



Sunshine
Water Control District

REGULAR MEETING AGENDA

December 7, 2022

**SUNSHINE
WATER CONTROL DISTRICT**

**AGENDA
LETTER**



November 30, 2022

Board of Supervisors
Sunshine Water Control District

ATTENDEES:
Please identify yourself each
time you speak to facilitate
accurate transcription of
meeting minutes.

Dear Board Members:

The Board of Supervisors of the Sunshine Water Control District will hold a Regular Meeting on December 7, 2022 at 6:30 p.m., at the La Quinta Inn Coral Springs, 3701 N. University Drive, Coral Springs, Florida 33065. The agenda is as follows:

1. Call to Order
2. Roll Call
3. Pledge of Allegiance
4. Public Comments **[3-Minute Time Limit]** *(Comments should be made from the microphone to ensure recording. Please state your name prior to speaking.)*
5. Presentation: Benefits Plan Renewal
 - A. Renewal Proposal [Current Plan 2023]
 - B. Renewal Proposal 2023
 - C. Renewal Av Med All Lines
 - D. Health Care Costs Analysis Fiscal Year 2023 with No Plan Changes
6. Consideration of Letters to Property Owners ROW Maintenance WOFC
 - A. Option 2 Agreement
 - B. Option 3 Agreement
 - C. No Agreement
7. Acceptance of Unaudited Financial Statements as of October 31, 2022
8. Approval of October 12, 2022 Regular Meeting Minutes
9. Supervisors' Communications
10. Staff Reports
 - A. District Counsel: *Lewis, Longman & Walker, P.A.*

- Discussion: Referendum Outcome on District Voting
 - Legislative Update
- B. District Engineer: *Craig A. Smith & Associates*
- I. Presentation: Monthly Engineer’s Report
 - II. Permit Application(s)
 - a. AT&T Florida [Near 4084 Coral Springs Dr.]
 - b. FG Construction Services, LLC on Behalf of Broward County Board of County Commissioners [West Outfall Canal/Coral Springs Dr. Bridge]
- C. District Engineering Consultant: *John McKune*
- D. District Field Supervisor: *Cory Selchan*
- E. District Manager: *Wrathell, Hunt & Associates, LLC*
- I. Update: Board Member Health Plan
 - II. Discussion: Holiday Luncheon
 - III. NEXT MEETING DATES
 - December 16, 2022 at 10:00 AM [401(a) Committee Meeting]
 - January 11, 2023 at 6:30 PM [Regular Meeting]


○ QUORUM CHECK

Joe Morera	<input type="checkbox"/>	IN PERSON	<input type="checkbox"/>	PHONE	<input type="checkbox"/>	NO
Ivan Ortiz	<input type="checkbox"/>	IN PERSON	<input type="checkbox"/>	PHONE	<input type="checkbox"/>	NO
Ed Khouri	<input type="checkbox"/>	IN PERSON	<input type="checkbox"/>	PHONE	<input type="checkbox"/>	NO

11. Public Comments

12. Adjournment

Should you have any questions, please contact me directly at (561) 346-5294 or Jamie Sanchez at (561) 512-9027.

Sincerely,

 Cindy Cerbone
 District Manager

FOR BOARD MEMBERS AND STAFF TO ATTEND BY TELEPHONE
CALL-IN NUMBER: 1-888-354-0094
PARTICIPANT PASSCODE: 131 733 0895

**SUNSHINE
WATER CONTROL DISTRICT**

5A

GroupName: Sunshine Water Control
Effective Date: 01/01/2023
Agency Name: AvMed
Rating Method: Age-Banded
Medical Factor: 1
Workers Comp Factor: 1
Corp Id: AHQK
AvMed Representative: Medina, Bivian

Plan Family	HMO
Plan Name	HMO 5768
Network	In Network
Calendar Year Deductibles (Individual/Family)	\$0/\$0
Out-of-Pocket Maximums (Individual/Family)	\$1,500/\$3,000
Primary Care Physician (PCP) Cost Share	\$25 copay
Specialist Cost Share	\$45 copay
Virtual Visits Cost Share	Not applicable
Retail Clinic Cost Share	Not applicable
Urgent Care Cost Share	\$40 copay
Emergency Room Cost Share	\$200 copay
Basic Imaging Tests Cost Share (X-ray, Ultrasound, etc.)	\$20 copay
Complex Imaging Tests Cost Share (CT/PET scans, MRI's, etc.)	\$100 copay/test
Outpatient Routine Lab	Not applicable
Outpatient Surgery Cost Share	No Charge
Inpatient Hospital Cost Share	\$10 copay
** Prescription Drug	\$5 copay / \$30 copay / \$60 copay / 25% coinsurance up to a max out-of-pocket of \$250

* After Deductible - Deductibles are applied on a calendar year basis.

** Brand Additional Charge means the additional charge that must be paid if you or your physician choose a Brand medication when a Generic equivalent is available. The charge is the difference between the cost of the Brand medication and the Generic medication. This charge must be paid in addition to the Non-Preferred Co-Payment (does not apply to DFS basic and standard plans).

GroupName: Sunshine Water Control
Effective Date: 01/01/2023
Agency Name: AvMed
Rating Method: Age-Banded
Medical Factor: 1
Workers Comp Factor: 1
Corp Id: AHQK
AvMed Representative: Medina, Bivian

Census and Rates

				HM-OA-5768
Employee Sex	Employee Age	Tier	Region	Rates
Male	42	EE	Broward	\$907.80
Male	42	EE	Broward	\$907.80
Female	29	EE	Broward	\$1,246.35
Male	61	CN	Broward	\$3,694.38
Male	42	FA	Broward	\$3,620.47
Male	39	FA	Broward	\$3,375.23
Male	42	FA	Broward	\$3,620.47
Male	42	FA	Palm Beach	\$3,620.47

GroupName: Sunshine Water Control
 Effective Date: 01/01/2023
 Agency Name: AvMed
 Rating Method: Age-Banded
 Medical Factor: 1
 Workers Comp Factor: 1
 Corp Id: AHQK
 AvMed Representative: Medina, Bivian

Age Rate Matrix

Listing of Age Banded Rates for Plan :		HM-OA-5768					
AgeBand	Region	Employee Only Male Rate	Employee Only Female Rate	Employee Male & Child(ren) Rate	Employee Female & Child(ren) Rate	Employee & Spouse Rate	Employee & Family Rate
<25	(01) DADE, BROWARD	\$566.60	\$986.26	\$1,616.03	\$2,035.69	\$1,597.19	\$2,858.28
25-29	(01) DADE, BROWARD	\$589.43	\$1,246.35	\$1,594.53	\$2,295.78	\$1,835.78	\$3,096.86
30-34	(01) DADE, BROWARD	\$623.56	\$1,253.88	\$1,628.66	\$2,303.31	\$1,877.44	\$3,138.53
35-39	(01) DADE, BROWARD	\$712.77	\$1,357.05	\$1,762.20	\$2,406.48	\$2,114.15	\$3,375.23
40-44	(01) DADE, BROWARD	\$907.80	\$1,407.25	\$1,957.23	\$2,456.68	\$2,359.38	\$3,620.47
45-49	(01) DADE, BROWARD	\$1,231.72	\$1,525.71	\$2,281.15	\$2,575.14	\$2,801.76	\$4,062.85
50-54	(01) DADE, BROWARD	\$1,685.73	\$1,734.16	\$2,735.16	\$2,783.59	\$3,419.89	\$4,680.98
55-59	(01) DADE, BROWARD	\$2,393.63	\$1,918.00	\$3,443.05	\$2,967.43	\$4,311.63	\$5,572.72
60-64	(01) DADE, BROWARD	\$2,644.96	\$2,523.17	\$3,694.38	\$3,572.60	\$5,168.13	\$6,429.21
65+	(01) DADE, BROWARD	\$3,093.10	\$2,753.00	\$4,142.52	\$3,802.43	\$5,846.10	\$7,107.18
MEDICARE PRIMARY	(01) DADE, BROWARD	\$927.97	\$825.91	\$1,242.80	\$1,140.74	\$1,753.88	\$2,132.21

<25	(02) PALM BEACH	\$566.60	\$986.26	\$1,616.03	\$2,035.69	\$1,597.19	\$2,858.28
25-29	(02) PALM BEACH	\$589.43	\$1,246.35	\$1,594.53	\$2,295.78	\$1,835.78	\$3,096.86
30-34	(02) PALM BEACH	\$623.56	\$1,253.88	\$1,628.66	\$2,303.31	\$1,877.44	\$3,138.53
35-39	(02) PALM BEACH	\$712.77	\$1,357.05	\$1,762.20	\$2,406.48	\$2,114.15	\$3,375.23
40-44	(02) PALM BEACH	\$907.80	\$1,407.25	\$1,957.23	\$2,456.68	\$2,359.38	\$3,620.47
45-49	(02) PALM BEACH	\$1,231.72	\$1,525.71	\$2,281.15	\$2,575.14	\$2,801.76	\$4,062.85
50-54	(02) PALM BEACH	\$1,685.73	\$1,734.16	\$2,735.16	\$2,783.59	\$3,419.89	\$4,680.98
55-59	(02) PALM BEACH	\$2,393.63	\$1,918.00	\$3,443.05	\$2,967.43	\$4,311.63	\$5,572.72
60-64	(02) PALM BEACH	\$2,644.96	\$2,523.17	\$3,694.38	\$3,572.60	\$5,168.13	\$6,429.21
65+	(02) PALM BEACH	\$3,093.10	\$2,753.00	\$4,142.52	\$3,802.43	\$5,846.10	\$7,107.18
MEDICARE PRIMARY	(02) PALM BEACH	\$927.97	\$825.91	\$1,242.80	\$1,140.74	\$1,753.88	\$2,132.21

**SUNSHINE
WATER CONTROL DISTRICT**

5B

10/25/2022

PATTY VILLARAN
SUNSHINE WATER CONTROL
2300 Glades Rd Ste 410
Boca Raton, Florida, 33431

RE: YOUR AVMED RENEWAL

Dear Patty Villaran,

We would like to thank you for entrusting us with your employees' healthcare coverage and remind you that it is time to renew. We are pleased to offer you a variety of Affordable Care Act(ACA) compliant options from which to choose. Please note that some of your current plan's benefits and cost sharing amounts may have changed. **Please be sure to carefully review the Renewing Plan's Key Benefits page for details.**

IMPORTANT INFORMATION

Some plans will no longer be offered in 2023.

To ensure competitive pricing and maximum flexibility, our product portfolio has been realigned. Please review this proposal carefully. If your plan is discontinued you will be auto renewed in a plan with the most similar coverage as detailed on the Renewing Plan's Key Benefits page unless you choose otherwise.

If you would like to renew on the plan(s) listed as your Renewing Plan(s): No further action is required and you will auto-renew at the enclosed rates⁽¹⁾.

If you prefer another option OR wish to change your group information: Email the Renewal Change Form to smallgrouprenewals@AvMed.org or fax to (305) 671-0154 prior to **12/2/2022**. We will otherwise begin the auto-renewal process, as detailed above.

Please feel free to direct questions to your agent, Patty Villaran, at (561) 793-1234, or call us directly. We look forward to serving you for another year.

Warmly,
AvMed Small Group Support
Center 1-800-835-6131

CC:
Patty Villaran
Gallagher Benefit Services, Inc. - WPB
2056 Vista Parkway Suite 300
West Palm Beach, FL 33411

AHQK

(1) Subject to your continued adherence with all Underwriting Guidelines and Requirements.

Dear Policyholder,

We are writing to inform you that, consistent with federal guidance, you may keep your existing coverage for the upcoming policy year.

How Do I Keep My Current Policy?

To keep your current policy, please contact us.

As you think about your options, there are some things to keep in mind. If you choose to renew your current policy, it may NOT provide all of the protections of the Affordable Care Act. These include one or more of the following new protections of the Public Health Service Act (PHS Act) that were added by the health care law and took effect for coverage beginning in 2014. If you choose to renew your current policy, your coverage:

- May not meet standards for fair health insurance premiums, so you might be charged more based on factors such as gender or a pre-existing medical condition, and it might not comply with rules limiting the ability to charge older people more than younger people (PHS Act section 2701).
- May not meet standards for guaranteed availability, so it might exclude consumers based on factors such as a pre-existing medical condition (PHS Act section 2702).
- May not meet standards for guaranteed renewability (PHS Act section 2703).
- If the coverage is an individual market policy, may not meet standards related to preexisting medical conditions for adults, so it might exclude coverage for treatment of an adult's pre-existing medical condition such as diabetes or cancer (PHS Act section 2704).
- If the coverage is an individual market policy, may not meet standards related to discrimination based on health status (PHS Act section 2705).
- May not meet standards for non-discrimination with respect to health care providers (PHS Act section 2706).
- May not cover essential health benefits or limit annual out-of-pocket spending, so it might not cover benefits such as prescription drugs or maternity care, or might have unlimited cost sharing (PHS Act section 2707).
- May not meet standards for participation in clinical trials, so you might not have coverage for services related to a clinical trial for a life-threatening or other serious disease (PHS Act section 2709).

How Do I choose A Different Policy?

You have options for getting quality health insurance. [You may shop in the Health Insurance Marketplace, where all policies meet certain standards to help guarantee health care security, and no one who is qualified to purchase coverage through the Marketplace can be turned away or charged more because of a pre-existing medical condition. The Marketplace allows you to choose a private policy that fits your budget and health care needs. You may qualify for tax credits or other federal financial assistance to help you afford health insurance coverage purchased through the Marketplace.]*

[You can also get new health insurance outside the Marketplace.] All new policies guarantee certain protections, such as your ability to buy a policy even if you have a pre-existing medical condition. [However, federal financial assistance is not available outside the Marketplace.]

How Can I learn More?

To learn more about the Health Insurance Marketplace and protections under the health care law, visit HealthCare.gov or call 1-800-318-2596 or TTY: 1-855-889-4325.

If you have questions, please contact us.

*The bracketed language does not apply to the U.S. territories that do not have a Marketplace.

Prepared For: Sunshine Water Control
 Prepared by: AvMed
 Quote Request ID: 79502
 ZIP Code/County: 33431/PALMBEACH
 Renewal Date: 01/01/2023
 Rating Method: Member Level Rating
 Quote Prepared On: 10/25/2022

SUMMARY OF RENEWAL PLAN OPTIONS

Below you will find your current plan(s), renewing plan(s) and some alternate plan options for you to consider. The following pages contain benefit details and rates for each option.

