

**STATE OF FLORIDA FUNDING CONSIDERATION
ALTERNATIVE WATER SUPPLY PROJECT APPLICATION**

Applications are limited to 25 pages, and all submittals must be uploaded at <https://www.sfwmd.gov/doing-business-with-us/coop-funding> by **February 26, 2024, at 5:00 PM**. Please refer to the example applications located on the website for help in completing your application. Applications must be submitted in Word format and not PDF.

PROJECT SUMMARY

| | |
|--|---|
| Project Name: RO Wellfield Expansion – Phase 2 Lower Floridan Aquifer Well PW-15 and PW-16 | |
| Applicant: City of Springfield Utilities | |
| Authorized Representative: Laura Jones | Project Manager (if different): Mike Smith |
| Address: 123 North Harbor Drive | Address: 123 North Harbor Drive |
| City/Zip: Springfield/33333 | City/Zip: Springfield/33333 |
| Telephone: 954-555-1234 ext. 1098 | Telephone: 954-555-1234 ext. 2835 |
| Email: ljones@springfield.com | Email: msmith@springfield.com |
| Federal ID Number: 59-6000000 | |
| Project Latitude (decimal degrees): 26.493675 | Project Longitude (decimal degrees): -80.329744 |
| Phase Construction Cost (\$): 1,500,000 | Total Capital Cost (\$): 3,750,000 N/A <input type="checkbox"/> |
| Requested State Funding (\$): 500,000 | Applicant's Match Funding (\$): 1,000,000 |
| Third-Party Match Funding (\$): 0 | State Appropriation Funding (\$): 0 |
| SFWMD Planning Region: Lower East Coast | County: Palm Beach |
| Municipal area (area[s] benefited): Springfield City | Constructed on state-owned land: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| AWS Project Type (reclaimed, brackish, ASR, etc.): Brackish water | |
| Multiyear Project? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | |
| Anticipated Construction Start Date: November 2024 | Anticipated Completion Date: August 2025 |
| Phase Capacity (mgd) (within 1-2 years): 2.0 | Total Capacity (mgd) (upon completion): 5.0 |
| Storage Capacity (mg): N/A | Reclaimed only: Distribution Capacity (mgd): N/A |
| Are other agencies contributing funding to this project? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, source(s): Enter text. If yes, amount(s): Enter text. | |
| Does any contractor or other affiliate of the applicant have a financial interest in this project, the property associated with this project, or with any party that may profit financially from this project? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, list the parties and interests: Enter text. | |
| Is the project part of your institution's capital/facilities work program? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | |
| This is a State of Florida reimbursement program with the entire project scope expected to be completed within the funding period, regardless of amount awarded. There is no guarantee the applicant will be awarded the amount requested. Are budgeted funds available to pay for the entire scope of the project? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | |
| Does the applicant understand that if, for any reason, the project scope is not 100% completed as outlined in the statement of work, the funding amount may be reduced to match the original percentage of funding in the contract that was based on the estimated construction cost provided in the application? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | |
| Does the applicant understand that funds are only for applicable expenses incurred during the funding period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | |

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| Does the applicant have a Water/Consumptive Use Permit? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> If yes, provide permit number: 50-12345-W | | | |
|---|-----------------|----------------|--------------------|
| Local governments: Does the applicant have an irrigation ordinance consistent with Chapter 40E-24, Florida Administrative Code (F.A.C.) (Mandatory Year-Round Landscape Irrigation Conservation Measures)? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> If yes, provide ordinance number: Ch. 15 Article III, Div. 1, Sec. 19-82 | | | |
| Does the applicant understand if the irrigation ordinance above does not fully comport with Chapter 40E-24, F.A.C., the application will be deemed ineligible for funding consideration? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | | | |
| Local governments: Does the applicant have an approved Water Supply Facilities Work Plan pursuant to Section 163.3177(6)(c), Florida Statutes (F.S.)? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> If yes, provide date approved and ordinance number: City Ordinance Ch 11, Article 2, Sec. 10-7(c) Adopted May 19, 2021 | | | |
| If “no” selected above: Does the applicant have a proposed Water Supply Facilities Work Plan to be approved before February 26, 2024? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, provide proposed date and ordinance number: Enter text. | | | |
| Does the applicant understand if the Water Supply Facilities Work Plan above does not meet Section 163.3177(6)(c), F.S., the application will be deemed ineligible for funding consideration? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | | | |
| Is the applicant in a REDI Community? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> | | | |
| Has this project received previous SFWMD or state funding? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, provide the following information: | | | |
| Year Awarded | Contract Number | Amount Awarded | Award Amount Spent |
| 2016 | 4600001234 | \$400,000 | \$400,000 |
| Enter text. | Enter text. | Enter text. | Enter text. |
| Enter text. | Enter text. | Enter text. | Enter text. |
| Enter text. | Enter text. | Enter text. | Enter text. |

SHORT DESCRIPTION

In the box below, provide two to three sentences describing the project for which funding is being requested (what will be constructed during the funding period).

