

Appropriations Project Request - Fiscal Year 2018-19

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Oak Hill/Volusia County Water Quality Septic Replacement

2. Date of Submission: 08/04/2017

3. House Member Sponsor: Thomas Leek

Members Copied:

4. DETAILS OF AMOUNT REQUESTED:

- Has funding been provided in a previous state budget for this activity? No
If answer to 4a is ?No? skip 4b and 4c and proceed to 4d, Col. E
- What is the most recent fiscal year the project was funded?
- Were the funds provided in the most recent fiscal year subsequently vetoed?
- Complete the following Project Request Worksheet to develop your request:

FY:	Input Prior Year Appropriation for this project for FY 2017-18 <i>(If appropriated in 2017-18 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2018-19 <i>(Requests for additional RECURRING funds are prohibited.)</i>		
	Column: A	B	C	D	E	F
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated <i>(Recurring plus Nonrecurring: column A + column B)</i>	Recurring Base Budget <i>(Will equal non-vetoed amounts provided in Column A)</i>	Additional Nonrecurring Request	TOTAL Nonrecurring plus Recurring Base Funds <i>(Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)</i>
Input Amounts:					1,500,000	1,500,000

5. Are funds for this issue requested in a state agency's Legislative Budget Request submitted for FY 2018-19? No

5a. If yes, which state agency?

5b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? Department of Environmental Protection

5c. Has the appropriate state agency for administering the funding, if the request were appropriated, been contacted? Yes

5d. Describe penalties for failing to meet deliverables or performance measures which the agency should provide in its contract to administer the funding if appropriated.

The Department may terminate the agreement at any time if the warranty or representation made by the Grantee (Oak Hill) shall be false or misleading, or in the event of the failure of the Grantee to fulfill any of its obligations under the agreement. In those events, no payments will be made for deliverables deemed unsatisfactory by the Department. The Grantee may re-perform the services needed for the submittal of a satisfactory deliverable, or the Department may impose a Corrective Action Pla

6. Requester:

- a. Name: Kohn Evans
- b. Organization: City of Oak Hill
- c. Email: kevans@oakhillfl.com
- d. Phone #: (386)345-3522

7. Contact for questions about specific technical or financial details about the project:

- a. Name: Beth Lemke
- b. Organization: Planning Solutions Corp.
- c. Email: blemke@planningsolutionscorp.com
- d. Phone #: (407)491-9477

8. Is there a registered lobbyist working to secure funding for this project?

- a. Name: Sue Mullins
- b. Firm: Ramba Consulting Group,LLC
- c. Email: sue@rambalaw.com
- d. Phone #: (850)590-8000

9. Organization or Name of entity receiving funds:

- a. Name: City of Oak Hill
- b. County (County where funds are to be expended): Volusia
- c. Service Area (Counties being served by the service(s) provided with funding): Volusia

10. What type of organization is the entity that will receive the funds? (Select one)

- For Profit
- Non Profit 501(c) (3)
- Non Profit 501(c) (4)

- Local Government
- University or College
- Other (Please describe)

11. What is the specific purpose or goal that will be achieved by the funds being requested?

The funds will be used for the design and construction of centralized water and sewer and removal of 347 septic tanks that are now polluting residents groundwater as well as the quality of the Mosquito Lagoon/Indian River Lagoon. Includes replacement of 70 septic tanks on land that juts into the Lagoon.

12. Provide specific details on how funds will be spent. (Select all that apply)

Spending Category	Description	Nonrecurring (Should equal 4d, Col. E) Enter ?? if request is zero for the category
Administrative Costs:		
<input type="checkbox"/> a. Executive Director/Project Head Salary and Benefits		
<input type="checkbox"/> b. Other Salary and Benefits		
<input type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> d. Consultants/Contracted Services/Study		
Operational Costs:		
<input type="checkbox"/> e. Salaries and Benefits		
<input type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
<input checked="" type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering	Removal of septic tanks and construction of city sewer system.	1,500,000
TOTAL		1,500,000

13. For the Fixed Capital Costs requested with this issue (In Question 12, category ?h. Fixed Capital Outlay? was selected), what type of ownership will the facility be under when complete? (Select one correct option)

For Profit

Non Profit 501(c) (3)

Non Profit 501(c) (4)

Local Government (e.g., police, fire or local government buildings, local roads, etc.)

State agency owned facility (For example: college or university facility, buildings for public schools, roads in the state transportation system, etc.)

Other (Please describe)

14. Is the project request an information technology project?

N/A

15. Is there any documented show of support for the requested project in the community including public hearings, letters of support, major organizational backing, or other expressions of support?

