

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

**LFIR # 1664** 

| 1. Project Title   | Lighthouse Point - NE 3  | 1 Court Brid                   | ge Replacement Proj   | ject   |  |
|--|--|--------------------------------|---|--|--|
| 2. Senate Sponsor  | Jason Pizzo  |                                |   |  |  |
| 2. Senate Sponsor  | Jason F 1220   |                                |   |  |  |
| 3. Date of Request   | 11/18/2025   |                                |   |  |  |
| 4. Project/Program Des   | scription  |                                |   |  |  |
| provide for the construendergone multiple re   | small residential commu<br>uction phase of the NE 3'<br>epairs. Due to the extreme<br>lge serves as a single poi | 1 Ćourt Bridg<br>ely aggressiv | ge replacement. The live marine environmer                      | bridge is over 50 ye<br>nt, the bridge will co | ars old, and has ontinue to deteriorate. |
| 5. State Agency to rece  | eive requested funds   | Departme                       | ent of Transportation   |  |  |
| State Agency contac  | eted? No   |                                |   |  |  |
| 6. Amount of the Nonre   | ecurring Request for Fis   | cal Year 202                   | 26-2027   |  |  |
| Type of Funding  |  |                                | Amo   | unt  |  |
| Operating  |  |                                |   | 0  |  |
| Fixed Capital Outlay   |  |                                |   | 3,000,000                                      |  |
| <b>Total State Funds Re</b>  | equested   |                                |   | 3,000,000                                      |  |
| 7. Total Project Cost fo   | r Fiscal Year 2026-2027  | (including i                   | matching funds ava  | ilable for this proje                          | ect)                                     |
|  |  |                                |   |  | -  |
| Type of Funding  |  |                                | Amount  | Percentage                                     |  |
|  | quested (from question #   | 6)                             | Amount 3,000,000  |  |  |
| Total State Funds Remarkable Matching Funds  | quested (from question #   | 6)                             |   | Percentage                                     |  |
| Total State Funds Remarkable Matching Funds Federal  |  | 6)                             | 3,000,000   | Percentage 59%                                 |  |
| Total State Funds Remarkable Matching Funds Federal  | quested (from question #   | 6)                             | 3,000,000   | Percentage 59% 0% 0%                           |  |
| Total State Funds Remarkable Matching Funds Federal State (excluding the allocal   |  | 6)                             | 3,000,000   | Percentage 59% 0% 0% 41%                       |  |
| Total State Funds Remarkable Matching Funds Federal State (excluding the a   |  | 6)                             | 3,000,000   | Percentage 59% 0% 0%                           |  |
| Total State Funds Remarks  Matching Funds  Federal  State (excluding the allocal  Other  |  |                                | 3,000,000<br>0<br>0<br>2,100,000                                | Percentage 59% 0% 0% 41%                       |  |
| Total State Funds Remarks  Matching Funds  Federal  State (excluding the allocal  Other  Total Project Costs to  | amount of this request)  for Fiscal Year 2026-202  viously received state fu                                     | 27                             | 3,000,000<br>0<br>0<br>2,100,000<br>0                           | Percentage 59% 0% 0% 41% 0%                    |  |
| Total State Funds Remark Matching Funds Federal State (excluding the allocal Other Total Project Costs for the state of th | amount of this request)  for Fiscal Year 2026-202  viously received state fu                                     | 27                             | 3,000,000  0 2,100,000 0 5,100,000 No                           | Percentage 59% 0% 0% 41% 0%                    |  |
| Total State Funds Remark Matching Funds Federal State (excluding the allocal Other Total Project Costs for the state of th | for Fiscal Year 2026-202 viously received state functions recent instance:  Amount                               | 27                             | 3,000,000<br>0<br>2,100,000<br>0<br><b>5,100,000</b>            | Percentage 59% 0% 0% 41% 0% 100%               |  |
| Total State Funds Remark Matching Funds Federal State (excluding the allocal Other Total Project Costs for the state of th | for Fiscal Year 2026-202 viously received state functions recent instance:  Amount                               | 27<br>unding?                  | 3,000,000  0 2,100,000 0 5,100,000 No                           | Percentage 59% 0% 0% 41% 0% 100%               |  |
| Total State Funds Remark Matching Funds Federal State (excluding the allocal Other Total Project Costs for the state of th | for Fiscal Year 2026-202 viously received state functions recent instance:  Amount Recurring Non                 | 27 unding?                     | 3,000,000  0 2,100,000 0 5,100,000 No  Specific Appropriation # | Percentage 59% 0% 0% 41% 0% 100%               |  |
| Total State Funds Remark Matching Funds Federal State (excluding the allocal Other Total Project Costs for the state of th | for Fiscal Year 2026-202 viously received state functions are cent instance:  Amount Recurring Non               | 27 unding? recurring           | 3,000,000  0 2,100,000 0 5,100,000 No                           | Percentage 59% 0% 0% 41% 0% 100%               |  |
| Total State Funds Remark Matching Funds Federal State (excluding the allocal Other Total Project Costs for the state of th | for Fiscal Year 2026-202 viously received state functions recent instance:  Amount Recurring Non                 | 27 unding? recurring           | 3,000,000  0 2,100,000 0 5,100,000 No  Specific Appropriation # | Percentage 59% 0% 0% 41% 0% 100%               |  |
| Total State Funds Remark Matching Funds Federal State (excluding the allocal Other Total Project Costs for State (excluding the allocal Other) Total Project Costs for State (excluding the allocal Other) Total Project Costs for State (excluding the allocal Other) Total Project Costs for State (excluding the allocal Other) Total Project Costs for State (excluding the allocal Other)  8. Has this project previous for State (excluding the allocal Other) Fiscal Year (excluding the allocal Other) Fiscal Year (excluding the allocal Other)  9. Is future-year funding a. If yes, indicate no   | for Fiscal Year 2026-202 viously received state functions are cent instance:  Amount Recurring Non               | recurring ?                    | 3,000,000  0 2,100,000 0 5,100,000 No  Specific Appropriation # | Percentage 59% 0% 0% 41% 0% 100%               |  |