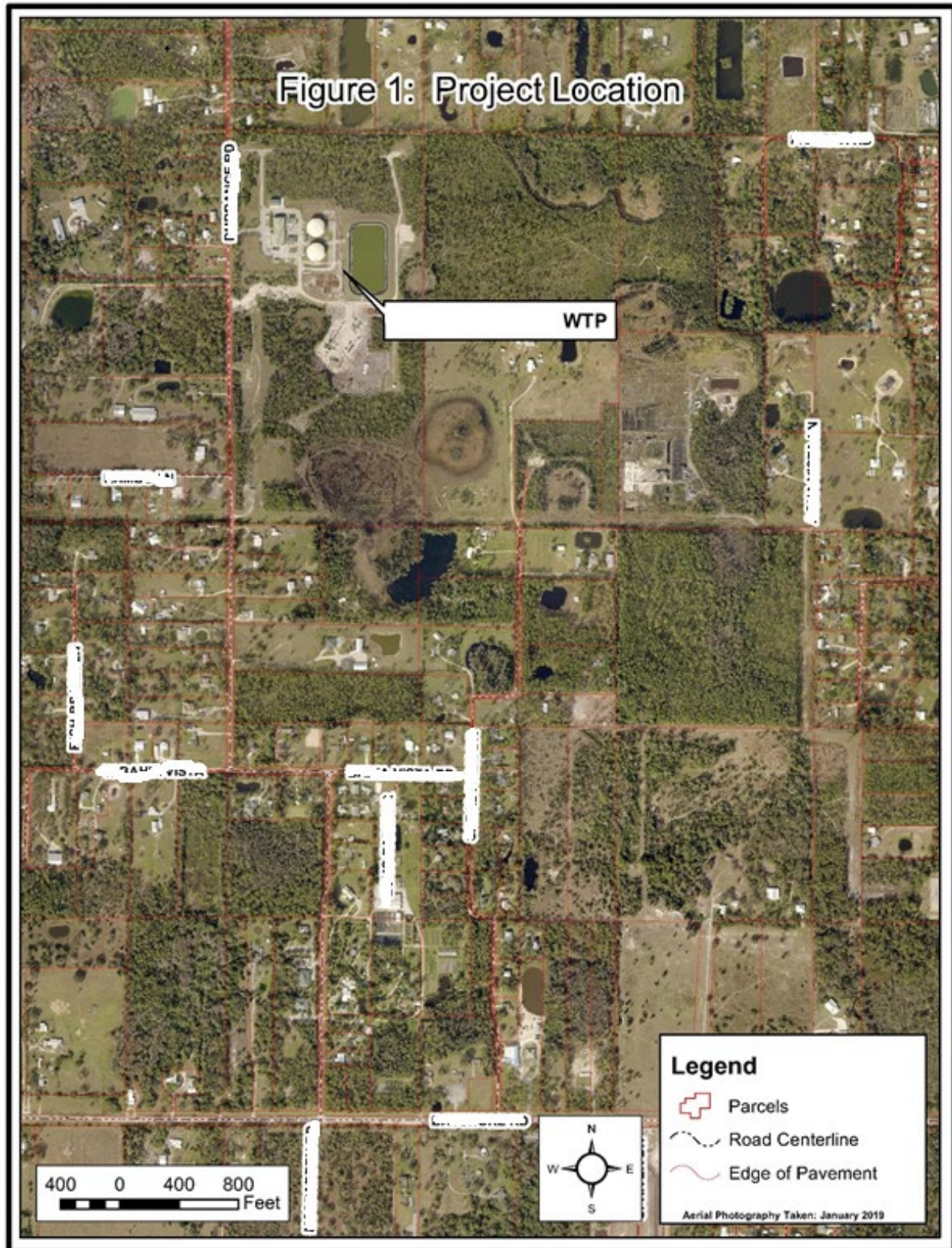
The City of Springfield (City) will be installing two brackish production wells in FY25. This is Phase 2 of the City's Reverse Osmosis (RO) wellfield expansion. These proposed wells are located north and west of the RO Water Treatment Plant (WTP) stretching along Conner Highway. The project includes the 24-inch diameter pipeline connecting the two production wells to the WTP. The Floridan Aquifer System (FAS) wells will provide an additional 2.0 million gallons per day (mgd) of capacity to supply the City's RO WTP.