Remember, no action is required if you wish to automatically renew on the renewing plan(s) listed below with updated benefits. Should you decide to select an Alternate Plan, please be sure to return the enclosed Renewal Change Form with your election.

Current Plan	Renewing Plan	Group #	Alternate Plan
HMO 5768	HMO 5768	AHQK	Elect P100-SG23 Elect G100-SG23 Elect G200-SG23 Elect G020-SG23 Elect S020-SG23 Elite Choice G100-SG23 Elite Choice S020-SG23

IMPORTANT NOTES:

- Please refer to our online provider directory at www.avmed.org for an updated listing of participating in-network providers and pharmacies.
- **MULTI OPTION GROUPS:** In order to renew with more than one benefit plan, your group must continue to meet Underwriting requirements. As a reminder, dual-option requires four or more enrolled employees and triple-option requires fifteen or more enrolled employees. Each plan offering must have at least one enrolled employee.



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 Quote Request ID: 79502
 ZIP Code/County: 33431/PALMBEACH
 Renewal Date: 01/01/2023
 Rating Method: Member Level Rating
 Quote Prepared On: 10/25/2022

Current Plan: HMO 5768

Plan Name	Elect P100-SG23
	Alternate Plan
Network	In Network
Calendar Year Deductibles (Pediatric Dental Deductible does not apply to the Medical Deductible)	Medical-\$1,000 IND / \$2,000 FAM; Pediatric Dental - \$60 per child
Out-of-Pocket Maximums (Includes Deductible on Medical plan only)	Medical-\$3,100 IND / \$6,200 FAM; Pediatric Dental - \$375 per child or \$750 for two or more children
Primary Care Physician (PCP) Cost Share	\$20 copay per visit
Specialist Cost Share	\$40 copay per visit
Virtual Visits Cost Share	\$0 copay per visit
Retail Clinic Cost Share	\$30 copay per visit
Urgent Care Cost Share at Independent Facility	\$100 copay per visit
Urgent Care Cost Share at hospital owned or affiliated facility	30% coinsurance after deductible
Emergency Room Cost Share	\$375 copay per visit
Outpatient Facility Surgery Cost Share at Independent Facility	\$350 copay per visit
Outpatient Facility Surgery Cost Share at hospital owned or affiliated facility	30% coinsurance after deductible
Outpatient Physician Surgery Cost Share	\$0 copay
Inpatient Hospital Cost Share	\$350 copay per day for the first 3 days per admission after deductible
Basic Imaging Tests Cost Share (X-ray, Ultrasound, etc.) at Independent Facility	\$25 copay per visit
Basic Imaging Tests Cost Share (X-ray, Ultrasound, etc.) at hospital-owned or affiliated facility	30% coinsurance after deductible
Complex Imaging Tests Cost Share (CT/PET scans, MRI's, etc.) at Independent Facility	\$200 copay per visit
Complex Imaging Tests Cost Share (CT/PET scans, MRI's, etc.) at hospital-owned or affiliated facility	30% coinsurance after deductible
Outpatient Routine Lab	\$20 copay per visit



Prepared For: Sunshine Water Control
 Prepared by: AvMed
 Quote Request ID: 79502
 ZIP Code/County: 33431/PALMBEACH
 Renewal Date: 01/01/2023
 Rating Method: Member Level Rating
 Quote Prepared On: 10/25/2022

Plan Name	Elect P100-SG23
	Alternate Plan
Network	In Network
Rx Tier 1 - Value Generic	\$3 copay per prescription
Rx Tier 2 - Generic	\$9 copay per prescription
Rx Tier 3 - Preferred Brand	\$20 copay per prescription
Rx Tier 4 - Non-Preferred	\$50 copay per prescription
Rx Tier 5 - Specialty	50% coinsurance after deductible

*AD After deductible

Rating Method = Member Level Rating

For specific plan details, please refer to the Summary of Benefits and Coverage (SBC) of each plan design at www.avmed.org . For questions, please contact your independent agent or AvMed at 1-800-835-6131.



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 ZIP Code/County: 33431/PALMBEACH
 Renewal Date: 01/01/2023
 Rating Method: Member Level Rating
 Quote Prepared On: 10/25/2022

Quote Census

				Elect P100-SG23	
Employee Name	Employee Class	Date of Birth	# of Dependents	Subscriber Rate	Total Rate
CHRIS HOFFMAN	Active	6/1/1980	6	\$801.46	\$3,090.91
CORY SELCHAN	Active	5/18/1961	1	\$1,699.70	\$3,341.33
VINCENT MODICA	Active	10/24/1980	1	\$801.46	\$1,406.33
JASON GARCIA	Active	4/28/1983	4	\$763.35	\$2,946.34
LUIS VAZQUEZ	Active	6/5/1980	4	\$801.46	\$2,933.65
DANNY MONROY	Active	1/31/1980	3	\$801.46	\$2,579.79
MICHAEL SMILOVIC	Active	3/30/1980	0	\$801.46	\$801.46
Total Monthly Premium				\$17,099.81	



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 Prepared by: AvMed
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 ZIP Code/County: 33431/PALMBEACH
 Renewal Date: 01/01/2023
 Rating Method: Member Level Rating
 Quote Prepared On: 10/25/2022

Current Plan: HMO 5768

Plan Name	Elect G100-SG23	Elect G200-SG23
	Alternate Plan	Alternate Plan
Network	In Network	In Network
Calendar Year Deductibles (Pediatric Dental Deductible does not apply to the Medical Deductible)	Medical-\$1,500 IND / \$3,000 FAM; Pediatric Dental - \$60 per child	Medical-\$2,000 IND / \$4,000 FAM; Pediatric Dental - \$60 per child
Out-of-Pocket Maximums (Includes Deductible on Medical plan only)	Medical-\$6,650 IND / \$13,300 FAM; Pediatric Dental - \$375 per child or \$750 for two or more children	Medical-\$6,500 IND / \$13,000 FAM; Pediatric Dental - \$375 per child or \$750 for two or more children
Primary Care Physician (PCP) Cost Share	\$30 copay per visit	\$30 copay per visit
Specialist Cost Share	\$60 copay per visit	\$60 copay per visit
Virtual Visits Cost Share	\$0 copay per visit	\$0 copay per visit
Retail Clinic Cost Share	\$40 copay per visit	\$40 copay per visit
Urgent Care Cost Share at Independent Facility	\$100 copay per visit	\$100 copay per visit
Urgent Care Cost Share at hospital owned or affiliated facility	30% coinsurance after deductible	30% coinsurance after deductible
Emergency Room Cost Share	\$500 copay per visit	\$500 copay per visit
Outpatient Facility Surgery Cost Share at Independent Facility	\$500 copay per visit	\$600 copay per visit
Outpatient Facility Surgery Cost Share at hospital owned or affiliated facility	30% coinsurance after deductible	30% coinsurance after deductible
Outpatient Physician Surgery Cost Share	\$0 copay	\$0 copay
Inpatient Hospital Cost Share	\$500 copay per day for the first 3 days per admission after deductible	\$750 copay per day for the first 3 days per admission after deductible
Basic Imaging Tests Cost Share (X-ray, Ultrasound, etc.) at Independent Facility	\$50 copay per visit	\$100 copay per visit
Basic Imaging Tests Cost Share (X-ray, Ultrasound, etc.) at hospital-owned or affiliated facility	30% coinsurance after deductible	30% coinsurance after deductible
Complex Imaging Tests Cost Share (CT/PET scans, MRI's, etc.) at Independent Facility	\$300 copay per visit	\$350 copay per visit
Complex Imaging Tests Cost Share (CT/PET scans, MRI's, etc.) at hospital-owned or affiliated facility	30% coinsurance after deductible	30% coinsurance after deductible
Outpatient Routine Lab	\$30 copay per visit	\$30 copay per visit



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Plan Name	Elect G100-SG23	Elect G200-SG23
	Alternate Plan	Alternate Plan
Network	In Network	In Network
Rx Tier 1 - Value Generic	\$10 copay per prescription	\$10 copay per prescription
Rx Tier 2 - Generic	\$15 copay per prescription	\$15 copay per prescription
Rx Tier 3 - Preferred Brand	\$40 copay per prescription	\$40 copay per prescription
Rx Tier 4 - Non-Preferred	\$75 copay per prescription	\$75 copay per prescription
Rx Tier 5 - Specialty	50% coinsurance after deductible	50% coinsurance after deductible

*AD After deductible

Rating Method = Member Level Rating

For specific plan details, please refer to the Summary of Benefits and Coverage (SBC) of each plan design at www.avmed.org . For questions, please contact your independent agent or AvMed at 1-800-835-6131.

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 Prepared by: AvMed
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 Renewal Date: 01/01/2023
 Rating Method: Member Level Rating
 Quote Prepared On: 10/25/2022

Quote Census

				Elect G100-SG23		Elect G200-SG23	
Employee Name	Employee Class	Date of Birth	# of Dependents	Subscriber Rate	Total Rate	Subscriber Rate	Total Rate
CHRIS HOFFMAN	Active	6/1/1980	6	\$689.03	\$2,657.32	\$671.52	\$2,589.80
CORY SELCHAN	Active	5/18/1961	1	\$1,461.26	\$2,872.60	\$1,424.13	\$2,799.61
VINCENT MODICA	Active	10/24/1980	1	\$689.03	\$1,209.05	\$671.52	\$1,178.33
JASON GARCIA	Active	4/28/1983	4	\$656.27	\$2,533.04	\$639.59	\$2,468.66
LUIS VAZQUEZ	Active	6/5/1980	4	\$689.03	\$2,522.12	\$671.52	\$2,458.02
DANNY MONROY	Active	1/31/1980	3	\$689.03	\$2,217.90	\$671.52	\$2,161.54
MICHAEL SMILOVIC	Active	3/30/1980	0	\$689.03	\$689.03	\$671.52	\$671.52
Total Monthly Premium				\$14,701.06		\$14,327.48	



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 Rating Method: Member Level Rating
 Quote Prepared On: 10/25/2022

Current Plan: HMO 5768

Plan Name	Elect G020-SG23	Elect S020-SG23
	Alternate Plan	Alternate Plan
Network	In Network	In Network
Calendar Year Deductibles (Pediatric Dental Deductible does not apply to the Medical Deductible)	Medical-\$0 IND / \$0 FAM; Pediatric Dental - \$60 per child	Medical-\$0 IND / \$0 FAM; Pediatric Dental - \$60 per child
Out-of-Pocket Maximums (Includes Deductible on Medical plan only)	Medical-\$6,000 IND / \$12,000 FAM; Pediatric Dental - \$375 per child or \$750 for two or more children	Medical-\$8,000 IND / \$16,000 FAM; Pediatric Dental - \$375 per child or \$750 for two or more children
Primary Care Physician (PCP) Cost Share	\$30 copay per visit	\$40 copay per visit
Specialist Cost Share	\$60 copay per visit	\$80 copay per visit
Virtual Visits Cost Share	\$0 copay per visit	\$0 copay per visit
Retail Clinic Cost Share	\$40 copay per visit	\$50 copay per visit
Urgent Care Cost Share at Independent Facility	\$100 copay per visit	\$125 copay per visit
Urgent Care Cost Share at hospital owned or affiliated facility	\$250 copay per visit	\$250 copay per visit
Emergency Room Cost Share	\$500 copay per visit	\$1,000 copay per visit
Outpatient Facility Surgery Cost Share at Independent Facility	\$1,000 copay per visit	\$1,500 copay per visit
Outpatient Facility Surgery Cost Share at hospital owned or affiliated facility	\$2,000 copay per visit	\$3,000 copay per visit
Outpatient Physician Surgery Cost Share	\$0 copay	\$50 copay
Inpatient Hospital Cost Share	\$1,500 copay per admission	\$2,000 copay per admission
Basic Imaging Tests Cost Share (X-ray, Ultrasound, etc.) at Independent Facility	\$50 copay per visit	\$150 copay per visit
Basic Imaging Tests Cost Share (X-ray, Ultrasound, etc.) at hospital-owned or affiliated facility	\$100 copay per visit	\$300 copay per visit
Complex Imaging Tests Cost Share (CT/PET scans, MRI's, etc.) at Independent Facility	\$400 copay per visit	\$750 copay per visit
Complex Imaging Tests Cost Share (CT/PET scans, MRI's, etc.) at hospital-owned or affiliated facility	\$800 copay per visit	\$1,500 copay per visit
Outpatient Routine Lab	\$30 copay per visit	\$40 copay per visit



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Plan Name	Elect G020-SG23	Elect S020-SG23
	Alternate Plan	Alternate Plan
Network	In Network	In Network
Rx Tier 1 - Value Generic	\$10 copay per prescription	\$25 copay per prescription
Rx Tier 2 - Generic	\$15 copay per prescription	\$45 copay per prescription
Rx Tier 3 - Preferred Brand	\$40 copay per prescription	\$100 copay per prescription
Rx Tier 4 - Non-Preferred	\$75 copay per prescription	50% coinsurance
Rx Tier 5 - Specialty	50% coinsurance	50% coinsurance

*AD After deductible

Rating Method = Member Level Rating

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Quote Census

				Elect G020-SG23		Elect S020-SG23	
Employee Name	Employee Class	Date of Birth	# of Dependents	Subscriber Rate	Total Rate	Subscriber Rate	Total Rate
CHRIS HOFFMAN	Active	6/1/1980	6	\$678.15	\$2,615.35	\$604.19	\$2,330.11
CORY SELCHAN	Active	5/18/1961	1	\$1,438.19	\$2,827.24	\$1,281.34	\$2,518.90
VINCENT MODICA	Active	10/24/1980	1	\$678.15	\$1,189.96	\$604.19	\$1,060.18
JASON GARCIA	Active	4/28/1983	4	\$645.91	\$2,493.05	\$575.46	\$2,221.13
LUIS VAZQUEZ	Active	6/5/1980	4	\$678.15	\$2,482.30	\$604.19	\$2,211.55
DANNY MONROY	Active	1/31/1980	3	\$678.15	\$2,182.88	\$604.19	\$1,944.80
MICHAEL SMILOVIC	Active	3/30/1980	0	\$678.15	\$678.15	\$604.19	\$604.19
Total Monthly Premium				\$14,468.93		\$12,890.86	



Prepared For: Sunshine Water Control
 Prepared by: AvMed
 Quote Request ID: 79502
 ZIP Code/County: 33431/PALMBEACH
 Renewal Date: 01/01/2023
 Rating Method: Member Level Rating
 Quote Prepared On: 10/25/2022