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| a. What is the cur  | rent phase of the        | project?           |            |                  |                     |                   |
|---------------------|--------------------------|--------------------|------------|------------------|---------------------|-------------------|
| Planning            | <ul><li>Design</li></ul> | Construction       | O N/A      |                  |                     |                   |
| b. Is the project " | shovel ready" (i.e       | e permitted)?      |            | No               |                     |                   |
| c. What is the est  | imated start date        | of construction?   |            | 12/1/2027        |                     |                   |
| d. What is the est  | imated completion        | on date of constru | ction?     | 12/31/2028       |                     |                   |
| e. What funding s   | tream will be use        | ed for ongoing ope | erations a | nd maintenance o | of the project?     |                   |
| The City will use   | general funds for        | ongoing operations | and main   | enance of the NE | 31 Court Bridge onc | e it is replaced. |

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.

### 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<br>Services/Study              |   | 0         |
| Operational Costs                                     |   |           |
| Salary and Benefits                                   |   | 0         |
| Expense/Equipment/Travel/Supplies/Other               |   | 0         |
| Consultants/Contracted<br>Services/Study              |   | 0         |
| Fixed Capital Construction/Majo                       | or Renovation:  |           |
| Construction/Renovation/Land/<br>Planning Engineering | The City will procure the services of a general contractor certified in bridge replacement and all related areas of work. | 3,000,000 |
| Total State Funds Requested (m                        | nust equal total from question #6)  | 3,000,000 |

### 13. Program Performance

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

The project will provide funding for the replacement of the NE 31 Court Bridge. The bridge serves as the single point of access and hurricane evacuation route to many residential households. The project includes the total replacement of the existing bridge resulting in a new resilient structure.

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

The bridge provides the sole access and evacuation route for City residents. A structural failure could endanger lives and leave residents isolated during a severe weather event.

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



□ No

□ No, but intends to apply

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Residents living in the island community will benefit from a new, resilient bridge that ensures safe access during significant weather events and eliminates concerns about structural failure due to the bridge's age.

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

City of Lighthouse Point residents with 25 households living on the island community. Emergency responders will have access these residents via the new bridge, which will allow them to provide emergency services to these residences.

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

A new, resilient bridge will be constructed, providing a service life of approximately 75 years under current building

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?

Failure to meet deliverables will result in return of funds to the administering agency. 14. 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): 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



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| a. If yes, specify the Commerce): | e program   | ı and state ageı | ncy (ex. Loca | I Governme | nt Emergeno |
|-----------------------------------|-------------|------------------|---------------|------------|-------------|
|                                   |             |                  |               |            |             |
| Requester Contact                 | Informat    | ion              |               |            |             |
| a. First Name                     | Ross        |                  | Last Name     | Licata     |             |
| b. Organization                   | City of Lig | ghthouse Point   |               |            |             |
| c. E-mail Address                 | rlicata@li  | ghthousepoint.c  | om            |            |             |
| d. Phone Number                   | (954)784    | -3434            | Ext.          |            |             |
| Recipient Contact                 | Informatio  | on.              |               |            |             |
| a. Organization                   |             | ghthouse Point   |               |            |             |
| b. Municipality and               |             |                  |               |            |             |
| c. Organization Ty                | •           |                  |               |            | _           |
| □For Profit Entity                |             |                  |               |            |             |
| □Non Profit 501(c                 | ·//3/       |                  |               |            |             |
|                                   | , , ,       |                  |               |            |             |
| □Non Profit 501(c                 | ;)(4)       |                  |               |            |             |
| □Local Entity                     |             |                  |               |            |             |
| □University or Co                 | llege       |                  |               |            |             |
| ☑Other (please sp                 | pecify) Loc | al Government    |               |            |             |
| d. First Name                     | Jennifer    |                  | Last Name     | Oh         |             |
| e. E-mail Address                 | jennifer.o  | h@lighthousepc   | oint.com      |            |             |
| f. Phone Number                   | (954)784    | -3407            | Ext.          |            |             |
| Lobbyist Contact I                | nformatio   | n                |               |            |             |
| a. Name                           | Nicholas    | G. Matthews      |               |            |             |
| b. Firm Name                      | Becker 8    | Poliakoff PA     |               |            |             |
| c. E-mail Address                 | matthews    | s@thesoutherng   | roup.com      |            |             |
| d Phone Number                    | (813)767    | -7656            |               |            |             |

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