



Agenda Report

2725 Judge Fran Jamieson
Way
Viera, FL 32940

Consent

F.8.

9/13/2022

Subject:

Accept and permission for County Manager to execute Florida Department of Environmental Protection (FDEP) Grant Agreement associated with the South Beaches Wastewater Treatment Plant 6 MGD Conversion to Advanced Wastewater Treatment (AWT)

Fiscal Impact:

The FDEP grant was awarded for \$12 million for the above-mentioned project with no County match requirement. The project cost is estimated to be \$12M. If additional funds are required to complete the project they will be provided by Utility Services funds.

Dept/Office:

Utility Services Department

Requested Action:

It is requested that the Board of County Commissioners accept an FDEP grant for conversion of the 6 MGD plant at the South Beaches Wastewater Treatment Facility to AWT and delegate authority to the County Manager to execute contracts and reimbursement requests for the grant and authorize any associated Budget Change Requests (BCR).

Summary Explanation and Background:

The Utility Services Department submitted the above mentioned project to the Florida Senate Local Funding Initiative Request for Fiscal Year 2022-23 on January 26, 2022. The requested grant amount was for \$12 million, with no matching contribution from the County. The Utility Services Department received notice of award on June 22, 2022. Project costs will be included in any needed BCR and in the Utility CIP budget for FY 2023. The Utility has sufficient funds for the project to fulfill the County obligation to complete this project.

The awarded funds will be applied toward the conversion of the 6 MGD plant at the South Beaches Wastewater Treatment Facility to AWT. This upgrade will meet the requirements as stated in Florida Statute 403.086, which requires all wastewater discharge to the Indian River Lagoon to meet Advanced Wastewater standards by July 1, 2025.

Deadline for the County to notify the FDEP to enter into an agreement is September 30, 2022. Upon the County's notification, the FDEP will prepare the agreement for County execution.

Clerk to the Board Instructions:

E-mail Clerk Memo to karina.perez@brevardfl.gov and mail original Memo to Utility Services Department.



September 14, 2022

MEMORANDUM

TO: Edward Fontanin, Utility Services Director

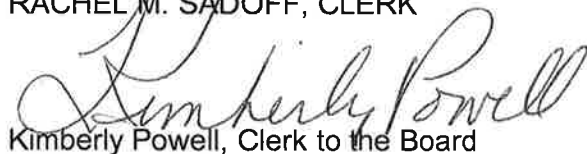
RE: Item F.8., Accept and Permission for County Manager to execute Florida Department of Environmental Protection (FDEP) Grant Agreement associated with the South Beaches Wastewater Treatment Plant 6 MGD Conversion to Advanced Wastewater Treatment (AWT)

The Board of County Commissioners, in regular session on September 13, 2022, accepted the FDEP grant for conversion of the 6 MGD plant at the South Beaches Wastewater Treatment Facility to AWT; and delegated authority to the County Manager to execute contracts and reimbursement requests for the grant, and to authorize any associated Budget Change Requests.

Your continued cooperation is always appreciated.

Sincerely,

BOARD OF COUNTY COMMISSIONERS
RACHEL M. SADOFF, CLERK


Kimberly Powell, Clerk to the Board

/ds

cc: County Manager
Finance
Budget

Agreement Initiation Form

Agreement Info

Agreement Number:	LPA0418
Project Title:	South Beaches WWTF Conversion to AWT, 6MGD
Grantee:	Brevard County
Award Amount:	\$12,000,000
Funding Source:	LP, GAA LI 1650A, FY 22-23, GR

Project Info

Answer the questions below. Enter N/A for questions that do not apply to this project.

1) What is the estimated completion date for this project?	06/29/2026
2) What type of project delivery method will be used for this project?	Design-Bid-Build
3) Is this project a continuation of a project for which there is already an agreement in place with DEP?	No
4) If yes, what is the DEP Agreement Number?	N/A
5) Is the project geographically located within a DEP-approved Restoration Plan (i.e. Basin Management Action Plan or Reasonable Assurance Plan) area?	Yes
6) If yes, what is the name of the Restoration Plan?	Indian River Lagoon BMAP
▪ 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	
7) 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?	No
8) If yes, enter the Project Name and Unique ID from the Statewide Annual Report below.	
Project Number:	Unique ID:
▪ The following link is for the Statewide Annual Report: https://floridadep.gov/dear/water-quality-restoration/content/statewide-annual-report	

Project Location

Indicate the municipal area (e.g. city of ____, town of ____, etc.), county, project coordinates, and if work will be performed on State-owned land.