Current Plan: HMO 5768

Plan Name	Elite Choice G100-SG23			Elite Choice S020-SG23		
	Alternate Plan			Alternate Plan		
Network	In Network	PHCS	Out of Network	In Network	PHCS	Out of Network
Calendar Year Deductibles (Pediatric Dental Deductible does not apply to the Medical Deductible)	Medical- \$1,500 IND / \$3,000 FAM; Pediatric Dental - \$60 per child	\$3,000/\$6,000 0	\$4,500/\$9,000 0	Medical-\$0 IND / \$0 FAM; Pediatric Dental - \$60 per child	\$2,000/\$4,000 0	\$4,000/\$8,000 0
Out-of-Pocket Maximums (Includes Deductible on Medical plan only)	Medical- \$6,650 IND / \$13,300 FAM; Pediatric Dental - \$375 per child or \$750 for two or more children	\$13,300/\$26,600	\$19,950/\$39,900	Medical- \$8,000 IND / \$16,000 FAM; Pediatric Dental - \$375 per child or \$750 for two or more children	\$16,000/\$32,000	\$24,000/\$48,000
Primary Care Physician (PCP) Cost Share	\$30 copay per visit	\$40 copay per visit	50% coinsurance after deductible	\$40 copay per visit	\$50 copay per visit	50% coinsurance after deductible
Specialist Cost Share	\$60 copay per visit	\$80 copay per visit	50% coinsurance after deductible	\$80 copay per visit	\$100 copay per visit	50% coinsurance after deductible
Virtual Visits Cost Share	\$0 copay per visit	Not covered	Not covered	\$0 copay per visit	Not covered	Not covered
Retail Clinic Cost Share	\$40 copay per visit	\$50 copay per visit	\$40 copay per visit after deductible	\$50 copay per visit	\$60 copay per visit	\$50 copay per visit after deductible
Urgent Care Cost Share at Independent Facility	\$100 copay per visit	\$100 copay per visit	\$100 copay per visit after deductible	\$125 copay per visit	\$125 copay per visit	\$125 copay per visit
Urgent Care Cost Share at hospital owned or affiliated facility	30% coinsurance after deductible	30% coinsurance after deductible	50% coinsurance after deductible	\$250 copay per visit	\$250 copay per visit	50% coinsurance
Emergency Room Cost Share	\$500 copay per visit	\$500 copay per visit	\$500 copay per visit	\$1,000 copay per visit	\$1,000 copay per visit	\$1,000 copay per visit



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Plan Name	Elite Choice G100-SG23			Elite Choice S020-SG23		
	Alternate Plan			Alternate Plan		
Network	In Network	PHCS	Out of Network	In Network	PHCS	Out of Network
Outpatient Facility Surgery Cost Share at Independent Facility	\$500 copay per visit	\$500 copay per visit after deductible	50% coinsurance after deductible	\$1,500 copay per visit	\$1,500 copay per visit after deductible	50% coinsurance after deductible
Outpatient Facility Surgery Cost Share at hospital owned or affiliated facility	30% coinsurance after deductible	30% coinsurance after deductible	50% coinsurance after deductible	\$3,000 copay per visit	\$3,000 copay per visit after deductible	50% coinsurance after deductible
Outpatient Physician Surgery Cost Share	\$0 copay	\$0 copay after deductible	50% coinsurance after deductible	\$50 copay	\$0 copay after deductible	50% coinsurance after deductible
Inpatient Hospital Cost Share	\$500 copay per day for the first 3 days per admission after deductible	\$500 copay per day for the first 3 days per admission after deductible	50% coinsurance after deductible	\$2,000 copay per admission	\$2,000 copay per admission after deductible	50% coinsurance after deductible
Basic Imaging Tests Cost Share (X-ray, Ultrasound, etc.) at Independent Facility	\$50 copay per visit	\$50 copay per visit after deductible	50% coinsurance after deductible	\$150 copay per visit	\$150 copay per visit after deductible	50% coinsurance after deductible
Basic Imaging Tests Cost Share (X-ray, Ultrasound, etc.) at hospital-owned or affiliated facility	30% coinsurance after deductible	30% coinsurance after deductible	50% coinsurance after deductible	\$300 copay per visit	\$300 copay per visit after deductible	50% coinsurance after deductible
Complex Imaging Tests Cost Share (CT/PET scans, MRI's, etc.) at Independent Facility	\$300 copay per visit	\$300 copay per visit after deductible	50% coinsurance after deductible	\$750 copay per visit	\$750 copay per visit after deductible	50% coinsurance after deductible
Complex Imaging Tests Cost Share (CT/PET scans, MRI's, etc.) at hospital-owned or affiliated facility	30% coinsurance after deductible	30% coinsurance after deductible	50% coinsurance after deductible	\$1,500 copay per visit	\$1,500 copay per visit after deductible	50% coinsurance after deductible
Outpatient Routine Lab	\$30 copay per visit	\$40 copay per visit	50% coinsurance after deductible	\$40 copay per visit	\$50 copay per visit	50% coinsurance after deductible



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Plan Name	Elite Choice G100-SG23			Elite Choice S020-SG23		
	Alternate Plan			Alternate Plan		
Network	In Network	PHCS	Out of Network	In Network	PHCS	Out of Network
Rx Tier 1 - Value Generic	\$10 copay per prescription	Not Covered	Not Covered	\$25 copay per prescription	Not Covered	Not Covered
Rx Tier 2 - Generic	\$15 copay per prescription	Not Covered	Not Covered	\$45 copay per prescription	Not Covered	Not Covered
Rx Tier 3 - Preferred Brand	\$40 copay per prescription	Not Covered	Not Covered	\$100 copay per prescription	Not Covered	Not Covered
Rx Tier 4 - Non-Preferred	\$75 copay per prescription	Not Covered	Not Covered	50% coinsurance	Not Covered	Not Covered
Rx Tier 5 - Specialty	50% coinsurance after deductible	Not Covered	Not Covered	50% coinsurance	Not Covered	Not Covered

*AD After deductible

Rating Method = Member Level Rating

For specific plan details, please refer to the Summary of Benefits and Coverage (SBC) of each plan design at www.avmed.org . For questions, please contact your independent agent or AvMed at 1-800-835-6131.



Prepared For: Sunshine Water Control
 Prepared by: AvMed
 Quote Request ID: 79502
 ZIP Code/County: 33431/PALMBEACH
 Renewal Date: 01/01/2023
 Rating Method: Member Level Rating
 Quote Prepared On: 10/25/2022

Quote Census

				Elite Choice G100-SG23		Elite Choice S020-SG23	
Employee Name	Employee Class	Date of Birth	# of Dependents	Subscriber Rate	Total Rate	Subscriber Rate	Total Rate
CHRIS HOFFMAN	Active	6/1/1980	6	\$760.51	\$2,933.00	\$660.54	\$2,547.44
CORY SELCHAN	Active	5/18/1961	1	\$1,612.86	\$3,170.62	\$1,400.84	\$2,753.83
VINCENT MODICA	Active	10/24/1980	1	\$760.51	\$1,334.48	\$660.54	\$1,159.06
JASON GARCIA	Active	4/28/1983	4	\$724.35	\$2,795.82	\$629.13	\$2,428.30
LUIS VAZQUEZ	Active	6/5/1980	4	\$760.51	\$2,783.77	\$660.54	\$2,417.83
DANNY MONROY	Active	1/31/1980	3	\$760.51	\$2,447.99	\$660.54	\$2,126.19
MICHAEL SMILOVIC	Active	3/30/1980	0	\$760.51	\$760.51	\$660.54	\$660.54
Total Monthly Premium				\$16,226.19		\$14,093.19	

Prepared For: Sunshine Water Control

Prepared by: AvMed

Quote Request ID: 79502

ZIP Code/County: 33431/PALMBEACH

Renewal Date: 01/01/2023

Rating Method: Member Level Rating

Quote Prepared On: 10/25/2022

Age Rate Matrix

Plan Name	Elect P100-SG23	Elect G100-SG23	Elect G200-SG23	Elect G020-SG23	Elect S020-SG23	Elite Choice G100-SG23
Age Group	Rate Value	Rate Value	Rate Value	Rate Value	Rate Value	Rate Value
0-14	\$462.73	\$397.82	\$387.71	\$391.54	\$348.83	\$439.09
15	\$503.86	\$433.18	\$422.17	\$426.34	\$379.84	\$478.12
16	\$519.59	\$446.70	\$435.35	\$439.65	\$391.70	\$493.04
17	\$535.31	\$460.22	\$448.53	\$452.95	\$403.55	\$507.97
18	\$552.25	\$474.78	\$462.72	\$467.28	\$416.32	\$524.04
19	\$569.19	\$489.34	\$476.91	\$481.61	\$429.09	\$540.11
20	\$586.73	\$504.42	\$491.60	\$496.46	\$442.31	\$556.75
21	\$604.87	\$520.02	\$506.81	\$511.81	\$455.99	\$573.97
22	\$604.87	\$520.02	\$506.81	\$511.81	\$455.99	\$573.97
23	\$604.87	\$520.02	\$506.81	\$511.81	\$455.99	\$573.97
24	\$604.87	\$520.02	\$506.81	\$511.81	\$455.99	\$573.97
25	\$607.29	\$522.10	\$508.84	\$513.86	\$457.82	\$576.27
26	\$619.39	\$532.50	\$518.97	\$524.09	\$466.94	\$587.75
27	\$633.91	\$544.98	\$531.14	\$536.38	\$477.88	\$601.52
28	\$657.50	\$565.26	\$550.90	\$556.34	\$495.66	\$623.91
29	\$676.85	\$581.90	\$567.12	\$572.72	\$510.26	\$642.28
30	\$686.53	\$590.22	\$575.23	\$580.91	\$517.55	\$651.46
31	\$701.05	\$602.70	\$587.39	\$593.19	\$528.50	\$665.23
32	\$715.57	\$615.19	\$599.55	\$605.47	\$539.44	\$679.01
33	\$724.64	\$622.99	\$607.16	\$613.15	\$546.28	\$687.62
34	\$734.32	\$631.31	\$615.27	\$621.34	\$553.57	\$696.80
35	\$739.16	\$635.47	\$619.32	\$625.43	\$557.22	\$701.39
36	\$744.00	\$639.63	\$623.37	\$629.53	\$560.87	\$705.99

Plan Name	Elect P100-SG23	Elect G100-SG23	Elect G200-SG23	Elect G020-SG23	Elect S020-SG23	Elite Choice G100-SG23
Age Group	Rate Value	Rate Value	Rate Value	Rate Value	Rate Value	Rate Value
37	\$748.83	\$643.79	\$627.43	\$633.62	\$564.52	\$710.58
38	\$753.67	\$647.95	\$631.48	\$637.72	\$568.17	\$715.17
39	\$763.35	\$656.27	\$639.59	\$645.91	\$575.46	\$724.35
	\$773.03	\$664.59	\$647.70	\$654.09	\$582.76	\$733.54
41	\$787.55	\$677.07	\$659.87	\$666.38	\$593.70	\$747.31
42	\$801.46	\$689.03	\$671.52	\$678.15	\$604.19	\$760.51
43	\$820.81	\$705.67	\$687.74	\$694.53	\$618.78	\$778.88
44	\$845.01	\$726.47	\$708.01	\$715.00	\$637.02	\$801.84
	\$873.44	\$750.91	\$731.83	\$739.05	\$658.45	\$828.82
46	\$907.31	\$780.03	\$760.21	\$767.72	\$683.99	\$860.96
47	\$945.42	\$812.79	\$792.14	\$799.96	\$712.72	\$897.12
48	\$988.97	\$850.23	\$828.63	\$836.81	\$745.55	\$938.45
49	\$1,031.92	\$887.16	\$864.62	\$873.15	\$777.92	\$979.20
	\$1,080.31	\$928.76	\$905.16	\$914.09	\$814.40	\$1,025.12
51	\$1,128.09	\$969.84	\$945.20	\$954.53	\$850.43	\$1,070.46
52	\$1,180.72	\$1,015.08	\$989.29	\$999.05	\$890.10	\$1,120.40
53	\$1,233.94	\$1,060.84	\$1,033.89	\$1,044.09	\$930.22	\$1,170.90
54	\$1,291.41	\$1,110.25	\$1,082.04	\$1,092.72	\$973.54	\$1,225.43
	\$1,348.87	\$1,159.65	\$1,130.18	\$1,141.34	\$1,016.86	\$1,279.96
56	\$1,411.17	\$1,213.21	\$1,182.39	\$1,194.05	\$1,063.83	\$1,339.08
57	\$1,474.08	\$1,267.29	\$1,235.09	\$1,247.28	\$1,111.25	\$1,398.77
58	\$1,541.22	\$1,325.01	\$1,291.35	\$1,304.09	\$1,161.87	\$1,462.48
59	\$1,574.49	\$1,353.62	\$1,319.22	\$1,332.24	\$1,186.95	\$1,494.05
	\$1,641.63	\$1,411.34	\$1,375.48	\$1,389.05	\$1,237.56	\$1,557.76
61	\$1,699.70	\$1,461.26	\$1,424.13	\$1,438.19	\$1,281.34	\$1,612.86
62	\$1,737.80	\$1,494.02	\$1,456.06	\$1,470.43	\$1,310.07	\$1,649.02
63	\$1,785.59	\$1,535.10	\$1,496.10	\$1,510.87	\$1,346.09	\$1,694.37
64 +	\$1,814.61	\$1,560.06	\$1,520.43	\$1,535.43	\$1,367.97	\$1,721.91

Prepared For: Sunshine Water Control
Prepared by: AvMed
Quote Request ID: 79502
ZIP Code/County: 33431/PALMBEACH
Renewal Date: 01/01/2023
Rating Method: Member Level Rating
Quote Prepared On: 10/25/2022

Age Rate Matrix

Plan Name	Elite Choice S020-SG23
Age Group	Rate Value
0-14	\$381.37
15	\$415.27
16	\$428.23
17	\$441.19
18	\$455.15
19	\$469.11
20	\$483.57
21	\$498.52
22	\$498.52
23	\$498.52
24	\$498.52
25	\$500.51
26	\$510.49
27	\$522.45
28	\$541.89
29	\$557.84
30	\$565.82
31	\$577.79
32	\$589.75
33	\$597.23
34	\$605.20
35	\$609.19
36	\$613.18

