

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

LFIR # 1668

| 1. Project Title | Golden Beach Flood Mitigation | for South Island | | |
|---|---|---|---|---|
| 2. Senate Sponsor | Jason Pizzo | | | |
| 3. Date of Request | 11/18/2025 | | | |
| 4. Project/Program De | escription | | | |
| ground water. Flood the community there gravity to discharge permanent forced st reduce the possibility | ated on a barrier island, the Town waters greatly impact the navigate are (3) islands. The southern mostorm water. We hope to enhance orm water pump to the existing syy of illicit discharges from sewage ne Ocean, Intra-coastal, and Bisca | ble state evacuation route f st island is at the towns love our storm water collection stem, converting from grave systems that can greatly a | or the barrier island west elevation and a system already in vity to forced. The f | d communities. Within currently relies on place by installing a orced system will |
| 5. State Agency to red | ceive requested funds Dep | artment of Environmental I | Protection | |
| State Agency conta | cted? No | | | |
| 6. Amount of the Noni | ecurring Request for Fiscal Yea | ar 2026-2027 | | |
| Type of Funding | | Amo | unt | |
| Operating | | | 60,000 | |
| Fixed Capital Outlay | Fixed Capital Outlay 840,0 | | | |
| Total State Funds Requested 900,000 | | | | |
| | | | | |
| - | or Fiscal Year 2026-2027 (includ | ling matching funds avai | · · | ect) |
| Type of Funding | · | Amount | Percentage | ect) |
| Type of Funding Total State Funds R | or Fiscal Year 2026-2027 (included) equested (from question #6) | | · · | ect) |
| Type of Funding Total State Funds R Matching Funds | · | Amount 900,000 | Percentage 50% | |
| Type of Funding Total State Funds R Matching Funds Federal | equested (from question #6) | Amount 900,000 | Percentage 50% | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the | · | 900,000 0 | Percentage 50% 0% 0% | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local | equested (from question #6) | Amount 900,000 | Percentage 50% 0% 0% 50% | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the | equested (from question #6) | 900,000 0 | Percentage 50% 0% 0% | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other | equested (from question #6) | 900,000 0 900,000 | Percentage 50% 0% 0% 50% | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre | equested (from question #6) amount of this request) | 900,000 0 900,000 0 900,000 1,800,000 | Percentage 50% 0% 0% 50% 50% | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre | equested (from question #6) amount of this request) for Fiscal Year 2026-2027 eviously received state funding most recent instance: Amount | Amount 900,000 0 900,000 0 1,800,000 P No Specific | Percentage 50% 0% 0% 50% 50% | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project profif yes, provide the Fiscal Year | equested (from question #6) amount of this request) for Fiscal Year 2026-2027 eviously received state funding most recent instance: | Amount 900,000 0 900,000 0 1,800,000 P No Specific | Percentage 50% 0% 0% 50% 100% | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project professed for the state (yyyy-yy) | equested (from question #6) amount of this request) for Fiscal Year 2026-2027 eviously received state funding most recent instance: Amount | Amount 900,000 0 900,000 0 1,800,000 P No Specific | Percentage 50% 0% 0% 50% 100% | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre If yes, provide the I Fiscal Year (уууу-уу) 9. Is future-year fundi | equested (from question #6) amount of this request) for Fiscal Year 2026-2027 eviously received state funding most recent instance: Amount Recurring Nonrecurri | Amount 900,000 0 0 900,000 0 1,800,000 | Percentage 50% 0% 0% 50% 100% | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre If yes, provide the I Fiscal Year (yyyy-yy) 9. Is future-year funding a. If yes, indicate n | equested (from question #6) amount of this request) for Fiscal Year 2026-2027 eviously received state funding most recent instance: Amount Recurring Nonrecurri ng likely to be requested? onrecurring amount per year. | Amount 900,000 0 0 0 0 0 0 0 0 | Percentage 50% 0% 0% 50% 100% | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre If yes, provide the I Fiscal Year (yyyy-yy) 9. Is future-year funding a. If yes, indicate n | equested (from question #6) amount of this request) for Fiscal Year 2026-2027 eviously received state funding most recent instance: Amount Recurring Nonrecurri ng likely to be requested? | Amount 900,000 0 0 0 0 0 0 0 0 | Percentage 50% 0% 0% 50% 100% | |



10. Status of Construction

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?