Municipal Area:	Melbourne Beach
County:	Brevard
Project Coordinates:	Lat/Long (28.0410, -80.5480)
Will work be performed on State-owned land?	No

Project Background

The project background can be a brief summary (i.e. 4-6 sentences) that provides relevant information on the history and/or scope of the project. Identify: 1) what the water related issue is; 2) why the water related issue is a problem; 3) how the Grantee will provide a solution to the problem (i.e. the project); and 4) what water-related benefits will result from the completion of the project.

Summary: The new Indian River Lagoon (IRL) regulations require that any water discharged into the IRL must meet advanced wastewater treatment (AWT) standards by July 1, 2025. The existing South Beaches WWTF 6 MGD treatment trains were not designed for and are not capable of meeting the low nutrient levels required for discharge (TN < 3 mg/L; and TP < 1 mg/L). Therefore, this project is for the conversion of the existing 6.0 MGD Carrousel Treatment System to a 5-Stage Bardenpho BNR treatment system that is capable of producing an AWT effluent. The conversion of the existing 6.0 MGD Carrousel Treatment System to an AWT treatment system will reduce total nitrogen and total phosphorus loadings to the IRL.

Project Description

Provide a brief summary (2-4 sentences) that only details the work that will be completed and reimbursed with the grant funding provided under this Agreement. Indicate if the grant funding will result in a completed project.

Summary: The grant funding will be used for the design and construction of the 5-Stage Bardenpho BNR Treatment system converting the existing South Beaches WWTF 6 MGD treatment train to AWT, reducing total nitrogen and total phosphorus loading within the Indian River Lagoon BMAP area. The grant funding will result in a completed project.

Will the funding provided in this agreement result in a fully completed project?

Yes

Project Benefits

Identify the estimated future benefits that will be provided by the completion of this project. The estimated benefits should reflect the entire project. Enter N/A for the benefits that do not apply to this project.

Total Nitrogen Reduction (lb/yr):	164,500
% Reduction Total Nitrogen (lb/yr):	56%
Total Phosphorus Reduction (lb/yr):	54,800
% Reduction Total Phosphorus (lb/yr):	56%
# of Potential Sewer Connections:	N/A
Septic Tanks Eliminated:	N/A
Septic Systems Upgraded/Enhanced:	N/A

Tasks

Indicate the tasks below that apply to this project and will have costs that will be reimbursed with the grant funding provided under this Agreement. For tasks that do not apply to this project, select No and leave the corresponding questions blank.

Pre-Design Study	Include task in Grant Work Plan?
	No
This task includes studies that will be completed prior to the design phase of the project. Examples: feasibility studies, environmental assessments, etc.	
1) Provide a brief summary below of the pre-design studies that will be completed under this task.	
Summary: <input type="text"/>	
2) What type of final report/documentation will be submitted upon completion of this task?	
Summary: <input type="text"/>	
3) Will the work under this task be completed by a contractor/consultant?	[Select Option]
4) If no, provide a brief summary below of how the work will be completed.	
Summary: <input type="text"/>	

Design and Permitting	Include task in Grant Work Plan?
	Yes
<p>This task includes activities within the design phase that are necessary for the completion of the design. Design, permitting, and other preconstruction activities can be covered under this task.</p> <p><u>Examples:</u> design, permits, geotechnical or topographic surveys, hydro-analysis, water modeling, etc.</p>	
1) Will other preconstruction activities (i.e. not design/permitting) be included within this task?	No
2) If yes, provide a brief summary below of the other preconstruction activities.	
<u>Summary:</u> <input type="text"/>	
3) Will the work under this task be completed by a contractor/consultant?	Yes
4) If no, provide a brief summary below of how the work will be completed.	
<u>Summary:</u> <input type="text"/>	

Bidding and Contractor Selection	Include task in Grant Work Plan?
	Yes
<p>This task includes activities within the bid phase of the project.</p> <p><u>Examples:</u> bidding services, public notices, pre-bid meetings, bid packages, etc.</p>	
1) Will the contractor(s) for this project be selected through a competitive bidding process?	Yes
2) If no, provide a brief summary below of how the contractor(s) will be selected.	
<u>Summary:</u> <input type="text"/>	
3) Will the work under this task be completed by a contractor/consultant?	No
4) If no, provide a brief summary below of how the work will be completed.	
<u>Summary:</u> Bidding and contractor selection tasks will be completed by Brevard County staff.	