Plan Name	Elite Choice S020-SG23
Age Group	Rate Value
	\$617.17
	\$621.16
	\$629.13
	\$637.11
	\$649.07
	\$660.54
	\$676.49
	\$696.43
	\$719.86
	\$747.78
	\$779.19
	\$815.08
	\$850.48
	\$890.36
	\$929.74
	\$973.11
	\$1,016.98
	\$1,064.34
	\$1,111.70
	\$1,163.05
	\$1,214.90
	\$1,270.23
	\$1,297.65
	\$1,352.99
	\$1,400.84
	\$1,432.25
	\$1,471.63
+	\$1,495.56

Underwriting Assumptions & Caveats

- To be eligible for these rates and benefits all employers must: 1) have its principal place of business in AvMed's ServiceArea, 2) have employed an average of at least 2, but not more than 50 employees on business days during the preceding calendar year and 3) employ at least 2 employees on the first day of the plan year. For details on AvMed's service area, visit www.avmed.org.
NOTE: Flex, Elect, Elite and Elite Choice products may be available only in select counties within our service area. Please contact your service representative for details.
- These rates are valid for total replacement coverage and include a standard commission schedule. ACA Composite rates require 10 or more Subscribers (excluding Cobra qualified beneficiaries) to enroll; otherwise, Per-Member rates will be issued.
- Eligible employers must have, and be willing to prove, the existence of an employer/employee relationship. Companies that consist of only a sole owner, or a sole owner and his/her non-working spouse or non-working dependent children, do not meet the definition of employer or employee under ERISA, and are therefore ineligible for group coverage.
- Eligible employees are those employees that are permanent and work on a full-time basis with a normal workweek of at least 25 hours, that live or work in AvMed's Service Area, and that have met any authorized waiting period requirements. Part-time, temporary or substitute employees are not eligible for coverage under this plan. Coverage must be extended to all employees meeting the underlying conditions. Management carve-outs are not permitted.
- The employer must contribute a minimum of 50% toward the single premium rate.
- If the employer pays 100% of the single premium rate, 100% of all eligible employees must have coverage through AvMed or through qualifying existing coverage. Otherwise, at least 70% of all eligible employees (less those with qualifying other coverage) must enroll in an AvMed product offering. Qualifying other coverage is defined as: Coverage through a spouse's employer-based group insurance plan or an ERISA qualified self-insurance plan, Medicare, Medicaid, Individual coverage, CHAMPUS, CHAMPVA, or Tricare.
- Groups that are not able to meet the minimum participation or employer contribution requirement may apply for coverage during an annual enrollment period from November 15 through December 15 of the preceding year for a January 1 Effective Date.
- 1099 eligibility will be limited to those groups where the number of 1099 eligible employees does not exceed 25% of the total eligible population (i.e. W-2 and 1099 combined).
- COBRA qualified beneficiaries are not included when determining group size, group participation, or if the group meets the minimum size requirements for ACA Composite rating.
- This proposal assumes a waiting period of no longer than the first of the month following 60 days from date of hire. In addition, the group's waiting period must be applied uniformly to all employees.
- Final rates and benefits are guaranteed for 12 months from the proposed effective date. However, AvMed reserves the right to adjust (re-rate) the Premium Rates during the Contract Year to account for material changes in group size or in the data supplied by the Subscribing Group to AvMed.
- Additional documentation may be required to verify compliance with AvMed's underwriting requirements.
- Current group coverage should not be cancelled until written confirmation of acceptance of coverage by AvMed is received.
- Renewal rates will be provided to the Subscribing Group, or their appointed representative, at least 30 days in advance of the Subscribing Group's anniversary date, unless there is a reduction in benefits. In instances where there is an increase in a copayment, deletion, amendment, or limitation of any of the Subscribing Group's contracted benefits, at least a 45 day advance notice will be provided. This notification requirement does not apply in instances where an increase in benefits occurs. Additionally, the 45-day notice requirement shall not apply if benefits are amended, deleted, or limited at the request of the contract holder. The Subscribing Group will in turn notify the individual members of the group, and AvMed will be deemed to have complied with its notification requirements by providing such notice to the Subscribing Group, or their appointed representative.
- AvMed has made every effort to ensure the accuracy of the information provided, but given the continuous improvements and ongoing development of our products and services, no warranty is made that the information provided is error-free. In addition, the information provided is limited in nature and may not contain all applicable terms, conditions, limitations, or exclusions of the products and services referenced.
- Multi-Option Guidelines:
 - Multi-Option Coverage is only available on an exclusive, total-replacement basis.
 - All plan option offerings must be made available to ALL eligible employees.
 - At least one "Active" employee must enroll in each plan offering (plans with COBRA-only enrollment are prohibited), and at least one Subscriber must be maintained in each plan in order for the group to renew under a multi-option offering.
 - Dual-Option is only available to groups with four or more enrolled Active employees.
 - Triple-Option is only available to groups with fifteen or more enrolled Active employees.

Renewal Change Form



Group Name: Sunshine Water Control

Account No: AHQK

Renewal Date: 01/01/2023

I would like to make the following changes to my AvMed Small Group Benefit Plan(s) for the upcoming year:

(Please enter all the selected plan numbers below.)

Plan Type _____ **Plan Number** _____

Plan Type _____ **Plan Number** _____

Plan Type _____ **Plan Number** _____

Group Demographic Changes (check all options applicable below and provide details in the space below):

Group Name Group FEIN Group/Subgroup Address Contact Name/Info Other:

Other Group Changes:

Waiting Period (Check One): First of the month following Date of Hire 30 days 60 days

Anticipated Employer Contribution: % _____ or \$ _____

H.S.A. Administration (For HSAQ Plans Only.): Enroll with Health Equity Dis-Enroll with Health Equity

Please complete the following information so we may confirm your eligibility and sign below **(REQUIRED)**:

1. Did the group employ an average of at least one but not more than 50 employees on business days during the preceding calendar year, and employ at least one employee on the first day of the plan year? Yes No
2. Medicare Payor: In either the preceding or current calendar year, did the group employ 20 or more full-time and/or part-time employees during 20 or more calendar weeks? Yes No
3. COBRA: Did the group, on at least 50% of its working days in the preceding year, employ 20 or more employees including full time, part time and/or seasonal? Yes No
4. Does the group offer health care benefits to any retirees? Yes No
5. Employee Census Details:

A.	Total employees on current RT-6 or payroll:	
B.	Other employees not on RT-6 or payroll (1099, Owners, etc.):	
C.	Total Active employees:	(C = A + B)
D.	Ineligible - Part-time:	
E.	Ineligible - In waiting period:	
F.	Ineligible - Out of Area:	
G.	Other ineligible employees not on RT-6 or payroll (COBRA, Work Visa, etc.):	
H.	Total eligible employees:	(H = C-Sum(D+ E + F + G))
I.	Waiving with other coverage:	
J.	Waiving without other coverage:	
K.	Total enrolling employees:	

I understand that any misrepresentation, omission, concealment of fact or incorrect statement may prevent recovery under the contract if: 1) the misrepresentation, omission, concealment or statement is fraudulent or is material either to the acceptance of the risk or to the hazard assumed by AvMed; or 2) if the true facts had been known to AvMed pursuant to a policy requirement or other requirement, AvMed in good faith would not have issued the policy or contract, would not have issued it at the same premium rate, would not have issued a policy or contract in as large an amount, or would not have provided coverage with respect to the hazard resulting in the loss.

Signature: _____ Date: _____

(Print Name of Group Benefit Contact/Owner/Officer)

Please return the completed and signed form to Small Group Support at **1-305-671-0154** or email to **smallgrouprenewals@avmed.org**. Please note that a Change Form cannot be accepted after the renewal date.

Questions? Call us at 1-800-835-6131. Thank you for your business!

**SUNSHINE
WATER CONTROL DISTRICT**

5C

From: Patty Villaran <Patty_Villaran@ajg.com>

Sent: Wednesday, November 23, 2022 8:36 AM

To: Cindy Cerbone <cerbonec@whhassociates.com>; Jamie Sanchez <sanchezj@whhassociates.com>; Lucy Marte <martel@whhassociates.com>

Subject: SWCD 2023 Renewal Analysis

Hello Ladies – I hope this email finds you doing well. We have received SWCD renewal offers from AvMed and Ameritas. As you know, the life and disability plans with Sun Life and Reliance Standard have table rates based on age and those do not change.

We do not have quotes from the market yet as the census was received just recently. We will share those with you as soon as we get them.

Please see below regarding SWCD renewals effective (insert date), 2023.

Important Notice Regarding Product Changes

All medical insurance carriers are required to offer ACA compliant health plans. Each year the carrier will review and if needed change their respective product portfolio to ensure all plans meet the appropriate Actuarial Value (Platinum, Gold, Silver, and Bronze) metal levels.

Renewal At-A-Glance

We have reviewed our copy of your upcoming renewal(s). Below is a brief summary of the renewal action.

AvMed Medical Plan

- HM-OA-5768 Plan
 - No High-Level Benefit Changes:
 - Note the footnote on the medical exhibit page regarding enrollment tiers for C. Selchan and V. Modica
 - Rate change: 9.01%
 - Premium change: \$20,627.76 annually

Please reach out to us and we will walk you through the renewal and the alternate plans provided.

Ameritas Dental Plan

- DPPO Plan
 - Plan changes: None
 - Rate change: 0.0%
 - Premium change: \$0

Enrollment Tier	Enrollment	Current Rate	Renewal Rate
Employee Only	1	\$47.92	\$47.92
Employee & Spouse	1	\$95.00	\$95.00
Employee & Child(ren)	1	\$114.20	\$114.20
Employee & Family	4	\$161.28	\$161.28

Ameritas Vision Plan

- VSP Choice Plan
 - Plan changes: None
 - Rate change: 0.0%
 - Premium change: \$0

Enrollment Tier	Enrollment	Current Rate	Renewal Rate
Employee Only	1	\$9.48	\$9.48
Employee & Spouse	1	\$20.52	\$20.52
Employee & Child(ren)	1	\$16.56	\$16.56
Employee & Family	4	\$27.60	\$27.60

Basic Life, AD&D and Disability

- Plans are age rated. The monthly premium increases as the employee jumps to the next age bracket.

Next Steps

Review Your Renewal:

- **Please** read your entire renewal document
- **Please** complete any carrier requests for information that are included in your renewal package

Alternate Proposals:

Renewing without changes:

- **Please** contact us if you would like to see alternate proposals
- Sign and return your renewal documents via e-mail as soon as possible to ensure timely processing

Renewing with changes:

- **Generally the 8th of the month prior to the renewal date** is the deadline for making changes to your policy

Open Enrollment:

- Policy anniversary is the only time of the plan year that employees can make changes to their enrollment elections unless you have a qualifying life event that may allow a mid-year change

Compliance:

- You are required by Federal Law to provide to your employees:
 - A Summary of Benefits and Coverage (SBC). Carrier instructions for obtaining a copy of this document are included in your renewal package. We provide you a copy as well once the renewal process is completed
 - HIPAA and ACA annual notices. Commonly referred to as Federal Notices. We will help you with these notices once your renewal process is completed

Thank you for your business. We look forward to our continued relationship.

Carrier Solvency Policy Disclaimer

While GBS does not guarantee the financial viability of any health insurance carrier or market, it is an area we recommend that clients closely scrutinize when selecting a health insurance carrier. There are a number of rating agencies that can be referred to including, A.M. Best, Fitch, Moody's, Standard & Poor's, and Weiss Ratings (TheStreet.com). Generally, agencies that provide ratings of Health Insurers, including traditional insurance companies and other managed care organizations, reflect their opinion based on a comprehensive quantitative and qualitative evaluation of a company's financial strength, operating performance and market profile. However, these ratings are not a warranty of an insurer's current or future ability to meet its contractual obligations.

Renewal/Financial Disclaimer

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Coverage

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Regards,

Patty Villaran

Area Vice President, Small Business Benefits & HR Consulting



Insurance | Risk Management | Consulting

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2023 Renewal and Marketing Analysis

Sunshine Water Control District

Presented By:

Patty Villaran

+1 561 801 7040

Patty_Villaran@ajg.com

Saturday, November 19, 2022



Insurance | Risk Management | Consulting

Gallagher Benefit Services, Inc.

IMPORTANT: This proposal (analyses, report, etc.) is an outline of the coverages proposed by the carrier(s) based upon the information provided by your company. It does not include all the terms, coverages, exclusions, limitations, and conditions of the actual contract language. See the policies and contracts for actual language. This proposal (analyses, report, etc.) is not a contract and offers no contractual obligation on behalf of Gallagher. This analysis is for illustrative purposes only, and is not a proposal for coverage or a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health care costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. See your policy or contact us for specific information or further details in this regard.

