

LFIR # 1420

1.	Project Title	Miami Shores Village Surfa	ce Wate	r Management and D	rainage Project			
2.	Senate Sponsor	Shevrin Jones						
3.	Date of Request	12/2/2025						
4.	Project/Program De	escription						
	plan. With rising wat	n the regional stormwater infra er levels and increasingly inte tration, and buffering can be in	nse storn	ns, this area offers a	rare contiguous ope	en landscape through		
5.	State Agency to receive requested funds Department of Environmental Protection							
	State Agency contacted? No							
	•		V 00	22 222				
b.	Amount of the Nonr	ecurring Request for Fiscal	rear 20.	2 6- 202 <i>1</i>				
	Type of Funding			Amo	unt			
	Operating				0			
	Fixed Capital Outlay			1,500,000				
	Total State Funds F	Requested			1,500,000			
7. Total Project Cost for Fiscal Year 2026-2027 (including matching funds available for this project)								
	Type of Funding			Amount	Percentage			
	Total State Funds R	equested (from question #6)		Amount 1,500,000	Percentage 50%			
	Total State Funds Romatching Funds	equested (from question #6)		1,500,000	50%			
	Total State Funds Ro Matching Funds Federal			1,500,000	50%			
	Total State Funds Romatching Funds Federal State (excluding the	equested (from question #6) amount of this request)		1,500,000	50% 0% 0%			
	Total State Funds Romatching Funds Federal State (excluding the Local			1,500,000 0 0 1,500,000	50% 0% 0% 50%			
	Total State Funds Romatching Funds Federal State (excluding the Local Other	amount of this request)		1,500,000 0 0 1,500,000 0	50% 0% 0% 50% 0%			
	Total State Funds Romatching Funds Federal State (excluding the Local Other			1,500,000 0 0 1,500,000	50% 0% 0% 50%			
8.	Total State Funds Romatching Funds Federal State (excluding the Local Other Total Project Costs Has this project pre	amount of this request)	ing?	1,500,000 0 0 1,500,000 0	50% 0% 0% 50% 0%			
8.	Total State Funds Remark Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project press, provide the remark of the remar	amount of this request) for Fiscal Year 2026-2027 eviously received state fund	ing?	1,500,000 0 1,500,000 0 3,000,000 No Specific	50% 0% 0% 50% 0%			
8.	Total State Funds Remarks Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project press If yes, provide the remarks	amount of this request) for Fiscal Year 2026-2027 eviously received state fundmost recent instance:		1,500,000 0 1,500,000 0 3,000,000 No	50% 0% 0% 50% 0% 100%			
8.	Total State Funds Remark Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project press, provide the remark of the remar	amount of this request) for Fiscal Year 2026-2027 eviously received state fundmost recent instance: Amount		1,500,000 0 1,500,000 0 3,000,000 No Specific	50% 0% 0% 50% 0% 100%			
	Total State Funds Remark Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project present of the state of the st	amount of this request) for Fiscal Year 2026-2027 eviously received state fundmost recent instance: Amount		1,500,000 0 1,500,000 0 3,000,000 No Specific	50% 0% 0% 50% 0% 100%			
	Total State Funds Remark Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project present of the remark of	amount of this request) for Fiscal Year 2026-2027 eviously received state fundmost recent instance: Amount Recurring Nonrec	urring	1,500,000 0 1,500,000 0 3,000,000 No Specific Appropriation #	50% 0% 0% 50% 0% 100%			
	Total State Funds Remark Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project prefit yes, provide the reference (yyyy-yy) Is future-year funding a. If yes, indicate new	amount of this request) for Fiscal Year 2026-2027 eviously received state fundmost recent instance: Amount Recurring Nonrec ng likely to be requested?	urring r.	1,500,000 0 1,500,000 0 3,000,000 No Specific Appropriation # Yes 1,500,000	50% 0% 50% 0% 100%			

