% |



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| 1. What is the estimated completion date of construction? 09/30/2027 | | | | | | | |
|--|--|---------------------|-------|--|--|--|--|
| 2. Requester Contact Information | | | | | | | |
| a. First Name | Mark | Last Name Blumstein | | | | | |
| b. Organization | Town of Surfside | | | | | | |
| c. E-mail Address | mblumstein@townofsurfsidefl.gov | | | | | | |
| d. Phone Number | (305)861-4863 | Ext. | | | | | |
| | | | | | | | |
| 3. Recipient Contact | Information | | | | | | |
| a. Organization | Town of Surfside | | | | | | |
| b. Municipality and | b. Municipality and County Miami-Dade | | | | | | |
| c. Organization Type | | | | | | | |
| □For Profit Entity | | | | | | | |
| □Non Profit 501(c | □Non Profit 501(c)(3) | | | | | | |
| □Non Profit 501(c | c)(4) | | | | | | |
| ☑Local Entity | | | | | | | |
| □University or Co | □University or College | | | | | | |
| □Other (please specify) | | | | | | | |
| d. First Name | Kristina | Last Name | Brown | | | | |
| e. E-mail Address | progrant@townofsurfsidefl.gov | | | | | | |
| f. Phone Number | (954)860-2699 | Ext. | | | | | |
| 4. Lobbyist Contact Information | | | | | | | |
| a. Name | Gerard O'Rourke | | | | | | |
| b. Firm Name | Converge Government Affairs of Florida, Inc. | | | | | | |
| c. E-mail Address | gerard@convergegov.com | | | | | | |
| d. Phone Number | (561)346-9859 | | | | | | |

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