2023 Renewal and Marketing Analysis

Sunshine Water Control District

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**Sunshine Water Control District
Renewal Summary | 2023 Plan Year**



Coverage	Carrier	Renewal Date	Rate Action
Medical	AvMed Health Plans	1/1/2023	9.01%
Dental	Ameritas Group	1/1/2023	0.00%
Vision	Ameritas Group	1/1/2023	0.00%



Sunshine Water Control District Financial Summary

TOTAL PREMIUM				
	Current	Initial Renewal		
Coverage	Premium	Premium	% Difference	\$ Difference
Medical	\$228,925	\$249,553	9.01%	\$20,628
Dental	\$10,827	\$10,827	0.00%	\$0
Vision	\$1,884	\$1,884	0.00%	\$0
Total	\$241,635	\$262,263	8.54%	\$20,628

Sunshine Water Control District
 Medical | Fully-Insured Renewal | Effective 01/01/2023

Effective Date	Employee Name	Coverage Tier	Plan Choice	Current	Renewal	Renewal Option 1	Renewal Option 2
				Carrier Name	Plan Type	Network	
				AvMed Health Plans HMO	AvMed Health Plans HMO	AvMed Health Plans HMO Elect P100-SG23	AvMed Health Plans HMO G200-SG23
				HM-OA-5768	HM-OA-5768	P100-SG23	G200-SG23
1/1/2023	CHRIS HOFFMAN	EF	HM-OA-5768	\$3,321.20	\$3,620.47	\$3,090.91	\$2,589.80
1/1/2023	CORY SELCHAN	ES	HM-OA-5768	\$3,389.01	\$3,694.38	\$3,341.33	\$2,799.61
1/1/2023	VINCENT MODICA	EC	HM-OA-5768	\$1,795.45	\$1,957.23	\$1,406.33	\$1,178.33
1/1/2023	JASON GARCIA	EF	HM-OA-5768	\$3,096.24	\$3,375.23	\$2,946.34	\$2,468.66
1/1/2023	LUIS VAZQUEZ	EF	HM-OA-5768	\$3,321.20	\$3,620.47	\$2,933.65	\$2,458.02
1/1/2023	DANNY MONROY	EF	HM-OA-5768	\$3,321.20	\$3,620.47	\$2,579.79	\$2,161.54
1/1/2023	MICHAEL SMILOVIC	EE	HM-OA-5768	\$832.77	\$907.80	\$801.46	\$671.52

Estimated Monthly Premium	\$19,077.07	\$20,796.05	\$17,099.81	\$14,327.48
Estimated Annual Premium	\$228,924.84	\$249,552.60	\$205,197.72	\$171,929.76
Dollar Difference	N/A	\$20,627.76	-\$23,727.12	-\$56,995.08
Percent Change	N/A	9.01%	-10.36%	-24.90%

Note: AvMed renewal and alternates enrollment tiers for Cory Selchan and Vincent Modica do not match the dependents listed on the client census we were provided. For illustration purposes we used the dependent tier on the AvMed Renewal and alternate plans



Sunshine Water Control District
 Medical | Fully-Insured Renewal | Effective 01/01/2023

	CURRENT	RENEWAL	ALTERNATE RENEWAL	ALTERNATE RENEWAL
Carrier Name	AvMed Health Plans	AvMed Health Plans	AvMed Health Plans	AvMed Health Plans
Plan Name	HM-OA-5768	HM-OA-5768	P100-SG23	G200-SG23
Plan Type	HMO	HMO	HMO	HMO
Network			Elect	Elect
PLAN DESIGN*				
In-Network Benefits				
Deductible Type				
Calendar Year (CY) Deductible (Individual / Family)	\$0	\$0	\$1,000 / \$2,000	\$2,000 / \$4,000
Out-of-Pocket Max Type				
CY Out-of-Pocket Max (Individual / Family)	\$1,500 / \$3,000	\$1,500 / \$3,000	\$3,100 / \$6,200	\$6,500 / \$13,000
Coinsurance (member pays after deductible)	0%	0%	30%	30%
Preventive Care	Covered 100%	Covered 100%	Covered 100%	Covered 100%
Primary Care Visit	\$25	\$25	\$20	\$30
Specialist Visit	\$45	\$45	\$40	\$60
Urgent Care	\$40	\$40	\$100	\$100
Emergency Room	\$200	\$200	\$375	\$500
Inpatient Hospital	\$250 / day first 5 days / admit (After 5 days: 100% coverage)	\$250 / day first 5 days / admit (After 5 days: 100% coverage)	\$350 / day first 3 days / admit After Ded (After 4 days: No Charge)	\$750 / day first 3 days / admit After Ded (After 4 days: No Charge)
Outpatient Surgery	\$250	\$250	Facility: \$350; Hospital: 30% After Ded	Facility: \$600; Hospital: 30% After Ded
Diagnostic Test (X-ray, blood work)	Lab: Covered 100%; X-Ray: \$20 / test	Lab: Covered 100%; X-Ray: \$20 / test	Facility: \$25; Hospital: 30% After Ded	Facility: \$100; Hospital: 30% After Ded
Imaging (CT/PET scan, MRI)	\$100 / test	\$100 / test	Facility: \$200; Hospital: 30% After Ded	Facility: \$350; Hospital: 30% After Ded
Prescription Drug Benefit				
Retail				
Tier I / Tier II / Tier III	\$5 / \$30 / \$60	\$5 / \$30 / \$60	\$3 / \$9 / \$20 / \$50	\$10 / \$15 / \$40 / \$75
Specialty	25% to max \$250	25% to max \$250	50% After Ded	50% After Ded
Mail Order				
Tier I / Tier II / Tier III	\$12.5 / \$75 / \$150	\$12.5 / \$75 / \$150	\$7.50 / \$22.50 / \$50 / \$125	\$25 / \$37.50 / \$100 / \$187.50
Out-of-Network Benefits				
Deductible Type				
CY Deductible (Individual / Family)	For Emergency See In-Network Benefits only	For Emergency See In-Network Benefits only	For Emergency See In-Network Benefits only	For Emergency See In-Network Benefits only
Out-of-Pocket Max Type				
CY Out-of-Pocket Max (Individual / Family)				
Coinsurance (member pays after deductible)				
COST ANALYSIS				
Estimated Monthly Premium	\$19,077.07	\$20,796.05	\$17,099.81	\$14,327.48
Estimated Annual Premium	\$228,924.84	\$249,552.60	\$205,197.72	\$171,929.76
Dollar Difference		\$20,627.76	-\$23,727.12	-\$56,995.08
Percent Change		9.01%	-10.36%	-24.90%
PLAN PROVISIONS				
Rate Guarantee	Current	12 Months	12 Months	12 Months

*NOTE: Benefit deviations from Current are identified in red font

Note: AvMed renewal and alternates enrollment tiers for Cory Selchan and Vincent Modica do not match the dependents listed on the client census we were provided. For illustration purposes we used the dependent tier on the AvMed Renewal and alternate plans

Sunshine Water Control District
 Dental | Fully-Insured Renewal | Effective 01/01/2023

		CURRENT		RENEWAL	
Carrier Name		Ameritas Group		Ameritas Group	
Plan Name		Dental PPO		Dental PPO	
PLAN DESIGN*					
Network		INN	OON	INN	OON
Calendar Year (CY) Deductible (Individual / Family)		\$100 / \$300	\$100 / \$300	\$100 / \$300	\$100 / \$300
Annual Maximum		\$2,000	\$2,000	\$2,000	\$2,000
Coinsurance** (member pays after deductible)					
Preventive Services		0%	0%	0%	0%
Cleaning Frequency		2/12	2/12	2/12	2/12
Deductible Waived?		Yes	Yes	Yes	Yes
Basic		20%	20%	20%	20%
Major		50%	50%	50%	50%
Periodontics		Covered under Basic	Covered under Basic	Covered under Basic	Covered under Basic
Endodontics		Covered under Basic	Covered under Basic	Covered under Basic	Covered under Basic
Orthodontics		Not Covered	Not Covered	Not Covered	Not Covered
Out of Network Reimbursement		Maximum Allowable Benefit		Maximum Allowable Benefit	
COST ANALYSIS					
PEPM Rates		Plan 1	Dental PPO	Dental PPO	
Employee (EE) Only		1	\$47.92	\$47.92	
EE + Spouse		1	\$95.00	\$95.00	
EE + Child(ren)		1	\$114.20	\$114.20	
EE + Family		4	\$161.28	\$161.28	
Total Enrollment		7			
Estimated Monthly Premium			\$902.24	\$902.24	
Estimated Annual Premium			\$10,826.88	\$10,826.88	
Dollar Difference				\$0.00	
Percent Change				0.00%	
PLAN PROVISIONS					
Rate Guarantee			Current	12 Months	

**Exclusions/limitations may apply

Notes

Sunshine Water Control District
Vision | Renewal | Effective 01/01/2023

		CURRENT		RENEWAL	
Carrier Name		Ameritas Group		Ameritas Group	
Plan Name		VSP Choice Network		VSP Choice Network	
PLAN DESIGN*					
Network		INN	OON	INN	OON
Exam (including eyewear exam)					
Frequency		12 Months	12 Months	12 Months	12 Months
Benefit		\$10 Copay	Reimburse up to \$45	\$10 Copay	Reimburse up to \$45
Lenses					
Materials Copay		\$25 Copay		\$25 Copay	
Frequency		12 Months	12 Months	12 Months	12 Months
Single		\$25 Copay	Reimburse up to \$30	\$25 Copay	Reimburse up to \$30
Bifocal		\$25 Copay	Reimburse up to \$50	\$25 Copay	Reimburse up to \$50
Trifocal		\$25 Copay	Reimburse up to \$65	\$25 Copay	Reimburse up to \$65
Frames					
Frequency		24 Months	24 Months	24 Months	24 Months
Allowance		\$130 allowance	Reimburse up to \$70	\$130 allowance	Reimburse up to \$70
Contact Lenses					
Frequency		12 Months	12 Months	12 Months	12 Months
Allowance		\$130 allowance	Reimburse up to \$105	\$130 allowance	Reimburse up to \$105
Medically Necessary		Covered in full	Reimburse up to \$210	Covered in full	Reimburse up to \$210
COST ANALYSIS					
PEPM Rates		CURRENT		RENEWAL	
Enrollment					
Employee (EE) Only	1	\$9.48		\$9.48	
EE + Spouse	1	\$20.52		\$20.52	
EE + Child(ren)	1	\$16.56		\$16.56	
EE + Family	4	\$27.60		\$27.60	
Total Enrollment	7				
Estimated Monthly Premium		\$156.96		\$156.96	
Estimated Annual Premium		\$1,883.52		\$1,883.52	
Dollar Difference				\$0.00	
Percent Change				0.00%	
PLAN PROVISIONS					
Rate Guarantee		Current		12 Months	

Notes

Sunshine Water Control District
 Basic Life and AD&D | Renewal | Effective 01/01/2023

	CURRENT
Carrier Name	Reliance Standard
PLAN DESIGN*	
Employee	
Life Benefit	\$75,000
Benefit Reduction Schedule (% benefit reduces by at age)	50% @ age 70
Guarantee Issue	\$75,000
Waiver of Premium	Included
Accelerated Benefit Amount	50% to max \$150,000
Convertible/Portable	Convertible: Included
COST ANALYSIS	
Volume	\$450,000
Estimated Monthly Premium	\$290.25
Estimated Annual Premium	\$3,483.00
PLAN PROVISIONS	
	Age Rated

Notes

Sunshine Water Control District
Basic Life and AD&D | Renewal | Effective 01/01/2023

	CURRENT
Carrier Name	Sun Life
PLAN DESIGN*	
Employee	
Life Benefit	\$50,000
Benefit Reduction Schedule (% benefit reduces by at age)	35% @ 65; 35% @ 70; 35% @ 75
Guarantee Issue	\$50,000
Waiver of Premium	Included
Accelerated Benefit Amount	50% to max \$200,000
Convertible/Portable	Convertible: Included
COST ANALYSIS	
Volume	\$350,000
Estimated Monthly Premium	\$232.00
Estimated Annual Premium	\$2,784.00
PLAN PROVISIONS	
Rate Guarantee	Age Rated

Notes

Sunshine Water Control District
 Short Term Disability | Renewal | Effective 01/01/2023

	CURRENT
Carrier Name	Reliance Standard
PLAN DESIGN*	
Benefit Period	Calendar Year
Benefit	60% up to max \$1,000
Elimination Period	
Illness	7 Days
Injury	0 Days
Duration of Benefits	13 Weeks
Features and Limitations	
Definition of Earnings	Basic weekly earnings
Total and Partial Disability	Included
Volume	Based on Salaries
Estimated Monthly Premium	\$158.74
Estimated Annual Premium	\$1,904.88
PLAN PROVISIONS	
Rate Guarantee	Current
Eligibility	Full Time Employee

Notes: Pre-Existing condition is 3months prior/ 6 months covered

Sunshine Water Control District
 Long Term Disability | Renewal | Effective 01/01/2023

	CURRENT
Carrier Name	Reliance Standard
PLAN DESIGN*	
Benefit Period	Calendar Year
Benefit	60% up to max \$7,500
Elimination Period	90 Days
Duration of Benefits	SSNRA
Own Occupation Continuation	3 years Own occupation
Features and Limitations	
Pre-Existing Condition Limitation	12/12
Disability Limitations	
Mental Health	24 Months
Substance Abuse	Included
COST ANALYSIS	
Volume	Based on Salaries
Estimated Monthly Premium	\$231.86
Estimated Annual Premium	\$2,782.28
PLAN PROVISIONS	
Rate Guarantee	Current
Eligibility	Full Time Employee

Notes

Sunshine Water Control District
Fully-Insured Marketing Activity Summary | Effective 01/01/2023

Health Lines of Coverage: Including Medical, Dental, and Vision and EAPs				
Line of Coverage	Carrier Name	Response	Rate Guarantee	Commission
Medical	AvMed Health Plans	Current Carrier - Shown in Proposal	12 Months	\$35 PEPM
Dental	Ameritas Group	Current Carrier - Shown in Proposal	12 Months	10%
Vision	Ameritas Group	Current Carrier - Shown in Proposal	12 Months	10%

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Non-Health Lines of Coverage					
Line of Coverage	Carrier Name	Response	AM Best Rating	Rate Guarantee	Commission
Life and AD&D	Reliance Standard	Current Carrier - Shown in Proposal	A++		11%
Life and AD&D	Sun Life	Current Carrier - Shown in Proposal	A+		10%
Short Term Disability	Reliance Standard	Current Carrier - Shown in Proposal	A++		10%
Long Term Disability	Reliance Standard	Current Carrier - Shown in Proposal	A++		15%

Supplemental Compensation

1. Services provided relative to the above lines of coverage include Benefits strategy consulting and design, to include funding evaluation options, financial reporting, as appropriate, based on funding arrangement and vendor support; Plan management services, to include plan marketing and evaluation services; Renewal support, coordination, and oversight; Annual enrollment support, including drafting assistance for employee communications; Legislative compliance support in the form of updates, materials, and guidance; and Administrative support as mutually agreed to by the parties. Refer to your consulting agreement for further details on services, if applicable.

2. Commissions include all commissions/fees paid to Gallagher that are attributable to a contract or policy between a plan and an insurance company, insurance service, or vendor. This includes indirect fees that are paid to Gallagher paid by a third party, and includes, among other things, the payment of "finders' fees" or other fees to Gallagher for a transaction or service involving the plan.

3. Gallagher may receive supplemental compensation from insurance carriers and vendors, normally calculated at the end of each calendar year, that are contingent on a number of factors including the overall number of employer plans represented, plan retention rates, and overall premium growth. Historically, supplemental compensation has ranged, on average, between 0-3% based on specific carrier programs. These plans have no effect on premiums. Further, Gallagher may receive non-cash compensation from plan vendors or service providers that are not in connection with any particular client. If you have any questions regarding direct or indirect compensation received by Gallagher, please contact your dedicated Gallagher advisor or refer to the Gallagher Global Standards of Business Conduct.