PROJECT FIGURES

Note: Each figure should fit on a sheet of 8.5" × 11" paper and include a north arrow.

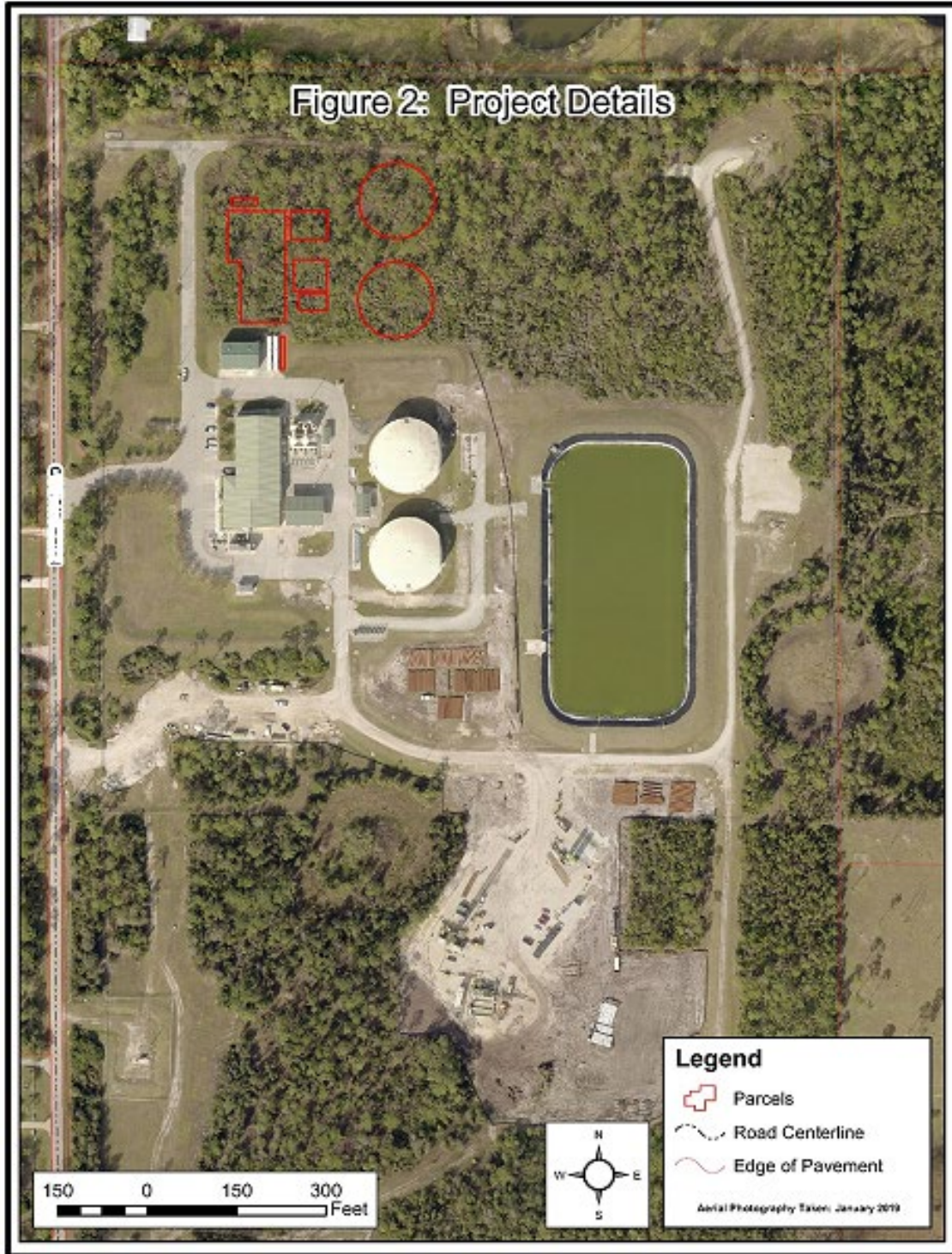
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Figure 1: Project Location. City or town map clearly showing the project location in relation to the nearest major street or road intersection. Insert this map into the Word document as a JPEG, PNG, or GIF.