Complete questions 10 and 11 for Fixed Capital Outlay Projects



LFIR # 1420

10. Status of Construction						
a. What is the current phase of the project?						
	/A					
b. Is the project "shovel ready" (i.e permitted)?	No					
c. What is the estimated start date of construction?	01/01/2027					
d. What is the estimated completion date of construction?	12/30/2028					
e. What funding stream will be used for ongoing operation	s and maintenance of the project?					
The funding will come from a Miami Shores Village Enterprise	e fund.					
11. List the owners of the facility to receive, directly or indire relationship between the owners of the facility and the en						
Miami Shores Village						

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/Majo	or Renovation:			
Construction/Renovation/Land/ Planning Engineering	The construction/engineering phase will have to meet regulatory standards, including erosion control, water quality monitoring, and long-term maintenance plans. Planned improvements may include reshaping and deepening retention and detention ponds, constructing conveyance channels to direct stormwater efficiently, and integrating engineered wetlands and bioswales to filter pollutants naturally.	1,500,000		
Total State Funds Requested (must equal total from question #6) 1,500,000				

13. Program Performance

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

Increasing the site's capacity to capture, store, and slowly release runoff, reducing the risk of flooding in surrounding neighborhoods. Retention and detention ponds will be regraded and expanded to hold larger storm events, while conveyance channels and drainage infrastructure will direct water efficiently toward treatment areas and the C-8 canal.

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



LFIR # 1420

Creating natural treatment systems help remove nutrients, sediments, and pollutants, which in turn protects aquatic habitats in the Biscayne Bay Aquifer. Enhancing stormwater storage and slowing runoff reduces erosion and sedimentation, preserving the integrity of surrounding waterways and providing more stable habitats for fish and wildlife.

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

The redesign willl help slow stormwater infiltration, allowing natural processes to remove pollutants before water percolates into the groundwater. As runoff passes through vegetated areas and soil layers, contaminants such as nutrients, sediments, and heavy metals are filtered and broken down by microbial activity, reducing the risk of groundwater contamination.

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

The properties that surround the area near and abutting the C-8 canal as well as the properties on SR915 to the west.

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

Reducing the risk of flooding in surrounding neighborhoods; reducing the risk of groundwater contamination; and natural filtration of pollutants from stormwater before it reaches the C-8 canal, all measured by water quality tests.

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?

L	oss of funds.				
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. N	Name of the natural disaster (or Executive Order # for events not under a federal declaration):				
. На	as the entity applied for or received federal assistance for this project?				
	as the entity applied for or received federal assistance for this project? Yes, Applied				
	Yes, Applied				
_ _	Yes, Applied Yes, Received				
	Yes, Applied Yes, Received No				

16. Has the entity applied for or received state assistance for this project (other than this request)?



LFIR # 1420

☐ 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?
☐ 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?
Planning stage
20. What percentage of the construction has been completed?
0
21. What is the estimated completion date of construction? 06/30/2028



LFIR # 1420

a. First Name	Esmond K.		Last Name	Scott		
b. Organization	Miami Shores Village					
c. E-mail Address	scotte@msvfl.gov					
d. Phone Number	(305)762	-4851				
3. Recipient Contact Information						
a. Organization	Miami Sh	ores Village				
b. Municipality and	cipality and County Miami-Dade					
c. Organization Ty _l	c. Organization Type					
□For Profit Entity	t Entity					
□Non Profit 501(c	c)(3)					
□Non Profit 501(c						
☑Local Entity						
□University or Co	ollege					
□Other (please sp	specify)					
d. First Name	Esmond	K.	Last Name	Scott		
e. E-mail Address	scotte@msvfl.gov					
f. Phone Number	(305)762	-4851	Ext.			
24. Lobbyist Contact Information						
a. Name	Nelson D). Diaz				
b. Firm Name	The Southern Group					
c. E-mail Address						
d Phone Number						

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