Project Management	Include task in Grant Work Plan?
	Yes
<p>This task includes project management activities for this project.</p> <p><u>Examples:</u> field engineering services, construction observation, site meetings with construction contractor(s) and design professionals, project coordination and supervision, etc.</p>	
1) Will the work under this task be completed by a consultant/contractor?	No
2) If no, provide a brief summary below of how the task will be completed.	
<p><u>Summary:</u> Project management will be led by Brevard County Utility Services Department staff with the assistance of a consultant.</p>	

Connection to Central Sewer	Include task in Grant Work Plan?
	No
<p>This task includes the connection of properties to central sewer. This task does not include the construction of extensions to the central sewer system, which should be included in the "Construction" task. Proper abandonment of the septic systems will be required for properties that are connected to central sewer.</p>	
1) How many residential properties will be connected?	
2) How many commercial properties will be connected?	
3) Will materials or supplies for this task be directly purchased by the Grantee?	[Select Option]
4) If yes, what is the estimated cost of the materials or supplies?	
5) Will the work under this task be completed by a contractor/consultant?	[Select Option]
6) If no, provide a brief summary below of how the work will be completed.	
<p><u>Summary:</u></p>	

Construction	Include task in Grant Work Plan?
	Yes
<p>This task includes the construction or installation of water related infrastructure.</p> <p><u>Examples:</u> replacement and/or installation of piping, extensions to water systems, improvements and/or upgrades to water treatment facilities, construction of lift stations, etc.</p>	
1) Will materials or supplies for this task be directly purchased by the Grantee?	No
2) If yes, what is the estimated cost of the materials or supplies?	
3) Will a Florida Licsenced Professional Enginneer be able to certify the work?	Yes
4) Will the work under this task be completed by a contractor/consultant?	Yes
5) If no, provide a brief summary below of how the work will be completed.	
<u>Summary:</u>	

Study	Include task in Grant Work Plan?
	No
<p>This task includes studies that are not connected to the design of a project or will be performed after the completion of a project.</p> <p><u>Examples:</u> feasibility studies, environmental assessments, master plans, project evaluation study etc.</p>	
1) Provide a brief summary below of the studies that will be completed under this task.	
<u>Summary:</u>	
2) What type of final report/documentation will be submitted upon completion of this task?	
<u>Final report/documentation:</u>	
3) Will the work under this task be completed by a contractor/consultant?	[Select Option]
4) If no, provide a brief summary below of how the work will be completed.	
<u>Summary:</u>	

Equipment Purchase	Include task in Grant Work Plan?	
	No	
<p>This task includes capital outlay costing \$5,000 or more that will be directly purchased by the Grantee and will not be permanently installed or constructed.</p> <p><u>Examples:</u> portable generators, vacuum trucks, pumps etc.</p>		
1) Provide a brief summary below of the equipment that will be completed under this task.		
<u>Summary:</u> <input type="text"/>		
2) Will the Grantee directly purchase the equipment from a vendor?		[Select Option]
3) If no, provide a brief summary below of how the equipment will be purchased.		
<u>Summary:</u> <input type="text"/>		
4) Will installation and start-up be included in the equipment purchase?		[Select Option]
5) If no, will there be construction or installation costs?		[Select Option]
6) If yes, what will the estimated cost be for the construction or installation?		<input type="text"/>

Land Acquisition	Include task in Grant Work Plan?	
	No	
<p>This task includes the purchase of land for acquiring interest and/or rights for real property (including access rights through ingress/egress easements, leases, license agreements or other site access agreements; and/or obtaining record title ownership of real property through purchase).</p>		
1) Provide a brief summary below of the land that will be acquired/purchased under this task.		
<u>Summary:</u> <input type="text"/>		
2) Will the land acquisition be fee simple?		[Select Option]
3) If no, will the land acquisition be less than fee simple?		[Select Option]