Yes

15a. Please Describe:

Project has been a stated priority of the City and County for more than a decade. Also, letters of support can be provided from the Volusia County CEO Business Alliance, The Burns Sci-Tech Charter School, and Team Volusia Economic Development Corp.

16. Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served?

Yes

16a. Please Describe:

St. John's River Water Management District, Florida Rural Water Association, and in the City's and County's Comprehensive Plans.

17. Will the requested funds be used directly for services to citizens?

N/A

18. What benefits or outcomes will be realized by the expenditure of funds requested? (Select each Benefit/Outcome that applies)

Benefit or Outcome	Provide a specific measure of the benefit or outcome	Describe the method for measuring level of benefit
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<input type="checkbox"/> Improve physical health		
<input type="checkbox"/> Improve mental health		
<input type="checkbox"/> Enrich cultural experience		
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input checked="" type="checkbox"/> Improve quality of education	Allow expansion of Burns Sci-Tech Charter School	Student population increase
<input checked="" type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality	Reduce fish kills and algal blooms	Professional water sampling
<input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)	Reduce failing septic tanks	Professional water sampling
<input type="checkbox"/> Improve transportation conditions		
<input checked="" type="checkbox"/> Increase or improve economic activity	Attract new business	Increase in sales tax revenue
<input checked="" type="checkbox"/> Increase tourism	Attract more recreational fishing	Increase in fishing charters
<input type="checkbox"/> Create specific immediate job opportunities		
<input checked="" type="checkbox"/> Enhance specific individual's economic self sufficiency	Commercial & Recreational Fisherman	Increase in seafood tags and harvest
<input type="checkbox"/> Reduce recidivism		
<input type="checkbox"/> Reduce substance abuse		
<input type="checkbox"/> Divert from Criminal/Juvenile justice system		
<input checked="" type="checkbox"/> Improve wastewater management	Treat water in central plant	Gallons of treated water/water sampling
<input checked="" type="checkbox"/> Improve stormwater management	Treat water in central plant	Water sampling

<input checked="" type="checkbox"/> Improve groundwater quality	Keep nutrients from water supplies	Water sampling
<input checked="" type="checkbox"/> Improve drinking water quality	Reduce nutrients	Water sampling
<input checked="" type="checkbox"/> Improve surface water quality	Reduce nutrients	Water sampling
<input type="checkbox"/> Other (Please describe):		

19. Provide the total cost of the project for FY 2018-19 from all sources of funding (Enter ?0? if amount is zero):

Type of Funding	Amount	Percent of Total	Are the other sources of funds guaranteed in writing?
1. Amount Requested from the State in this Appropriations Project Request:	1,500,000	100.0%	N/A
2. Federal:	0	0.0%	No
3. State: (Excluding the requested Total Amount in #4d, Column F)	0	0.0%	No
4. Local:	0	0.0%	No
5. Other:	0	0.0%	No
TOTAL	1,500,000	100%	

20. Is this a multi-year project requiring funding from the state for more than one year?

No

21. What is the revenue source of ongoing operating funds?

Water,sewer and stormwater fund

22. Has local approval been given for ongoing operating funds?

Yes

23. Have you applied for alternative state funding?

- a. Wastewater Revolving Loan
- b. Drinking Water Revolving Loan
- c. Small Community Wastewater Treatment Grant
- d. Other (Please describe): St. John's Water Management District
- e. N/A

24. Has project been addressed in a local, regional, or state plan?

Yes

24a. If Yes, insert plan name and cite page numbers.

Florida Rural Water Association Feasibility Study-ENTire Report. Volusia County Water Quality Plan & Septic Reduction Plan,pgs.1-11, and the Volusia County Septic System Elimination Plan (Mosquito/Indian River Lagoon),page 2

25. Is the project for a financially disadvantaged community?

Yes

26. What is the population economic status?

- a. Financially Disadvantaged Municipality
- b. Rural Area of Critical Economic Concern
- c. Rural Community Experiencing Economic Distress
- d. N/A

27. What is the status of planning?

- a. Ready
- b. Not Ready

28. What percentage of the planning process has been completed?

80%

29. What is the estimated planning completion date?

November 30, 2017

30. What is the status of design?

- a. Ready
- b. Not Ready

31. What percentage of design has been completed?
50%
32. What is the estimated design completion date?
August 30, 2018
33. List all required permits.
SJWMD and Florida DEP Permits
34. What is the status of permitting?
 a. Planned
 b. Submitted
 c. Received
35. What is the status of construction?
 a. Ready
 b. Not Ready
36. What percentage of construction has been completed?
0%
37. What is the estimated completion date of construction?
February 30, 2020