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

1. Project Title   Miami-Dade County Sanitary Sewer Overflows Intelligent Sewer System Monitoring & A.I. Optimization

2. Senate Sponsor   Alexis Calatayud

3. Date of Request   12/8/2025

4. Project/Program Description

The funds will modernize WASD's sewer inspection program by optimizing the CCTV reviews and generate risk-based rehab priorities. Sewer AI will use the data from the field, catalog the data, and complete timely assessments to generate project needs. This will improve data quality, accelerate capital planning, reduce emergency failures, prevent sanitary sewer overflows, and strengthen environmental and regulatory compliance across the wastewater system.

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	250,000
Fixed Capital Outlay	0
Total State Funds Requested	**250,000**

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

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	250,000	50%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	250,000	50%
Other	0	0%
Total Project Costs for Fiscal Year 2026-2027	**500,000**	**100%**

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.

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
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	Procurement and implementation of Pioneer by Sewer A.I. Ecosystem	250,000
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		**250,000**

13. Program Performance

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

The funds will modernize WASD's sewer inspection program by optimizing the CCTV reviews and generate risk-based rehab priorities. Sewer AI will use the data from the field, catalog the data, and complete timely assessments to generate project needs. This will improve data quality, accelerate capital planning, reduce emergency failures, prevent sanitary sewer overflows, and strengthen environmental and regulatory compliance across the wastewater system.

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

The project will deploy AI-enabled sewer inspection technology to analyze CCTV footage, catalog system conditions, and produce timely assessments that support proactive infrastructure planning.
It will automate the generation of risk-based rehabilitation priorities, enable faster and more accurate identification of defects, and reduce the need for emergency repairs, resulting in fewer service disruptions, improved environmental protection, and enhanced reliability of wastewater services for residents.

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

This project will provide residents of Miami-Dade County with a more reliable and resilient wastewater system by using advanced AI technology to identify defects earlier, prevent system failures, and reduce the risk of sanitary sewer overflows. By modernizing sewer inspections and enabling faster, data-driven rehabilitation decisions, the project will protect public health, minimize service disruptions, and ensure uninterrupted wastewater service for communities across the County.

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?

Expected Benefit / Outcome: The project deploys AI-driven sewer inspections that improve coding accuracy to 97% and boost productivity by 91%, accelerating assessments and enabling early identification of high-risk defects. This improves data quality, reduces SSOs and emergency repairs, and strengthens overall system reliability.Methodology: Performance will be measured through year-over-year reductions in SSOs, emergency repairs, and response times, using NASSCO-scored inspections and AI accuracy/throughput metrics.

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? 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

☐ 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?

[N/A (no construction)   ]

20. What percentage of the construction has been completed?

0%

21. What is the estimated completion date of construction? 06/30/2027

22. Requester Contact Information

a. First Name Jay **Last Name** Fink

b. Organization Miami-Dade County

c. E-mail Address jay.fink@miamidade.gov

d. Phone Number (305)322-9386 **Ext.**

23. Recipient Contact Information

a. Organization Miami-Dade County

b. Municipality and County Miami-Dade

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 Ariadna **Last Name** Natteri

e. E-mail Address Ariadna.Natteri@miamidade.gov

f. Phone Number (305)462-9977 **Ext.**

24. Lobbyist Contact Information

a. Name Jess M. McCarty

b. Firm Name

c. E-mail Address jmm2@miamidade.gov

d. Phone Number (305)979-7110

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