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Figure 2: Project Details. Project-level map showing sufficient detail depicting the proposed project (e.g., show a proposed pipeline between two intersections bounding the project; show a plant layout with the proposed project phase components highlighted, such as a storage/chlorination tank). Insert this map into the Word document as a JPEG, PNG, or GIF.



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PROJECT DETAILS

Statement of Work

This section will be used to create the contract document if the project is selected for funding. Provide detail on your project as follows:

A. Introduction/Background (up to 6 paragraphs)

The City provides potable water service to approximately 10,000 accounts and approximately 30,000 water customers. The existing Springfield Wellfield, consisting of 11 brackish aquifer wells, is located both within the City's RO WTP property and along various easements and properties in the City. The two proposed FAS wells (PW-15 and PW-16) are expected to provide an additional 2.0 mgd of brackish water to the RO WTP.

The City will be installing PW-15 and PW-16 as part of Phase 2 to be completed in FY25, followed by an additional three brackish production wells in Phase 3 by the end of FY27. All proposed wells are located north and west of the WTP stretching along Conner Highway. Existing wells are located at the WTP site and southwest from the plant.

These future wellfield expansions and an expansion of the City's RO WTP by an additional 5.0 mgd are needed to address future growth projections. RO WTP expansion will be necessary when the existing plant's reliable capacity is expected to be exceeded beginning in 2028 as documented in the most recent Master Plan.

B. Objectives (1-2 sentences)

The objective of the brackish water wellfield expansion is to provide additional water supply for the existing RO WTP plant and, in part, a future expansion. The addition of these wells will help to diversify the City's water sources by expanding the use of brackish water while reducing the long-term use of its surficial aquifer wellfield. Phase 2 is intended to increase the brackish wellfield capacity by 2.0 mgd.

C. Detailed Scope of Work (up to 6 paragraphs – what work will be constructed during the funding period)

The scope of work includes two new production wells (Phase 2) drilled into the brackish FAS and connected back to the RO WTP via 5,000 linear feet of 24-inch diameter raw water pipeline. The wells and accompanying pipeline will be constructed in one contract, and the project is expected to be substantially complete in August 2025.

The construction contract will be for drilling two FAS wells, each with a final diameter of 16-inch and be approximately 1,000 feet deep. The production well identifiers, per the City's water use permit are PW-15 and PW-16.

Simultaneously with the drilling of the wells, the pipeline to the Springfield RO WTP will also be constructed. Starting at the RO WTP there will be approximately 5,000 linear feet of 24-inch diameter High Density Polyethylene (HDPE) pipe installed along the following route: from the RO WTP northwest along Conner Highway to the locations of proposed wells PW-15 and PW-16 (see **Figures 1 and 2**).

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Table 1. – Project Breakdown

| | FY25 | FY26 | FY27 | FY28 | FY29 and Beyond | Project Total |
|--|------------------------|-----------------------|------------------------|----------------|-----------------|----------------|
| Project Phase (e.g., Phase 1/3, etc.) | Phase 2 | Phase 3a | Phase 3b | Enter text. | Enter text. | Not applicable |
| Major Deliverables (brief description) | 2 new production wells | 1 new production well | 2 new production wells | Enter text. | Enter text. | Not applicable |
| Construction Cost (\$) | \$ 1,500,000 | \$ 750,000 | \$ 1,500,000 | \$ Enter text. | \$ Enter text. | \$ 3,750,000 |
| Planning/Design/Engineering/Other Costs (\$) | \$ 200,000 | \$ 225,000 | \$ 0 | \$ Enter text. | \$ Enter text. | \$ 425,000 |
| Total Cost (\$) | \$ 1,700,000 | \$ 975,000 | \$ 1,500,000 | \$ Enter text. | \$ Enter text. | \$ 4,175,000 |
| Capacity Water Made Available (mgd) ¹ | 2.0 | 1.0 | 2.0 | Enter text. | Enter text. | 5.0 |

¹ Include capacity water made available only in the year the phase or project becomes operational.