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**SUNSHINE
WATER CONTROL DISTRICT**

5D

Health Coverage - 2023

	FY23 Renewal	FY 22 Current	
1 Chris Hoffman	\$ 3,620.47	\$ 3,321.20	
2 Cory Selchan	\$ 3,694.38	\$ 3,389.01	
3 Vinnie Modica	\$ 1,957.23	\$ 1,795.45	
4 Jason Garcia	\$ 3,375.23	\$ 3,096.24	
5 Luis Vasquez	\$ 3,620.47	\$ 3,321.20	
6 Danny Monroy	\$ 3,620.47	\$ 3,321.20	
7 Michael Smilovic	\$ 907.80	\$ 832.77	
TOTAL	\$ 20,796.05	\$ 19,077.07	\$ 1,718.98 9.01%
	12	12	

	Renewal		Current
		HEALTH	
<i>Annual</i>	\$ 249,552.60		\$ 228,924.84
		DENTAL	
<i>Annual</i>	\$ 10,826.88		\$ 10,826.88
		VISION	
<i>Annual</i>	\$ 1,883.52		\$ 1,883.52
		BASIC LIFE AD&D	
<i>Annual</i>	\$ 6,267.00		\$ 6,267.00
		LTD	
<i>Annual</i>	\$ 2,782.28		\$ 2,782.44
		STD	
<i>Annual</i>	\$ 1,904.88		\$ 1,904.88
TOTAL	\$ 273,217.16		\$ 252,589.56
BUDGET	\$ 325,000.00		\$ 278,434.00
Under budget	\$ 51,782.84		\$ 25,844.44

**SUNSHINE
WATER CONTROL DISTRICT**

6A



DATE

Property Owner Name
Property Owner Address
Coral Springs, Florida 33065

Dear Property Owner:

You are receiving this letter because you own property in Coral Springs that is adjacent to the Sunshine Water Control District's ("SWCD") right-of-way ("ROW") and West Outfall Canal. SWCD, as suggested by its name, is charged with the provision of infrastructure and services for the purpose of stormwater control and flood prevention.

One of the responsibilities of property owners adjacent to SWCD's ROWs and canals is the maintenance of the ROW. The maintenance responsibilities include keeping the ROW clean and free from any accumulation of garbage, trash, and litter. In addition, no vegetation (other than grass which is being properly and routinely maintained) and no obstructions of any sort should be in the ROW.

Please note that SWCD completed a West Outfall Canal ROW clearing and canal widening project in the area(s) adjacent to your home. The property owners at the time were notified of this work and had the opportunity to work with SWCD on any questions or concerns. At the time of the project an Option 2 Obstruction Removal Agreement was entered into (the "Agreement") with SWCD that is binding with all future owners of the property, is a legal obligation of the property in perpetuity, and is recorded in the property records of Broward County, Florida. Under the Agreement, SWCD removed the vegetation and obstructions in the ROW adjacent to your property, and you agreed to keep the ROW free of vegetation and obstructions going forward (see attached agreement). SWCD has recently observed vegetation (including but not limited to hedges, trees, etc.) and/or obstructions (including, but not limited to fences, playground equipment, tiki huts, etc.) in the ROW adjacent to your property (pictures attached). If you would like to keep these items, please have these items relocated to your property no later than **DATE**. SWCD will begin maintenance in this general area shortly thereafter and any vegetation and obstructions in the ROW will be removed and you will be held liable for SWCD's costs associated with such removal.

If you have any questions, please contact the District Manager's Office at (561) 571-0010 or (877) 276-0889.

Regards,

Cindy Cerbone
District Manager

cc: Cory Selchan, District Superintendent

**SUNSHINE
WATER CONTROL DISTRICT**

6B



DATE

Property Owner Name
Property Owner Address
Coral Springs, Florida 33065

Dear Property Owner:

You are receiving this letter because you own property in Coral Springs that is adjacent to the Sunshine Water Control District's ("SWCD") right-of-way ("ROW") and West Outfall Canal. SWCD, as suggested by its name, is charged with the provision of infrastructure and services for the purpose of stormwater control and flood prevention.

One of the responsibilities of property owners adjacent to SWCD's ROWs and canals is the maintenance of the ROW. The maintenance responsibilities include keeping the ROW clean and free from any accumulation of garbage, trash, and litter. In addition, no vegetation (other than grass which is being properly and routinely maintained) and no obstructions of any sort should be in the ROW.

Please note that SWCD completed a West Outfall Canal ROW clearing and canal widening project in the area(s) adjacent to your home. The property owners at the time were notified of this work and had the opportunity to work with SWCD on any questions or concerns. On **[DATE]** an Option 3 Obstruction Removal Agreement was entered into (the "Agreement") with SWCD that is binding upon all future owners of the property, is a legal obligation of the property in perpetuity, and is recorded in the property records of Broward County, Florida (see attached agreement). Under the Agreement you were allowed to maintain certain encroachments into SWCD's ROW but you agreed to maintain the remainder of the ROW free of vegetation and obstructions. Recently SWCD has noticed vegetation (including but not limited to hedges, trees, etc.) and/or obstructions in the ROW (pictures attached). If you would like to keep these items, please have these items relocated to your property no later than **DATE**. SWCD will begin maintenance in this general area shortly and any vegetation or obstructions in the ROW will be removed and you will be held responsible for SWCD's costs associated with the removal.

If you have any questions, please contact the District Manager's Office at (561) 571-0010 or (877) 276-0889.

Regards,

Cindy Cerbone
District Manager
cc: Cory Selchan, District Superintendent

**SUNSHINE
WATER CONTROL DISTRICT**

6C



DATE

Property Owner Name
Property Owner Address
Coral Springs, Florida 33065

Dear Property Owner:

You are receiving this letter because you own property in Coral Springs that is adjacent to the Sunshine Water Control District's ("SWCD") right-of-way ("ROW") and West Outfall Canal. SWCD, as suggested by its name, is charged with the provision of infrastructure and services for the purpose of stormwater control and flood prevention.

One of the responsibilities of property owners adjacent to SWCD's ROWs and canals is the maintenance of the ROW. The maintenance responsibilities include keeping the ROW clean and free from any accumulation of garbage, trash, and litter. In addition, no vegetation (other than grass which is being properly and routinely maintained) and no obstructions of any sort should be in the ROW.

Please note that SWCD completed a West Outfall Canal ROW clearing and canal widening project in the area(s) adjacent to your home. The property owners at the time were notified of this work and had the opportunity to work with SWCD on any questions or concerns. On **[DATE]**, an Option 2 Obstruction Removal Agreement was entered into (the "Agreement") with the SWCD, whereby the SWCD removed obstructions from the ROW adjacent to your property at SWCD's expense. Under the Agreement, it was agreed to keep the ROW free of obstructions going forward. Recently, the SWCD has noticed vegetation (including but not limited to hedges, trees, etc.) and/or obstructions (including, but not limited to fences, playground equipment, tiki huts, etc.) in the ROW adjacent to your property (pictures attached). If you would like to keep these items, please have them relocated to your property no later than **DATE**. SWCD will begin maintenance in this general area shortly thereafter and any vegetation and obstructions remaining in the ROW will be removed. Under the Agreement, you will be liable to SWCD for all costs associated with SWCD's removal of vegetation or obstructions.

If you have any questions, please contact the District Manager's Office at (561) 571-0010 or (877) 276-0889.

Regards,

Cindy Cerbone
District Manager
cc: Cory Selchan, District Superintendent

2300 Glades Road, Suite 410W, Boca Raton, Florida 33431 ■ 561-571-0010 Phone ■ 561-571-0013 Fax
www.sunshinewcd.net

**SUNSHINE
WATER CONTROL DISTRICT**

**UNAUDITED
FINANCIAL
REPORTS**

**SUNSHINE
WATER CONTROL DISTRICT
FINANCIAL STATEMENTS
UNAUDITED
OCTOBER 31, 2022**

**SUNSHINE
WATER CONTROL DISTRICT
BALANCE SHEET
GOVERNMENTAL FUNDS
OCTOBER 31, 2022**

	General Fund	Debt Service Fund Series 2021	Total Governmental Funds
ASSETS			
Centennial Bank	\$ 656,871	\$ -	\$ 656,871
Centennial Bank - escrow	80,904	-	80,904
DS - Series 2021	-	475,128	475,128
Investments			
State Board of Administration			
A Investment account	5,183	-	5,183
A Bank maintenance reserve account	2,715	-	2,715
A Renewal & replacement reserve account	2,020	-	2,020
A Equipment replacement reserve account	213	-	213
Centennial Bank - MMA	259,571	-	259,571
FineMark Bank - MMA	249,015	-	249,015
FineMark Bank - ICS	12,562,115	-	12,562,115
Iberia Bank - MMA	5,532	-	5,532
Undeposited funds	5,700	-	5,700
Due from general fund	-	91,955	91,955
Total assets	<u>\$13,829,839</u>	<u>\$ 567,083</u>	<u>\$ 14,396,922</u>
LIABILITIES			
Liabilities:			
Accounts payable	\$ 7,897	\$ -	\$ 7,897
Retainage payable	1,102	-	1,102
Due to debt service	91,955	-	91,955
Deposits payable/trash bonds	204,500	-	204,500
Cost recovery deposits	52,878	-	52,878
Pension payable	3,158	-	3,158
Payroll liabilities	36	-	36
Total liabilities	<u>361,526</u>	<u>-</u>	<u>361,526</u>
FUND BALANCES			
Assigned:			
3 months working capital	1,760,312	-	1,760,312
Disaster recovery	3,500,000	-	3,500,000
Truck replacement	180,000	-	180,000
Restricted for			
Debt service	-	567,083	567,083
Unassigned	8,028,001	-	8,028,001
Total fund balances	<u>13,468,313</u>	<u>567,083</u>	<u>14,035,396</u>
Total liabilities and fund balances	<u>\$13,829,839</u>	<u>\$ 567,083</u>	<u>\$ 14,396,922</u>

**SUNSHINE
WATER CONTROL DISTRICT
STATEMENT OF REVENUES, EXPENDITURES,
AND CHANGES IN FUND BALANCES
GENERAL FUND
FOR THE PERIOD ENDED OCTOBER 31, 2022**

	Current Month	Year to Date	Adopted Budget	% of Budget
REVENUES				
Assessments	\$ -	\$ -	\$ 3,610,139	0%
Interest and miscellaneous	2,134	2,134	9,000	24%
Permit review fees	3,200	3,200	2,450	131%
Cost recovery	-	-	17,500	0%
Total revenues	<u>5,334</u>	<u>5,334</u>	<u>3,639,089</u>	0%
EXPENDITURES				
Administrative				
Supervisors	100	100	1,800	6%
Supervisor health care benefits	-	-	25,000	0%
Supervisors reimbursement	-	-	7,500	0%
Management/accounting/recording	5,478	5,478	65,734	8%
DSF & CPF accounting	1,280	1,280	15,355	8%
Dissemination fee	83	83	1,000	8%
Arbitrage rebate calculation	-	-	750	0%
Trustee	-	-	5,000	0%
Audit	-	-	11,500	0%
Legal	-	-	95,000	0%
Legal - legislative representation	-	-	53,100	0%
Retirement plan consulting	-	-	10,000	0%
Human resource services	630	630	7,557	8%
Communication	-	-	7,500	0%
Dues/subscriptions	-	-	4,500	0%
Rent - operations facility	4,061	4,061	48,666	8%
Insurance	25,118	25,118	35,440	71%
Legal advertising	-	-	2,500	0%
Office supplies and expenses	-	-	1,500	0%
Postage	68	68	1,200	6%
Postage-ROW clearing	-	-	500	0%
Printing and binding	117	117	1,400	8%
Website	404	404	3,000	13%
ADA website compliance	-	-	210	0%
Contingencies	3,508	3,508	5,000	70%
Total administrative expenses	<u>40,847</u>	<u>40,847</u>	<u>410,712</u>	10%
Field operations				
Salaries and wages	34,795	34,795	437,561	8%
FICA taxes	2,660	2,660	33,473	8%
Special pay	-	-	2,000	0%
Bonus program	-	-	2,500	0%
401a retirement plan	6,635	6,635	43,756	15%
Health insurance	22,355	22,355	325,000	7%
Workers' compensation insurance	12,520	12,520	15,000	83%
Engineering	-	-	100,000	0%
Engineering - capital outlay westchester	-	-	7,500	0%
Engineering - capital outlay ps1 & ps2	-	-	42,472	0%
Engineering - capital outlay ps1 h/s/c	-	-	134,000	0%
Engineering - capital outlay NW 123 ave	-	-	12,550	0%
Engineering - capital outlay Riverside drive	-	-	251,586	0%
Engineering - capital outlay University drive	-	-	89,627	0%
Engineering - telemetry	-	-	75,500	0%
Consulting engineer services	-	-	25,000	0%
Cost recovery	-	-	17,500	0%
Water quality testing	-	-	5,224	0%
Telephone	-	-	1,800	0%

**SUNSHINE
WATER CONTROL DISTRICT
STATEMENT OF REVENUES, EXPENDITURES,
AND CHANGES IN FUND BALANCES
GENERAL FUND
FOR THE PERIOD ENDED OCTOBER 31, 2022**

	Current Month	Year to Date	Adopted Budget	% of Budget
Electric	-	-	85,000	0%
Insurance	58,700	58,700	55,529	106%
Repairs and maintenance				
Canal banks	-	-	75,000	0%
Canal dredging	-	-	50,000	0%
Culvert inspection & cleaning	-	-	100,000	0%
Dumpster service	-	-	13,000	0%
Truck & tractor	5,503	5,503	21,000	26%
Other	-	-	21,000	0%
Operating supplies				
Chemicals	-	-	90,000	0%
Fuel	-	-	20,000	0%
Fuel-pump station generator	-	-	35,000	0%
Triploid carp	-	-	19,755	0%
Uniforms	59	59	3,217	2%
Other	-	-	4,000	0%
Permit fees, licenses, schools	-	-	5,000	0%
Capital outlay - westchester culvert	-	-	288,125	0%
Capital outlay - pump station 1 & 2	-	-	1,444,200	0%
Capital outlay - ps1 hydra/struc/canal	-	-	625,440	0%
Capital outlay - NW 123 Ave	-	-	150,000	0%
Capital outlay - Riverside drive	-	-	985,000	0%
Capital outlay - University drive	-	-	150,000	0%
Capital outlay - telemetry	-	-	340,000	0%
Field equipment	-	-	35,000	0%
Pump station telemetry	-	-	40,000	0%
Contingencies	-	-	5,000	0%
Total field operations	<u>143,227</u>	<u>143,227</u>	<u>6,282,315</u>	2%
Other fees and charges				
Tax collector	-	-	37,606	0%
Property appraiser	-	-	37,606	0%
Property tax bills - fire & EMS assessment	-	-	100	0%
Total other fees & charges	<u>-</u>	<u>-</u>	<u>75,312</u>	0%
Total expenditures	<u>184,074</u>	<u>184,074</u>	<u>6,768,339</u>	3%
Excess/(deficiency) of revenues over/(under) expenditures	(178,740)	(178,740)	(3,129,250)	
Fund balance - beginning	13,647,053	13,647,053	13,725,082	
Fund balance - ending				
Assigned:				
3 months working capital	1,760,312	1,760,312	1,760,312	
Disaster recovery	3,500,000	3,500,000	3,500,000	
Truck replacement	180,000	180,000	180,000	
Unassigned	8,028,001	8,028,001	5,155,520	
Total fund balance - ending	<u>\$ 13,468,313</u>	<u>\$ 13,468,313</u>	<u>\$ 10,595,832</u>	

