



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2026-2027

LFIR # 1823

1. Project Title Miami-Dade County Enhancing efficiency and reliability at regional wastewater plant

2. Senate Sponsor Alexis Calatayud

3. Date of Request 12/8/2025

#### 4. Project/Program Description

The Miami-Dade Water and Sewer Department (WASD) is upgrading the wastewater treatment plant with a molecular sieve system, which will make operations safer, cheaper, and more reliable. The current system is aging, prone to costly breakdowns, and requires annual shutdowns that waste time and money. The new equipment eliminates these problems by removing harmful contaminants before they can damage the system, saving millions over time while ensuring a steady, high-quality oxygen supply for wastewater treatment. The new system extends the plant's useful life by 20-30 years.

5. State Agency to receive requested funds Department of Environmental Protection

State Agency contacted? Yes

#### 6. Amount of the Nonrecurring Request for Fiscal Year 2026-2027

Type of Funding	Amount
Operating	1,500,000
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>1,500,000</b>

#### 7. Total Project Cost for Fiscal Year 2026-2027 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	1,500,000	50%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	1,500,000	50%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2026-2027</b>	<b>3,000,000</b>	<b>100%</b>

8. Has this project previously received state funding? No

If yes, provide the most recent instance:

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. Is future-year funding likely to be requested? No

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2026-2027

LFIR # 1823

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

### 10. Status of Construction

a. What is the current phase of the project?

☐ Planning ☐ Design ☐ Construction ☐ N/A

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?

e. What funding stream will be used for ongoing operations and maintenance of the project?

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
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other	The funds will be spent on the purchasing of a new molecular sieve system for Miami-Dade County's regional wastewater treatment plant.	1,500,000
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering		0
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>1,500,000</b>

### 13. Program Performance

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

Upgrading the wastewater treatment plant with the molecular sieve system will make operations safer, cheaper, and more reliable. The current system is aging, prone to costly breakdowns, and requires annual shutdowns that waste time and money, but the new equipment eliminates these problems by removing harmful contaminants before they can damage the system. saving millions over time while ensuring a steady, high-quality oxygen supply for wastewater treatment. new system extends the life 20-30 yrs.



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2026-2027

LFIR # 1823

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

The funds will be spent on the purchasing of a new molecular sieve system for Miami-Dade County's regional wastewater treatment plant.

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

This project will provide residents with improved wastewater service reliability, reduce disruptions and flooding risks, and strengthen public health and neighborhood resilience through modernized infrastructure.

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

Residents of Miami-Dade County, benefiting more than 2.8 million people, including the local community within the project area.

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

The project enhances the County's wastewater treatment plant, reducing operational expenses and preventing costly emergency interventions funded by rate-payer dollars. This upgrade safeguards critical infrastructure, ensuring uninterrupted wastewater treatment that protects public health, preserves environmental quality, and supports sustainable community growth. Program effectiveness will be evaluated through comparative analysis of pre- and post-upgrade operating budgets to quantify annual cost savings and long-term financial benefits.

**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 nonpayment.

**14. Is this project related to mitigation, response, or recovery from a natural disaster?**

**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 infrastructure)

**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:**



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2026-2027

LFIR # 1823

**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 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?**

**20. What percentage of the construction has been completed?**

**21. What is the estimated completion date of construction?**



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2026-2027

LFIR # 1823

#### 22. Requester Contact Information

a. First Name  Last Name   
b. Organization   
c. E-mail Address   
d. Phone Number  Ext.

#### 23. Recipient Contact Information

a. Organization   
b. Municipality and County   
c. Organization Type  
☐ For Profit Entity  
☐ Non Profit 501(c)(3)  
☐ Non Profit 501(c)(4)  
☒ Local Entity  
☐ University or College  
☐ Other (please specify)  
d. First Name  Last Name   
e. E-mail Address   
f. Phone Number  Ext.

#### 24. Lobbyist Contact Information

a. Name   
b. Firm Name   
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.*