Table 2. – Deliverables Schedule

| Task No. ¹ | Deliverable(s) (List major tasks to be completed. Add lines as needed.) | Expected Start Date | Expected Completion Date | Construction Cost (\$) |
|--------------------------|--|---------------------|--------------------------|------------------------|
| 1 | Drill Production Well PW-15, 16-inch diameter, approximately 1,000 feet deep | 11/15/24 | 3/15/25 | \$550,000 |
| 2 | Drill Production Well PW-16, 16-inch diameter, approximately 1,000 feet deep | 2/1/25 | 8/15/25 | \$550,000 |
| 3 | Install 5,000 feet of 16-inch diameter HDPE pipeline along Conner Highway from well sites to WTP | 5/1/25 | 8/15/25 | \$400,000 |
| Total² | | | | \$1,500,000 |

¹ Applicant will be required to submit final vendor bid and/or contract documents and quarterly status reports, if awarded funding.

² Total deliverable costs should match the information in **Table 1** and the description in the Detailed Scope of Work above. Deliverables should be descriptive (e.g., number and size of pumps, length, diameter, and location of pipelines) to identify what work is being completed and funding requested.

PROJECT BACKGROUND AND SUPPORTING INFORMATION

Please clearly and briefly answer the following questions and provide supporting information.

Have the project design and bid drawings been completed? Yes ☐ No ☒

If yes, date: Enter text.

If no, anticipated date: 8/1/24

Has the contractor been selected? Yes ☐ No ☒

If no, when: 10/1/24

Have all land purchases, agreements, rights-of-way, etc. been executed? Yes ☐ No ☒

If no, explain: City Council acceptance of purchase agreement for PW-15 and PW-16 is scheduled for 8/25/24.

Have all other necessary items to start construction been completed? Yes ☐ No ☒

If no, explain: Updated SFWMD Water Use Permit has been applied for and is nearing completion. Other permit applications not completed or submitted yet.

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In **Table 3**, list all relevant permits required to start or continue construction.

Table 3. – Permits

| Agency | Permit No. | Permit Type (Water/Wastewater, ERP, CUP, Building) | Permit Obtained? | | Permit Date (expected date if not obtained yet) |
|--|------------|--|------------------|----|--|
| | | | Yes | No | |
| SFWMD | #50-0024-W | Water Use | Enter text. | x | 4/1/24 |
| Springfield Development Service | Not issued | Development Order | Enter text. | x | 7/15/24 |
| FDEP | Not issued | Environmental Resource Permit | Enter text. | x | 7/15/24 |
| FEMA Floodplain | Not issued | No Rise Certificate | Enter text. | x | 7/15/24 |
| Palm Beach County Natural Resources | Not issued | Vegetation Removal | Enter text. | x | 7/15/24 |
| Palm Beach County Dept of Transportation | Not issued | Right of Way | Enter text. | x | 7/15/24 |
| Palm Beach County Development Service | Not issued | Fencing | Enter text. | x | 7/15/24 |

1. If applicable, provide the name of the related project as it appears in the water supply plan (WSP) associated with the proposed work. Projects can be found in the relevant WSP at <https://www.sfwmd.gov/our-work/water-supply>. If the project is not included in a WSP, indicate the project name if it is included in the Water Supply Facilities Work Plan and/or Capital Improvement Schedule of the applicable local government's Comprehensive Plan:

"Springfield Brackish Water Production Well Expansion – Phases 2 and 3": Lower East Coast Water Supply Plan Update 2018, page E-6; and the City of Springfield Florida Capital Improvement Program Budget FY 2022-2026, project number P8901.

Name of Water Supply Plan Project Title or Local Government Project Title

2. Please address the following factors described in the Florida Department of Environmental Protection (FDEP) Guidance Memorandum, dated July 22, 2019, and/or Section [373.707, F.S.](#) (alternative water supply development):

a1. In addition to water supply benefits, does the project provide any water quality benefits?

No.

a2. Are you able to quantify the total phosphorus or total nitrogen reductions in pounds per year (lb/yr) or removal efficiencies? Provide your calculations.

No

b. In addition to water supply benefits, does the project provide complementary benefits such as water conservation, flood protection, resiliency, drought conditions, saltwater intrusion, sea level rise, green infrastructure, and/or recreational benefits? If so, please explain.

No.

