

Appropriations Project Request - Fiscal Year 2020-21

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Okaloosa County Water & Sewer Gravity Sewer Rehabilitation
2. Date of Submission: 11/13/2019
3. House Member Sponsor: Mel Ponder
Members Copied:

4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? Yes
If answer to 4a is "No" skip 4b and 4c and proceed to 4d, Col. E
- b. What is the most recent fiscal year the project was funded? > 5 years
- c. Were the funds provided in the most recent fiscal year subsequently vetoed? No
- d. Complete the following Project Request Worksheet to develop your request:

| FY: | Input Prior Year Appropriation for this project for FY 2019-20 <i>(If appropriated in 2019-20 enter the appropriated amount, even if vetoed.)</i> | | | Develop New Funds Request for FY 2020-21 <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: | | | | | 2,000,000 | 2,000,000 |

5. Are funds for this issue requested in a state agency's Legislative Budget Request submitted for FY 2020-21? 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? No
 - 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.

Revocation of funds

6. Requester:

- a. Name: Mark Wise
- b. Organization: Okaloosa County Water & Sewer
- c. Email: mwise@myokaloosa.com
- d. Phone #: (850)685-0297

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

- a. Name: Mark Wise
- b. Organization: Okaloosa County Water & Sewer
- c. Email: mwise@myokaloosa.com
- d. Phone #: (850)685-0297

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

- a. Name: Sarah Suskey
- b. Firm: The Advocac Group at Cardenas Partners
- c. Email: sbs@cardenaspartners.com
- d. Phone #: (850)222-8900

9. Organization or Name of entity receiving funds:

- a. Name: Okaloosa County Water & Sewer
- b. County (County where funds are to be expended): Okaloosa
- c. Service Area (Counties being served by the service(s) provided with funding): Okaloosa

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?

Reduce pollution by rehabilitating sewer lines that have been deteriorated

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

| Spending Category | Description | Nonrecurring (Should equal 4d, Col. E) Enter "0" 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 | Construction | 2,000,000 |
| TOTAL | | 2,000,000 |

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?

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:

- Northwest Florida Water Management District (NFWFMD), 2017. Draft Choctawhatchee River and Bay System Surface Water Improvement and Management (SWIM) Plan.
- Choctawhatchee Bay and several of its adjacent beaches are listed as impaired for nutrients and/or bacteria by FDEP under section 303(d) of the Federal Clean Water Act. These impairments, some of which can be attributed to failing local sewer piping, negatively impact the health of the Bay’s seagrasses and limit its recreational value.

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:

- Centralized wastewater treatment systems are ongoing source of nutrients and bacteria to Choctawhatchee Bay and upgrading or retrofitting out of date systems would reduce the frequency and severity of pollution events (NFWFMD 2017). Currently the County has approx. 50 miles of aging vitrified clay (VC) gravity sewer mains proximate to the bay and which are at or beyond their useful lives. Approximately 7 miles have already been rehabilitated with cured-in-place pipe (CIPP) since 2015 by OCWS.

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

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 |
|--|--|--|
| <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 type="checkbox"/> Improve quality of education | | |
| <input checked="" type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality | Reduce point source pollution discharge to nearby surface waters including Choctawhatchee Bay and its watershed from leaking, aged wastewater infrastructure | Changes in ambient water quality (nutrient and bacterial concentrations) in Santa Rosa Sound and Choctawhatchee Bay adjacent to the project area; • Changes in the seagrass coverage in Choctawhatchee Bay; and • Changes in the frequency and/or severity of sewer overflow or pipe failure incidents. |
| <input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.) | Reduce point source pollution discharge to nearby surface waters including Choctawhatchee Bay and its watershed from leaking, aged wastewater infrastructure | Changes in ambient water quality (nutrient and bacterial concentrations) in Santa Rosa Sound and Choctawhatchee Bay adjacent to the project area; • Changes in the seagrass coverage in Choctawhatchee Bay; and • Changes in the frequency and/or severity of sewer overflow or pipe failure incidents. |
| <input type="checkbox"/> Improve transportation conditions | | |
| <input checked="" type="checkbox"/> Increase or improve economic activity | Preserving the emerald green waters the region has become known for, will contribute to economic growth in the County and adjacent areas, | Measure increase in fishing and ecotourism businesses in the Choctawhatchee Bay area |

| | | |
|--|---|---|
| | especially its fishery and ecotourism. | |
| <input type="checkbox"/> Increase tourism | | |
| <input type="checkbox"/> Create specific immediate job opportunities | | |
| <input type="checkbox"/> Enhance specific individual's economic self sufficiency | | |
| <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 | Reduce point source pollution discharge to nearby surface waters including Choctawhatchee Bay and its watershed from leaking, aged wastewater infrastructure that is flushed into the Bay's watershed during rain events. | <ul style="list-style-type: none"> • Changes in ambient water quality (nutrient and bacterial concentrations) in Santa Rosa Sound and Choctawhatchee Bay adjacent to the project area; • Changes in the seagrass coverage in Choctawhatchee Bay; and • Changes in the frequency and/or severity of sewer overflow or pipe failure incidents. |
| <input type="checkbox"/> Improve stormwater management | | |
| <input type="checkbox"/> Improve groundwater quality | | |
| <input type="checkbox"/> Improve drinking water quality | | |
| <input checked="" type="checkbox"/> Improve surface water quality | Reduce point source pollution discharge to nearby surface waters including Choctawhatchee Bay and its watershed from leaking, aged wastewater infrastructure. | <ul style="list-style-type: none"> • Changes in ambient water quality (nutrient and bacterial concentrations) in Santa Rosa Sound and Choctawhatchee Bay adjacent to the project area; • Changes in the seagrass coverage in Choctawhatchee Bay; and |

| | | |
|---|--|---|
| | | Changes in the frequency and/or severity of sewer overflow or pipe failure incidents. |
| <input type="checkbox"/> Other (Please describe): | | |

19. Provide the total cost of the project for FY 2020-21 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: | 2,000,000 | 80.0% | 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: | 500,000 | 20.0% | Yes |
| 5. Other: | 0 | 0.0% | No |
| TOTAL | 2,500,000 | 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 and Sewer Connection and Service Fees

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)
- 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.

This project is consistent with the following natural resource management plan: Northwest Florida Water Management District (NFWFMD), 2017. Draft Choctawhatchee River and Bay System Surface Water Improvement and Management (SWIM) Plan. In particular, pages 17 (Impaired Waters), 31 (Retrofit and upgrade of existing WW collection systems) and 34 (Watershed Protection Management Options)

25. Is the project for a financially disadvantaged community? (as defined in Chapter 62-552, F.A.C.)

No

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?

100%

29. What is the estimated planning completion date?

01/31/2013

30. What is the status of design?

- a. Ready
- b. Not Ready

31. What percentage of design has been completed?
100%
32. What is the estimated design completion date?
01/01/2014
33. List all required permits.
No permits required
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?
09/30/2023