Other	Include task in Grant Work Plan?
	No
<p>This task includes activities that are not related to the previously listed tasks. These other activities may require a customized task to be included in the Grant Work Plan.</p> <p><u>Examples:</u> site clean up, site leases, muck dredging and spoil management, etc.</p>	
<p>1) Provide a brief summary below of the land that will be acquired/purchased under this task.</p>	
<p><u>Summary:</u> <input type="text"/></p>	

Project Timeline and Budget

Complete this table to summarize timeline and budget for the tasks identified in the previous section. Use the dropdowns to select the task titles and enter the grant amounts that will be allocated to each task. All task start dates will reflect the grant reimbursement eligibility date of July 1, 2022. The task end dates should reflect an estimated completion date for each task. Add or delete tasks as needed.

Task No.	Task Title	Grant Amount	Task Start Date	Task End Date
1	Design and Permitting	\$ 1,000,000	10/01/2022	03/31/2024
2	Bidding and Contractor Selection	\$0	03/31/2024	06/29/2024
3	Construction	\$ 11,000,000	06/29/2024	06/29/2026
4	Project Management	\$0	10/01/2022	06/29/2026
5	Select Title	\$	07/01/2022	mm/dd/yyyy
Total:		\$12,000,000		

Agreement Insurance Language and Requirements

Insurance

- a. Insurance Requirements for Sub-Grantees and/or Subcontractors. The Grantee shall require its sub-grantees and/or subcontractors, if any, to maintain insurance coverage of such types and with such terms and limits as described in this Agreement. The Grantee shall require all its sub-grantees and/or subcontractors, if any, to make compliance with the insurance requirements of this Agreement a condition of all contracts that are related to this Agreement. Sub-grantees and/or subcontractors must provide proof of insurance upon request.
- b. Deductibles. The Department shall be exempt from, and in no way liable for, any sums of money representing a deductible in any insurance policy. The payment of such deductible shall be the sole responsibility of the Grantee providing such insurance.
- c. Proof of Insurance. Upon execution of this Agreement, Grantee shall provide Department documentation demonstrating the existence and amount for each type of applicable insurance coverage **prior to** performance of any work under this Agreement. Upon receipt of written request from Department, Grantee shall furnish Department with proof of applicable insurance coverage by standard form certificates of insurance, a self-insured authorization, or other certification of self-insurance.
- d. Duty to Maintain Coverage. In the event that any applicable coverage is cancelled by the insurer for any reason, or if Grantee cannot get adequate coverage, Grantee shall immediately notify Department of such cancellation and shall obtain adequate replacement coverage conforming to the requirements herein and provide proof of such replacement coverage within ten (10) days after the cancellation of coverage.
- e. Insurance Trust. If the Grantee's insurance is provided through an insurance trust, the Grantee shall instead add the Department of Environmental Protection, its employees, and officers as an additional covered party everywhere the Agreement requires them to be added as an additional insured.

Requirements for Insurance Coverage under a purchased policy

Required Coverage. At all times during the Agreement the Grantee, at its sole expense, shall maintain insurance coverage of such types and with such terms and limits described below. The limits of coverage under each policy maintained by the Grantee shall not be interpreted as limiting the Grantee's liability and obligations under the Agreement. All insurance policies shall be through insurers licensed and authorized to issue policies in Florida, or alternatively, Grantee may provide coverage through a self-insurance program established and operating under the laws of Florida. Additional insurance requirements for this Agreement may be required elsewhere in this Agreement, however the minimum insurance requirements applicable to this Agreement are:

- a. Commercial General Liability Insurance.
The Grantee shall provide adequate commercial general liability insurance coverage and hold such liability insurance at all times during the Agreement. The Department, its employees, and officers shall be named as an additional insured on any general liability policies. The minimum limits shall be \$250,000 for each occurrence and \$500,000 policy aggregate.
- b. Commercial Automobile Insurance.
If the Grantee's duties include the use of a commercial vehicle, the Grantee shall maintain automobile liability, bodily injury, and property damage coverage. Insuring clauses for both bodily injury and property damage shall provide coverage on an occurrence basis. The Department, its employees, and officers shall be named as an additional insured on any automobile insurance policy.
The minimum limits shall be as follows:

\$200,000/300,000	Automobile Liability for Company-Owned Vehicles, if applicable
\$200,000/300,000	Hired and Non-owned Automobile Liability Coverage
- c. Workers' Compensation and Employer's Liability Coverage.
The Grantee shall provide workers' compensation, in accordance with Chapter 440, F.S. and employer liability coverage with minimum limits of \$100,000 per accident, \$100,000 per person, and \$500,000 policy aggregate. Such policies shall cover all employees engaged in any work under the Grant.
- d. Other Insurance.
None.

Requirements for Self-Insured Governmental Entities

Required Coverage. At all times during the Agreement the Grantee, at its sole expense, shall maintain insurance coverage of such types and with such terms and limits described below. The limits of coverage under each policy maintained by the Grantee shall not be interpreted as limiting the Grantee's liability and obligations under the Agreement. Grantee shall provide coverage through a self-insurance program established and operating under the laws of Florida. Additional insurance requirements for this Agreement may be required elsewhere in this Agreement, however the minimum insurance requirements applicable to this Agreement are:

a. **Comprehensive General Liability Insurance.**

The Grantee shall provide adequate comprehensive general liability insurance coverage and hold such liability insurance at all times during the Agreement. The minimum limits shall be \$200,000 for each person and \$300,000 per occurrence.

b. **Commercial Automobile Insurance.**

If the Grantee's duties include the use of a commercial vehicle, the Grantee shall maintain automobile liability, bodily injury, and property damage coverage. Insuring clauses for both bodily injury and property damage shall provide coverage on an occurrence basis.

The minimum limits shall be as follows:

\$200,000/300,000	Automobile Liability for Company-Owned Vehicles, if applicable
\$200,000/300,000	Hired and Non-owned Automobile Liability Coverage

c. **Workers' Compensation.**

The Grantee shall comply with the workers' compensation requirements of Chapter 440, F.S.

d. **Other Insurance.**

None.



The Florida Senate Local Funding Initiative Request Fiscal Year 2022-2023

1. **Project Title**
2. **Senate Sponsor**
3. **Date of Request**

4. **Project/Program Description**

This project upgrades the 6 million gallons per day treatment plant to Advanced Wastewater Treatment.

This project was submitted for a DEP Water Protection Grant - Wastewater on 07/15/2021, with a 0% match from the utility. As of 1/26/2022, no grant funding has been awarded for this project.

5. **State Agency to receive requested funds**
- State Agency contacted? ☒ Yes ☐ No

6. **Amount of the Nonrecurring Request for Fiscal Year 2022-2023**

Type of Funding	Amount
Operations	<input type="text"/>
Fixed Capital Outlay	<input type="text" value="12,000,000"/>
Total State Funds Requested	<input type="text" value="12,000,000"/>

7. **Total Project Cost for Fiscal Year 2022-2023 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	<input type="text" value="12,000,000"/>	<input type="text" value="100.0 %"/>
Matching Funds		
Federal	<input type="text" value="0"/>	<input type="text" value="0.0 %"/>
State (excluding the amount of this request)	<input type="text" value="0"/>	<input type="text" value="0.0 %"/>
Local	<input type="text" value="0"/>	<input type="text" value="0.0 %"/>
Other	<input type="text" value="0"/>	<input type="text" value="0.0 %"/>
Total Project Costs for Fiscal Year 2022-2023	<input type="text" value="12,000,000"/>	<input type="text" value="100.0 %"/>



The Florida Senate Local Funding Initiative Request Fiscal Year 2022-2023

8. **Has this project previously received state funding?** ☐ Yes ☒ 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?** ☐ Yes ☒ No

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

Pending approval of revised rate resolution/adjustment at the February 8, 2021 Board meeting. If approved, then bonds or Federal funds would have to be pursued.

10. **Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?** ☒ Yes ☐ No

If yes, indicate the amount of funds received and what the funds were used for.

\$29M was allocated to the Brevard County Utility Services Department. Funding was allocated to various wastewater and potable water projects.