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- c. Describe the quantity of water supplied by the project compared to its construction cost. Using the SFWMD AWS CFP Cost-Effectiveness Calculator, calculate the annualized capital cost of the current project phase(s) in \$/kgal. In the space below, show the average annual daily quantity of water supplied by the project (expressed in millions of gallons of water), the estimated construction cost of the project (see the guidelines document to know which costs are and are not eligible), and the annualized capital cost of this project phase. If the project will not be used continuously, please provide the annual amount of water that will be supplied by the project. The SFWMD AWS CFP Cost-Effectiveness Calculator containing your inputs must be submitted along with this application.

| | |
|--|---------------------|
| Quantity of water supplied by all phases of the project | 5.0 mgd |
| Quantity of water supplied by this phase of the project | 2.0 mgd |
| Estimated construction cost | \$1,500,000 |
| Annualized capital cost of this phase* | \$0.45/1,000 gallon |
| *(must come from District Cost-Effectiveness Calculator) | |

- d. Is the project going to be implemented by a multijurisdictional water supply entity or regional water supply authority? If yes, please provide the name of the entity.

No.

- e. Does the utility have a goal-based water conservation program? In not, briefly describe your conservation program.

Yes

- f. Does the project implement reuse which assists in the elimination of domestic wastewater ocean outfalls, as provided in Section [403.086\(10\), F.S.](#)? If yes, answer the follow-up questions below.

No

1. Pursuant to subsection 373.707(9)(a-d), F.S., is reclaimed water metered for all users?

Enter text.

2. Does the utility have a rate structure based on *actual use* of reclaimed water? If no, what is the basis for charged rates?

Enter text.

3. Does the utility have education programs in place to inform the public about water issues, water conservation, and the importance and proper use of reclaimed water? If yes, provide a link.

Enter text.

4. In the table below, list the reclaimed water users who will connect to the proposed reclaimed water project.

| Name | User Demand (mgd) | Is an agreement executed (Y/N)? | Estimated connection date |
|------|-------------------|---------------------------------|---------------------------|
| | | | |
| | | | |
| | | | |

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5. The following should be provided in electronic format, such as shape files or AutoCAD® to rowanves@sfwmd.gov. Files should be editable.
- a. Existing and future wastewater service area boundary.
 - b. Existing and proposed reclaimed water distribution lines and distribution areas.
 - c. Existing and proposed reclaimed water end users.
 - d. Existence and extent of any Mandatory Reuse Zones within the service area. Include ordinance number.

EXAMPLE

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This section includes additional information requested by the FDEP:

| |
|---|
| <p>Is this project a continuation of an existing agreement with the FDEP or SFWMD? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, the FDEP or SFWMD Agreement Number: Enter text.</p> |
| <p>Project delivery method:</p> <p>Design-Bid-Build <input checked="" type="checkbox"/> Design-Build <input type="checkbox"/></p> <p>Construction Management At-Risk <input type="checkbox"/> Progressive Design-Build <input type="checkbox"/> Other <input type="checkbox"/></p> |
| <p>Is the project geographically located within an FDEP-approved Restoration Plan (i.e., Basin Management Action Plan or Reasonable Assurance Plan) area?</p> <p>The following link can be used as an interactive map to identify the BMAP status for the project: https://floridadep.gov/dear/water-quality-restoration/content/impaired-waters-tmdls-and-basin-management-action-plans</p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, what is the name of the Restoration Plan: Enter text.</p> |
| <p>If the project is geographically located within a Restoration Plan area, will the project be identified with a project number on the Statewide Annual Report? The following link is for the Statewide Annual Report: https://floridadep.gov/dear/water-quality-restoration/content/statewide-annual-report</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/></p> <p>If yes:</p> <p>Project Number: Enter text.</p> <p>Unique ID: Enter text.</p> |
| <p>Project Background Questions:</p> <p>What is the water-related issue? Projected population growth for the City will increase demands for potable water. However, additional withdrawals from the surficial aquifer wellfield are prohibited as per the Regional Water Availability Rule adopted in 2007, which limits increases in surface water and groundwater withdrawals above base conditions permitted as of April 1, 2006.</p> <p>Why is the water-related issue a problem? Without this project the City stands to jeopardize the sustainable yield of the surficial aquifer and may fail to meet future demands.</p> <p>How will this project provide a solution to the problem? This project will diversify the City's water sources by expanding the use of brackish water while reducing the long-term use of its surficial aquifer wellfield.</p> <p>What water-related benefits will result from the completion of this project? Water-related benefits of this project include increased efficient use of local water resources; diversification of water resources; and reduced use of the surficial aquifer wellfield.</p> |
| <p>Will this project result in a fully completed (operational) project? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> |
| <p>Will a Florida Licensed Professional Engineer be able to certify work completed? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> |
| <p>Will a Florida Licensed Professional Geologist be able to certify work completed? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> |