

LFIR # 1866

•	ing likely to be requested? onrecurring amount per year.	No			
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i iooui i cui	Recurring Nonrecurring	A	101000		
	eviously received state funding? most recent instance: Amount	No Specific	Vetoed		
	s for Fiscal Year 2026-2027	1,000,000	100%		
Other		0	0%		
Local		250,000	25%		
State (excluding the	amount of this request)	0	0%		
Federal		0	0%		
Matching Funds		,			
	equested (from question #6)	750,000	75%		
7. Total Project Cost f	or Fiscal Year 2026-2027 (includ	ling matching funds avai	Percentage	:t)	
Total State Funds	Total State Funds Requested		750,000		
	Fixed Capital Outlay		750,000		
Operating			0		
Type of Funding		Amo	unt		
State Agency conta	ncted? No recurring Request for Fiscal Yea	nr 2026-2027			
5. State Agency to re	ceive requested funds Dep	artment of Environmental	Protection		
required would inclunew/upgraded submaceurity in addition to resiliency of our san waterways and estu	de upgraded controls and remote nersible pumps, discharge piping a o emergency back-up power via g itary sewer system and increase the aries during Hurricanes and other	monitoring equipment, neward valving, wet well repair enerators. Once complete the chances of eliminating high rain events.	w electrical equipmer s and lining, improve d, these improvemen sanitary sewer overfl	nt and hardware, ed lighting and site nts will improve	
	s the complete rehabilitation of fou	ır (4) sanitary sewer lift sta	ations with the City. T	he scope of work	
 Date of Request Project/Program Description 	12/3/2025 escription				
2. Senate Sponsor	Jim Boyd				
	dationo				
	stations				



10. Status of Construction

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

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Complete questions 10 and 11 for Fixed Capital Outlay Projects

A
Yes
07/01/2026
06/30/2027
and maintenance of the project?
etly, any fixed capital outlay funding. Include the ity.

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/Major Renovation:				
Construction/Renovation/Land/ Planning Engineering	All monies will be used to purchase and install equipment for four (4) sanitary sewer lift stations.	750,000		
Total State Funds Requested (must equal total from question #6) 750,000				

13. Program Performance

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

These improvements will improve resiliency of our sanitary sewer system and increase the chances of eliminating sanitary sewer overflows in nearby waterways and estuaries during Hurricanes and other high rain events.

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

Improve overall water quality of nearby water bodies such as the Manatee River, Terra Ceia Bay and the Gulf of America.



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F	Reduce the possibility of contamination of streets and general public who might come in contact with untreated water.
d.	Who is the target population served by this project? How many individuals are expected to be served?
A	All 13,000 residents of the City of Palmetto
	What is the expected benefit or outcome of this project? What is the methodology by which this outcome will measured?
S	The new lift station equipment will improve overall waster management through elimination or reduction of Sanitary ewer Overflows (SSO's). It will also improve lift station downtime during loss of electricity during hurricanes/natural isasters.
f.	What are the suggested penalties that the contracting agency may consider in addition to its standard penaltie
fo	r failing to meet deliverables or performance measures provided for in the contract?
٦	The City does not expect to not meet deliverables. We will provide periodic updates to ensure we remain on target.
l4. Is	this project related to mitigation, response, or recovery from a natural disaster? No
a. I	f 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. l	Name of the natural disaster (or Executive Order # for events not under a federal declaration):
15. Ha	as the entity applied for or received federal assistance for this project?
	Yes, Applied
	Yes, Received
	No
	No, but intends to apply
a. I	f yes, provide the FEMA project worksheet ID#:
b. F	Provide the total project cost listed on the FEMA project worksheet:
16. Ha	as the entity applied for or received state assistance for this project (other than this request)?
	Yes, Applied
	Yes, Received
	No



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☐ No, but intends to	to apply	
a. If yes, specify the Commerce):	he program and state agency (ex. Local Government Emergency Bridge Loan, Depart	tmen
Please complete	te questions 17 through 21 for Water Projects only.	
•	warded or applied for alternative state funding for this project?	
□ Water Quality I	Improvement Grant Program	
☐ Resilient Florida	da Grant Program	
☐ Wastewater Re	Revolving Loan	
□ Drinking Water	er Revolving Loan	
☐ Small Commun	unity Wastewater Treatment Grant	
☐ Other (please s	specify, ex. Alternative Water Supply Grants)	
☑ N/A		
3. What is the popula	lation economic status?	
☐ Financially Disa	sadvantaged Community (ch. 62-552, F.A.C)	
☐ Financially Disa	sadvantaged Municipality (ch. 62-552, F.A.C)	
☐ Rural Area of E	Economic Concern	
☑ Rural Area of C	Opportunity (s. 288.0656, Florida Statutes)	
□ N/A		
). What is the status	s of construction?	
Ready and awaiting	ting funding and contractor availability	
). What percentage o	of the construction has been completed?	
None		
. What is the estima	nated completion date of construction? 06/30/2027	
2. Requester Contact	ct Information	
a. First Name	Daniel Last Name West	
b. Organization	City of Palmetto	
c. E-mail Address	s dwest@palmettofl.org	



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			1 1			
	d. Phone Number	(941)723-4570	Ext.			
23.	3. Recipient Contact Information					
	a. Organization	City of Palmetto				
	b. Municipality and	d County Manatee				
	c. Organization Ty	ре				
	□For Profit Entity					
	□Non Profit 501(c)(3)					
	□Non Profit 501(c)(4)					
	☑Local Entity					
	□University or Co	llege				
	□Other (please sp	pecify)				
	d. First Name	James	Last Name	Freeman		
	e. E-mail Address jfreeman@palmettofl.org					
	f. Phone Number	(941)723-4570	Ext.			
24.	24. Lobbyist Contact Information					
	a. Name	John "Mike" Moore				
	b. Firm Name	The Southern Group				
	c. E-mail Address	Moore@thesoutherngrou	p.com			
	d. Phone Number	(850)671-4401				

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