The Florida Senate Local Funding Initiative Request Fiscal Year 2022-2023

11. Details on how the requested state funds will be expended

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		
Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Operational Costs: Other		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	All \$12M will be allocated toward the anticipated cost of the construction.	12,000,000
Total State Funds Requested (must equal total from question #6)		12,000,000



The Florida Senate Local Funding Initiative Request Fiscal Year 2022-2023

12. Program Performance

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

The aging 6.0 MGD wastewater treatment plant at the South Beaches WWTF will be converted to Advanced Wastewater Treatment, reducing the TN and TP loadings within the Indian River lagoon BMAP area.

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

Conversion of the 6.0 MGD wastewater treatment plant at the South Beaches WWTF to Advanced Wastewater Treatment.

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

This project will bring this facility to compliance with FS 403.064 - reuse of reclaim water

- d. Who is the target population served by this project? How many individuals are expected to be served?

This project will ensure that reuse runoff will be nutrient reduced per FS 403.064

- e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?

Reduced nutrient loading to the lagoon will reduce algal blooms and provide a healthier local environment for valuable native species to thrive, improving economic and cultural features of Brevard County.

Effluent analysis of the treated wastewater will allow for quantification of the water quality improvement following the upgrade to Advanced Wastewater treatment.

- 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?

N/A is not considered a valid response



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2022-2023

13. 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.

South Beaches Wastewater Treatment Facility is owned by the Brevard County Board of County Commissioners, and managed by the Utility Service Department.

14. Requestor Contact Information

- a. First Name Last Name
- b. Organization
- c. E-mail Address
- d. Phone Number Ext.

15. Recipient Contact Information

- a. Organization
- b. Municipality and County
- 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 Last Name
- e. E-mail Address
- f. Phone Number

16. Lobbyist Contact Information

- a. Name
- b. Firm Name
- c. E-mail Address
- d. Phone Number Ext.



The Florida Senate Local Funding Initiative Request Fiscal Year 2022-2023

Please complete the questions below for Water Projects only.

17. Have you applied for alternative state funding?

- ☐ Waste Water Revolving Loan
- ☐ Drinking Water Revolving Loan
- ☐ Small Community Wastewater Treatment Grant
- ☐ Other (please specify)
- ☐ 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?

20. What percentage of the construction has been completed?

21. What is the estimated completion date of construction?

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

AGREEMENT CONTACT INFORMATION

Agreement Number: LP[will be assigned]
Grantee: (i.e., city of, * county) Brevard County Utility Services Department
Project Title: South Beaches WWTF Conversion to AWT, 6MGD
Award Amount: \$
Match Amount (if required): \$0
Local Pledged Contributions: \$0
Federal Employer ID Number: 59-6000523

1) Authorized Representative (to sign agreement)

Name: Frank Abbate Phone Number: 321-633-2001
Title: County Manager
Employer: Brevard County Board of County Commissioners
Mailing Address (P.O. Box): _____
City: _____ State: _____ Zip: _____
Street Address for express mail delivery: 2725 Judge Fran Jamieson Way Bldg.C
City: Melbourne State: FL Zip: 32940
E-mail address: Frank.Abbate@brevardfl.gov

2) Grant Manager

Name: Kim Cox Phone Number: 321-350-8366
Title: Finance Officer
Employer: Brevard County Board of County Commissioners
Mailing Address (P.O. Box): 2725 Judge Fran Jamieson Way Bldg. A-213
City: Melbourne State: FL Zip: 32940
E-mail address: Kimberly.Cox@brevardfl.gov

3) Disbursement Contact Person (who will prepare requests)

Name: Isidro Rivera-Alicea Phone Number: 321-301-4294
Title: Accountant II
Employer: Brevard County Board of County Commissioners
Mailing Address (P.O. Box): 2725 Judge Fran Jamieson Way Bldg. A-213
City: Melbourne State: FL Zip: 32940
E-mail address: Isidro.Rivera-Alicea@brevardfl.gov

4) Primary Contact (if different from Grant Manager or Disbursement preparer)

Name: _____ Phone Number: _____
Title: _____
Employer: _____
Mailing Address (P.O. Box): _____
City: _____ State: _____ Zip: _____
E-mail address: _____