**SUNSHINE
WATER CONTROL DISTRICT
STATEMENT OF REVENUES, EXPENDITURES,
AND CHANGES IN FUND BALANCES
DEBT SERVICE FUND SERIES 2021
FOR THE PERIOD ENDED OCTOBER 31, 2022**

	Current Month	Year To Date	Adopted Budget	% of Budget
REVENUES				
Assessment levy: on-roll	\$ -	\$ -	\$ 848,359	0%
Interest	894	894	-	N/A
Total revenues	<u>894</u>	<u>894</u>	<u>848,359</u>	0%
EXPENDITURES				
Debt service				
Principal	-	-	470,000	0%
Interest	-	-	362,493	0%
Total debt service	<u>-</u>	<u>-</u>	<u>832,493</u>	0%
Other fees and charges				
Tax collector	-	-	8,837	0%
Property appraiser	-	-	8,837	0%
Total other fees and charges	<u>-</u>	<u>-</u>	<u>17,674</u>	0%
Total expenditures	<u>-</u>	<u>-</u>	<u>850,167</u>	0%
Excess/(deficiency) of revenues over/(under) expenditures	894	894	(1,808)	
Fund balances - beginning	566,189	566,189	253,407	
Fund balances - ending	<u>\$ 567,083</u>	<u>\$ 567,083</u>	<u>\$ 251,599</u>	

SUNSHINE

Water Control District

Special Assessment Revenue Improvement Bonds, Series 2018

\$11,685,000

Debt Service Schedule

Date	Principal	Coupon	Interest	Total P+I
11/01/2021		-	222,015.00	222,015.00
05/01/2022		4.800%	222,015.00	222,015.00
11/01/2022		-	222,015.00	222,015.00
05/01/2023	430,000.00	4.800%	222,015.00	652,015.00
11/01/2023		-	213,845.00	213,845.00
05/01/2024	450,000.00	4.800%	213,845.00	663,845.00
11/01/2024		-	205,295.00	205,295.00
05/01/2025	465,000.00	4.800%	205,295.00	670,295.00
11/01/2025		-	196,460.00	196,460.00
05/01/2026	480,000.00	4.800%	196,460.00	676,460.00
11/01/2026		-	187,340.00	187,340.00
05/01/2027	500,000.00	4.800%	187,340.00	687,340.00
11/01/2027		-	177,840.00	177,840.00
05/01/2028	520,000.00	4.800%	177,840.00	697,840.00
11/01/2028		-	167,960.00	167,960.00
05/01/2029	540,000.00	4.800%	167,960.00	707,960.00
11/01/2029		-	157,700.00	157,700.00
05/01/2030	560,000.00	4.800%	157,700.00	717,700.00
11/01/2030		-	147,060.00	147,060.00
05/01/2031	580,000.00	4.800%	147,060.00	727,060.00
11/01/2031		-	136,040.00	136,040.00
05/01/2032	600,000.00	4.800%	136,040.00	736,040.00
11/01/2032		-	124,640.00	124,640.00
05/01/2033	625,000.00	4.800%	124,640.00	749,640.00
11/01/2033		-	112,765.00	112,765.00
05/01/2034	650,000.00	4.800%	112,765.00	762,765.00
11/01/2034		-	100,415.00	100,415.00
05/01/2035	675,000.00	4.800%	100,415.00	775,415.00
11/01/2035		-	87,590.00	87,590.00
05/01/2036	695,000.00	4.800%	87,590.00	782,590.00
11/01/2036		-	74,385.00	74,385.00
05/01/2037	730,000.00	4.800%	74,385.00	804,385.00
11/01/2037		-	60,515.00	60,515.00
05/01/2038	750,000.00	4.800%	60,515.00	810,515.00
11/01/2038		-	46,265.00	46,265.00
05/01/2039	780,000.00	4.800%	46,265.00	826,265.00
11/01/2039		-	31,445.00	31,445.00
05/01/2040	810,000.00	4.800%	31,445.00	841,445.00
11/01/2040		-	16,055.00	16,055.00
05/01/2041	845,000.00	4.800%	16,055.00	861,055.00
Total	\$11,685,000.00	-	\$5,375,290.00	\$17,060,290.00

**SUNSHINE
WATER CONTROL DISTRICT**

MINUTES

DRAFT

**MINUTES OF MEETING
SUNSHINE WATER CONTROL DISTRICT**

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The Board of Supervisors of the Sunshine Water Control District held a Regular Meeting on October 12, 2022 at 6:30 p.m., at the La Quinta Inn Coral Springs, 3701 N. University Drive, Coral Springs, Florida 33065.

Present were:

Joe Morera	President
Ivan Ortiz	Vice President

Also present were:

Cindy Cerbone	District Manager
Jamie Sanchez	Wrathell, Hunt and Associates, LLC
Andrew Kantarzhi	Wrathell, Hunt and Associates, LLC
Al Malefatto	District Counsel
Orlando Rubio	District Engineer
Cory Selchan	Field Superintendent
Brad Larsen	NFP

FIRST ORDER OF BUSINESS

Call to Order

Mr. Morera called the meeting to order at 6:35 p.m.

SECOND ORDER OF BUSINESS

Roll Call

Supervisors Morera and Ortiz were present. Supervisor Khouri was not present.

THIRD ORDER OF BUSINESS

Pledge of Allegiance

All present recited the Pledge of Allegiance.

FOURTH ORDER OF BUSINESS

Public Comments [3-Minute Time Limit]
(Comments should be made from the microphone to ensure recording. Please state your name prior to speaking.)

No members of the public spoke.

42 **FIFTH ORDER OF BUSINESS**

**Discussion: SWCD 2Q-2022 Fiduciary
Investment Review**

43
44

45 Referencing slides, Mr. Larsen presented the Fiduciary Investment Review Report and
46 discussed the Investment Policy Statement, which is the strategy by which investment options
47 are monitored, selected or potentially replaced. He noted the desire to establish a formal
48 Committee comprised of Board Members.

49 Mr. Larson discussed a fee reduction and the difficulty moving the Mission Annuity
50 Contract to their Open Architecture contract because Mission Square is no longer allowing that
51 transition until plans become much larger. As a result of this, he thought it necessary to
52 investigate alternative record keepers, such as Lincoln, potential pricing and savings in the open
53 market. He discussed the conversion process, investment options, asset class, a 10-point
54 scoring methodology/system, acceptable funds that are above 7, funds on the watchlist that
55 are 6 or below, pricing/expense ratios and Asset Management Charges (AMC).

56 Mr. Larsen stated, once the switch is made from Mission Square to another investment
57 company, the Board will notice a significantly better investment lineup, with lower costs and
58 better performance. His goal is to obtain the best deals for the District’s employees. Lincoln will
59 allow the District to move to the open architecture platform, in time; however, that is just one
60 option. He and his team will research and consider several other record keepers in the
61 retirement contribution space for the District.

62 Mr. Larsen responded to questions about moving assets from Mission Square, mid-cap
63 growth funds, transfer costs, how often funds might be transferred, quarterly reviews and
64 scoring funds. If the Board is amenable, he would recommend the formation of a 401A Pension
65 Plan Committee and, with the Board’s authorization, he will shop the plan on the open market.

66 Ms. Cerbone asked about memorializing the Committee Members and if the group must
67 be comprised of Board Members. Mr. Larsen stated the Committee could consist of one person
68 or 15 people and someone must be in the leadership role; it would be good for a person with
69 an interest in investments and a human resource professional.

70 Mr. Morera stated he favored having a representative from the employee pool and
71 having an odd-number of people on the Committee for voting purposes. Ms. Cerbone stated
72 she could not designate anyone tonight to join the Committee, on behalf of District
73 Management, and suggested that the Board nominate itself and Mr. Selchan as the Committee

74 and task the District Manager to confer with District Counsel regarding joining the Committee.
75 If a representative from District Management can be on the Committee, someone will be
76 named and, if they cannot, she would explain why.

77 Discussion ensued regarding when Committee meetings would be held, if the
78 Committee meetings should be advertised and how decisions will be made once the Committee
79 makes a recommendation to the Board.

80

81 **On MOTION by Mr. Ortiz and seconded by Mr. Morera, with all in favor,**
82 **creating a SWCD 401A Committee, comprised of the three Board Members, Mr.**
83 **Selchan, and allowing for additional Committee Members to be appointed**
84 **later, was approved.**

85

86

87 Mr. Larsen stated, once the Committee is established, he will start looking into funding
88 analytics and making potential investment decisions.

89

90 **On MOTION by Mr. Ortiz and seconded by Mr. Morera, with all in favor, the,**
91 **authorizing NFP to move two existing funds from Mission Square to another**
92 **record-keeper, was approved.**

93

94

95 Mr. Larsen stated he will enact the document, as the District's Investment
96 Representative, by executing and putting it in place. He suggested another motion to take the
97 plan to market and explore other record keepers, in addition to Lincoln.

98

99 **On MOTION by Mr. Ortiz and seconded by Mr. Morera, with all in favor,**
100 **authorizing NFP to take the 401A Plan to market, was approved.**

101

102

103 Regarding Committee meetings, Mr. Morera favors starting them at 6:00 p.m., followed
104 by the Board Meeting at 6:30 p.m. Management will advertise the Committee meetings. Ms.
105 Cerbone will add Mr. Larsen to the agenda distribution list. Mr. Larsen will email the quarterly
106 review to Management for dissemination to the Committee prior to the next meeting.

107

The meeting recessed at 7:31 p.m., and reconvened at 7:34 p.m.

108

109 **SIXTH ORDER OF BUSINESS** **Acceptance of Unaudited Financial**
110 **Statements as of August 31, 2022**

111
112 Ms. Sanchez presented the Unaudited Financial Statements as of August 31, 2022.

113
114 **On MOTION by Mr. Ortiz and seconded by Mr. Morera, with all in favor, the**
115 **Unaudited Financial Statements as of August 31, 2022, were accepted.**

116
117
118 **SEVENTH ORDER OF BUSINESS** **Approval of September 14, 2022 Public**
119 **Hearings and Regular Meeting Minutes**

120
121 Ms. Sanchez presented the September 14, 2022 Public Hearings and Regular Meeting
122 Minutes.

123
124 **On MOTION by Mr. Ortiz and seconded by Mr. Morera, with all in favor, the**
125 **September 14, 2022 Public Hearings and Regular Meeting Minutes, as**
126 **presented, were approved.**

127
128
129 **EIGHTH ORDER OF BUSINESS** **Supervisors' Communications**

130
131 Mr. Ortiz stated that he is healing from a successful eye surgery.

132 Mr. Morera asked if the District's agreements were reviewed and if a plan is in place to
133 check agreements from the field. Per Mr. Selchan, a plan will be developed after the new year.

134 Mr. Morera asked Staff to prepare and send a standard letter to property owners, in
135 November, informing them that they violated the agreements and should take action to correct
136 those violations. Ms. Cerbone will retrieve and re-send the letter.

137 Mr. Morera wished everyone a happy and safe Halloween and thanked everyone for
138 their continued support of the District.

139
140 **NINTH ORDER OF BUSINESS** **Staff Reports**

141
142 **A. District Counsel: *Lewis, Longman & Walker, P.A.***

143 Mr. Malefatto reported the following:

- 144 ➤ He conferred with a Benefit Plan Consultant about a Healthcare Reimbursement
145 Account (HRA) for District employees. A stand-alone HRA is not feasible in this situation.

146 ➤ The Consultant offered to assist by advising District Management and the District's
147 Insurance agent regarding when to renew the healthcare plan to include Board Members.

148 Ms. Cerbone stated the existing plan is a grandfather plan, meaning no changes can be
149 made. In order to include the Board Members, the District must switch plans and there might
150 not be a comparable plan for the employees. At the same time, there is no guarantee at the
151 December meeting that the District's current carrier, AvMed, will still have the same offerings.
152 The Board previously stated it did not wish to change the employee plan. Staff will schedule a
153 conference call with Gallagher and Gehring and report the findings at the next Board meeting.

154 Ms. Sanchez will include a Health Plan Update as a discussion item on the next agenda.

155 Discussion ensued regarding reimbursement of health insurance premiums, providing
156 Management with evidence of insurance deduction/tax payments and taxable, non-taxable and
157 Medicare reimbursements.

158 Mr. Malefatto continued his report, as follows:

159 ➤ Regarding Blue Stream's claim against Just Call James (JCJ) for cutting a cable line,
160 Bluestream's Counsel passed District Counsel's follow-up email on to the collection contractor,
161 Phoenix Loss Control (PLC). Mr. Malefatto emailed PLC on September 16, 2022 and asked them
162 to demonstrate that Blue Stream was permitted but he has not heard back.

163 Discussion ensued regarding Blue Stream's unresponsiveness and lack of cooperation,
164 alerting the City about the issues with Blue Stream, potential legal action against Blue Stream,
165 reporting Blue Stream's permit status to the City, the District right-of-way (ROW) and AT&T.

166 Mr. Malefatto will follow up with Blue Stream's Counsel.

167 ➤ Regarding the SWCD Referendum on the November ballot, Mr. Malefatto reviewed the
168 ballot language, prior to its finalization, and it was consistent with the statutes.

169 **B. District Engineer: Craig A. Smith & Associates**

170 **I. Presentation: Monthly Engineer's Report**

171 Mr. Rubio presented the September Monthly Engineer's Report. He responded to
172 questions regarding needing a new survey for Pump Station (PS) 1, the design differences
173 between PS1 and PS2 and the engineering plans/concepts and design costs for PS1.