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O N/A

No

10/23/2026

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Complete questions 10 and 11 for Fixed Capital Outlay Projects

Construction

| o receive, directly or indirectly, any fixed capital outlay funding. Inc is of the facility and the entity. | lude the |
|--|--|
| der Diaz, Town Manager | |
| ate funds will be expended | |
| Description | Amount |
| | |
| | 0 |
| | 0 |
| | 0 |
| Civil Engineering | 60,000 |
| | |
| | C |
| | C |
| | 0 |
| or Renovation: | |
| Installation of a forced storm water pump. Converting the existing gravity system to forced. | 840,000 |
| nust equal total from question #6) | 900,000 |
| | s of the facility and the entity. der Diaz, Town Manager Description Civil Engineering Creater Renovation: Installation of a forced storm water pump. Converting the existing |

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



□ No

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Relief from flood conditions that will allow ease of access for emergency vehicles and reduction of damage to private and town property. Reduction in possibility of illicit discarge from sewage systems that can flow into surrounding water bodies.

| | nd town property. Reduction in possibility of illicit discarge from sewage systems that can flow into surrounding water odies. |
|----------|---|
| d. | Who is the target population served by this project? How many individuals are expected to be served? |
| R | esidents of Golden Beach and surrounding communities. There are (365) households in Golden Beach. |
| | What is the expected benefit or outcome of this project? What is the methodology by which this outcome will measured? |
| sy | forced system will allow the swift discharge of flood water and avoid the possibility of illicit discharge from sewage stems. The system will allow for a reduction of damage to property by greatly reducing the time of standing water in ur roads and right of ways. |
| | What are the suggested penalties that the contracting agency may consider in addition to its standard penaltien failing to meet deliverables or performance measures provided for in the contract? |
| R | efund of monies received. |
| 14. Is 1 | 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): |
| | |
| 15. Ha | s 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#: |
| | 7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - |
| b. P | Provide the total project cost listed on the FEMA project worksheet: |
| | |
| 16. Ha | s the entity applied for or received state assistance for this project (other than this request)? |
| | Yes, Applied |
| □ · | Yes, Received |
| | |



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| | ☐ No, but intends t | o apply | | |
|-----|---------------------|-----------------------|---|-------|
| | | e program and sta | ate agency (ex. Local Government Emergency Bridge Loan, Departmen | nt of |
| | Commerce): | | | |
| | | | | |
| ΡI | ease complete | e questions 1 | 17 through 21 for Water Projects only. | |
| 17. | Have you been aw | arded or applied f | or alternative state funding for this project? | |
| | □ Water Quality In | mprovement Grant | Program | |
| | ☐ Resilient Florida | a Grant Program | | |
| | ☐ Wastewater Re | volving Loan | | |
| | □ Drinking Water | Revolving Loan | | |
| | ☐ Small Commun | nity Wastewater Tre | atment Grant | |
| | ☐ Other (please s | specify, ex. Alternat | ive Water Supply Grants) | |
| | ☑ N/A | | | |
| 18. | What is the popula | ation economic sta | atus? | |
| | ☐ Financially Disa | advantaged Commu | unity (ch. 62-552, F.A.C) | |
| | ☐ Financially Disa | advantaged Municip | pality (ch. 62-552, F.A.C) | |
| | ☐ Rural Area of E | Economic Concern | | |
| | ☐ Rural Area of C | Opportunity (s. 288.0 | 0656, Florida Statutes) | |
| | ☑ N/A | | | |
| 19. | What is the status | of construction? | | |
| | Planning. | | | |
| 20. | What percentage of | of the construction | has been completed? | |
| | Zero. | | | |
| 21. | What is the estima | ted completion da | ate of construction? 10/23/2027 | |
| 22. | Requester Contac | t Information | | |
| | a. First Name | Lissett | Last Name Rovira | |
| | b. Organization | Town of Golden B | each | |
| | c. E-mail Address | LRovira@goldenb | each.us | |



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| d. Phone Number | (305)308-4063 | Ext. | 242 | | | |
|----------------------------------|---|-----------|------|--|--|--|
| | | | | | | |
| 23. Recipient Contact | Information | | | | | |
| a. Organization | Town of Golden Beach | | | | | |
| b. Municipality and | and County Miami-Dade | | | | | |
| c. Organization Type | | | | | | |
| □For Profit Entity | □For Profit Entity | | | | | |
| □Non Profit 501(d | □Non Profit 501(c)(3) | | | | | |
| □Non Profit 501(d | □Non Profit 501(c)(4) | | | | | |
| ☑Local Entity | ☑Local Entity | | | | | |
| □University or Co | or College | | | | | |
| □Other (please sp | ner (please specify) | | | | | |
| d. First Name | Alexander | Last Name | Diaz | | | |
| e. E-mail Address | AlexanderDiaz@goldenbeach.us | | | | | |
| f. Phone Number | (305)932-0744 | Ext. | | | | |
| 24. Lobbyist Contact Information | | | | | | |
| a. Name | David T Caserta | | | | | |
| b. Firm Name | David T. Caserta Government Relations Inc | | | | | |
| c. E-mail Address | flagovernment@aol.com | | | | | |
| d. Phone Number | (305)463-8808 | | | | | |

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