174 Per Mr. Morera, the District Engineer is to provide the side-by-side costs for both pump
175 stations and highlight any differences in engineering or legal aspects.

176 **II. Permit Applications**

177 Mr. Rubio presented the following permit applications:

- 178 a. Re-Issue Permit 2020-14: Flora Fine Foods, 12400 NW 35TH Street
- 179 (Permit Modification)

180

181 **On MOTION by Mr. Ortiz and seconded by Mr. Morera, with all in favor, re-**
182 **issuance of Permit 2020-14, related to the CAS Project No. 15-1826-P25 ROW**
183 **Permit Application submitted by Diversified Construction & Engineering**
184 **Services, on behalf of Flora Fine Foods, site development at 124 NW 35th St., as**
185 **modified to include for the user of the existing catch basin to overflow into the**
186 **adjacent canal and subject to the Special Conditions set forth in the P2P**
187 **October 4, 2022 recommendation letter, was approved.**

188

189

- 190 b. Langan Engineering and Environmental Services on Behalf of Sawgrass
- 191 Place Owner, LLC, NW 39th St/NW 120th Avenue

192

193 **On MOTION by Mr. Ortiz and seconded by Mr. Morera, with all in favor, the**
194 **CAS Project No. 15-1826-P32 ROW Permit Application submitted by Langan**
195 **Engineering and Environmental Services, on behalf of Sawgrass Place Owner,**
196 **LLC, for the development of an industrial warehouse facility at NW 39th St/NW**
197 **120th Avenue, with loading docks, associated parking areas and perimeter dry**
198 **retention areas with overflow to the SWCD canal system, subject to the Special**
199 **Conditions set forth in the October 4, 2022 recommendation letter, was**
200 **approved.**

201

202

- 203 c. FG Construction LLC on Behalf of Broward County Board of County
- 204 Commissioners, Atlantic Blvd. Bridge

205

206 **On MOTION by Mr. Ortiz and seconded by Mr. Morera, with all in favor, the**
207 **CAS Project No. 15-1826 ROW Permit Application submitted by FG**
208 **Construction LLC, on behalf of the Broward County Board of County**
209 **Commissioners, for the Atlantic Blvd. Bridge Deck Repair at the bridge over the**
210 **East Outfall Canal, subject to the Special Conditions set forth in the October 10,**
211 **2022 recommendation letter, was approved.**

212

213

- 214 C. District Engineering Consultant: *John McKune*

215 There was no report.

- 216 D. District Field Supervisor: *Cory Selchan*

217 Mr. Selchan reported the following:

- 218 ➤ Rainfall: The District received 18" of rain in September, due to Hurricane Ian.
- 219 ➤ Staff drew down the water levels to 4' and maintained that through the storm.
- 220 ➤ The parts needed to make the improvements at the pump stations are still pending.
- 221 ➤ The canal systems look okay.

- 222 • **Continued Discussion: City of Coral Springs Tree Memorial**
- 223 **Program/Plaque for Daniel Prudhomme**

224 Mr. Selchan conferred with the City regarding the Tree Memorial Program. The District's
225 request to plant a tree in Mr. Prudhomme's memory in Cypress Park was approved, provided it
226 is not a large tree, as the park is full. Ms. Cerbone suggested obtaining a plaque, as well.

227

228 **On MOTION by Mr. Ortiz and seconded by Mr. Morera, with all in favor,**
229 **authorizing Staff to procure a plaque honoring Mr. Prudhomme, in a not to**
230 **exceed amount of \$1,000, and for the planting of a small tree in Cypress Park in**
231 **Mr. Prudhomme's memory, was approved.**

232

233

234 Mr. Selchan voiced his appreciation to the Board for their efforts on the employee
235 pension program and valuing the District's employees.

236 Discussion ensued regarding hurricanes, flood insurance, residents and flood zones.

237 **E. District Manager: *Wrathell, Hunt & Associates, LLC***

- 238 • **NEXT MEETING DATE: November 9, 2022 at 6:30 P.M.**

- 239 ○ **QUORUM CHECK**

240 The next meeting is scheduled for November 9, 2022. A Committee Meeting will be
241 held at 6:00 p.m., prior to the Regular Meeting.

242

243 **TENTH ORDER OF BUSINESS**

Public Comments

244

245 No members of the public spoke.

246

247 **ELEVENTH ORDER OF BUSINESS**

Adjournment

248

249

250 **On MOTION by Mr. Morera and seconded by Mr. Ortiz, with all in favor, the**
251 **meeting was adjourned at 9:03 p.m.**

252

253

254

255

256

257 _____
Secretary/Assistant Secretary

_____ _____
President/Vice President

**SUNSHINE
WATER CONTROL DISTRICT**

**STAFF
REPORTS
A**

Reply To: Tallahassee

December 1, 2022

Broward County Legislative Delegation
Attn: Andrea Knowles Hill, Executive Director
115 South Andrews Avenue, Room 429
Ft. Lauderdale, FL 33301

RE: 2023 Local Bill Relating to Sunshine Water Control District

Dear Ms. Hill:

Enclosed please find a draft local bill relating to the Sunshine Water Control District (“Sunshine WCD”). Sunshine WCD was created in 1963 by circuit court decree and a subsequent act of the Florida Legislature (Ch. 63-609, Laws of Florida). Any changes relating to a special district created by the Legislature can only be accomplished through further legislation action.

In Special Session 2022C, the Florida Legislature passed SB 4C relating to independent special districts. The bill was signed into law by the Governor on April 22, 2022 and it took effect on July 1, 2022. SB 4C dissolved all special districts established by special act prior to November 5, 1968, if those districts had not been re-established by later special act. Such special districts will be dissolved effective June 1, 2023. Six special districts were affected by SB 4C, including Sunshine WCD. This bill simply “ratifies, confirms and approves” continuation of the district so that it is not dissolved come June 1, 2023.

My firm has been engaged to represent Sunshine WCD and assist it through the legislative process. My email address is clyon@llw-law.com and my other contact information is located at the bottom of this page.

Rep. Dan Daley has indicated that he will sponsor the legislation.

JACKSONVILLE
245 Riverside Ave., Suite 510
Jacksonville, Florida 32202
T: 904.353.6410
F: 904.353.7619

ST. PETERSBURG
100 Second Ave., South
Suite 501-S
St. Petersburg, Florida 33701
T: 727.245.0820
F: 727.290.4057

TALLAHASSEE
315 South Calhoun St., Suite 830
Tallahassee, Florida 32301
T: 850.222.5702
F: 850.224.9242

TAMPA
301 West Platt St.
Suite 364
Tampa, Florida 33606
T: 813.775.2331

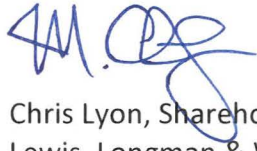
WEST PALM BEACH
515 North Flagler Dr., Suite 1500
West Palm Beach, Florida 33401
T: 561.640.0820
F: 561.640.8202

December 1, 2022

Page 2

If you have any questions or need additional information, please feel free to contact me.

Sincerely,

A handwritten signature in blue ink, appearing to read "M. Lyon", with a stylized flourish extending from the end.

Chris Lyon, Shareholder
Lewis, Longman & Walker, P.A.

Enclosures

BILL

ORIGINAL

YEAR

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A bill to be entitled
 An act relating to the Sunshine Water Control
 District, Broward County; codifying, reenacting,
 amending, and repealing the district charter;
 providing legislative intent; providing for
 continuation of authority for revenue collection and
 powers to meet outstanding obligations; providing a
 definition; repealing chapters 63-609 and 2021-255,
 Laws of Florida, and chancery decree No. 62-4596-F,
 relating to the district; providing an exception to
 general law; providing an effective date.

Be It Enacted by the Legislature of the State of Florida:

Section 1. Chapters 63-609 and 2021-255, Laws of Florida,
relating to the Sunshine Water Control District, formerly known
as the Sunshine Drainage District, and the decree in chancery
No. 62-4596-F entered by the Circuit Court in and for the
Fifteenth Judicial Circuit of the State of Florida on January
23, 1963, creating and incorporating the Sunshine Drainage
District as a public corporation of the State of Florida, are
codified, reenacted, amended, and repealed as provided herein.
 Furthermore, it is the intent of the Legislature to preserve all
authority to generate revenue and pay outstanding indebtedness

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24 as continued in force by the operation of article XII, sections
 25 2 and 15 of the Florida Constitution.

26 Section 2. The charter for the Sunshine Water Control
 27 District is reenacted to read:

28 Section 1. The Sunshine Water Control District, as ratified
 29 and approved by chapter 63-609, Laws of Florida, and
 30 subsequently amended by chapter 2021-255, Laws of Florida, is
 31 hereby ratified, confirmed, and approved. The Sunshine Water
 32 Control District shall continue to be a public corporation of
 33 this State and have perpetual existence. All lawful debts,
 34 bonds, obligations, contracts, franchises, promissory notes,
 35 audits, minutes, resolutions, and other undertakings of the
 36 Sunshine Water Control District are hereby validated and shall
 37 continue to be valid and binding on the district in accordance
 38 with their respective terms, conditions, and covenants. All
 39 taxes levied by the Board of Supervisors of the Sunshine Water
 40 Control District are hereby validated and shall continue to be
 41 valid and binding on the district in accordance with their
 42 respective terms, conditions, and covenants. All taxes levied by
 43 the Board of Supervisors of the Sunshine Water Control District
 44 on lands within the boundaries of the district shall continue to
 45 be effective, binding, and collectible and a lien on such lands
 46 in accordance with the provisions of this Act. Any proceeding
 47 commenced by the Sunshine Water Control District for the

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48 construction of any improvements, works, or facilities, for the
 49 assessment of benefits and damages, or for the borrowing of
 50 money shall not be impaired or avoided by this Act.

51 Section 2. Boundaries.-The Sunshine Water Control District
 52 shall include all of the lands within the following-described
 53 boundaries:

54 The West five-eighths (W. 5/8) of Section 14, TOGETHER WITH
 55 Sections 16, 18, 20 and 22, Township 48 South, Range 41
 56 East, Broward County, Florida.

57
 58 TOGETHER WITH Sections 15, 17, 19 and 21, Township 48
 59 South, Range 41 East, according to the plat of FLORIDA
 60 FRUIT LANDS COMPANY'S SUBDIVISION NO. 2, as recorded in
 61 Plat Book 1, Page 102, of the Public Records of Palm Beach
 62 County, Florida.

63
 64 TOGETHER WITH a strip of land known as the Sunshine
 65 Drainage District East Outfall Canal Right of Way, said
 66 strip of land being that portion of Section 27, Township 48
 67 South, Range 41 East, according to the plat of FLORIDA
 68 FRUIT LANDS COMPANY'S SUBDIVISION NO. 2, as recorded in
 69 Plat Book 1, Page 102, of the Public Records of Palm Beach
 70 County, Florida, lying East of a line parallel with and 170
 71 feet West of the East line of said Section 27; TOGETHER

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YEAR

72 WITH the East 170 feet of that portion of Section 34,
 73 Township 48 South, Range 41 East, Broward County, Florida,
 74 lying North of the North Right of Way line of South Florida
 75 Water Management District (formerly Central and Southern
 76 Florida Flood Control District) Canal C-14.

77
 78 TOGETHER WITH a 170 foot wide strip of land, known as the
 79 Sunshine Drainage District West Outfall Canal Right of Way,
 80 said strip of land being portions of Sections 28 and 32,
 81 Township 48 South, Range 41 East, Broward County, Florida,
 82 and a portion of Section 29, Township 48 South, Range 41
 83 East, according to the plat of FLORIDA FRUIT LANDS
 84 COMPANY'S SUBDIVISION NO. 2, as recorded in Plat Book 1,
 85 Page 102, of the Public Records of Palm Beach County,
 86 Florida, as described in Official Records Book 5345, Pages
 87 483 through 486, inclusive, of the Public Records of
 88 Broward County, Florida.

89
 90 TOGETHER WITH a 60 foot wide strip of land being a portion
 91 of Section 33, Township 48 South, Range 41 East, according
 92 to the plat of FLORIDA FRUIT LANDS COMPANY'S SUBDIVISION
 93 NO. 2, as recorded in Plat Book 1, Page 102, of the Public
 94 Records of Palm Beach County, Florida, bounded on the West
 95 by the West line of said Section 33, and bounded on the

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96 North, East and South by Tract "T" (Park) OAKLAND WOOD,
 97 according to the Plat thereof, recorded in Plat Book 80,
 98 Page 39, of the Public Records of Broward County, Florida.

99
 100 TOGETHER WITH portions of Sections 12, 13 and 24, Township
 101 48 South, Range 40 East, Broward County, Florida, lying
 102 East of the East Right-of-Way line of LEVEE L-36 (600 foot
 103 Canal Right-of-Way), lying North of the Westerly extension
 104 of the South line of said Section 19, Township 48 South,
 105 Range 41 East, and lying South of the Westerly extension of
 106 the North line of said Section 18, Township 48 South, Range
 107 41 East, Broward County, Florida.

108
 109 Said lands lying and situate in the City of Coral Springs,
 110 Broward County, Florida, containing 5533.5 acres, more or
 111 less.

112 Section 3. Provisions of Chapter 298, Florida Statutes,
 113 Made Applicable.-The Sunshine Water Control District, a public
 114 corporation of this state, created under chapter 298, Florida
 115 Statutes, shall be governed by chapter 298, Florida Statutes, as
 116 may be subsequently amended, so far as not inconsistent with
 117 this act or any subsequent special acts relating to Sunshine
 118 Water Control District.

119 Section 4. Powers of the District.-The Sunshine Water

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120 Control District shall have in addition to the powers provided
 121 for in chapter 298, Florida Statutes, the power and authority to
 122 construct, improve, pave and maintain roadways and roads
 123 necessary and convenient to provide access to and efficient
 124 development of areas made suitable and available for the
 125 cultivation, settlement, urban subdivision, homesites and other
 126 beneficial use and development as a result of the drainage and
 127 reclamation operations of the district, including any dedicated
 128 to public use within the boundaries of the district.

129 Section 5. Levy of Taxes on Fractional Acres.-In levying
 130 and assessing all taxes, each tract or parcel of land less than
 131 one acre in area shall be assessed as a full acre, and each
 132 tract or parcel of land more than one acre in area which
 133 contains a fraction of an acre shall be assessed at the nearest
 134 whole number of acres, a fraction of one-half or more to be
 135 assessed as a full acre.

136 Section 6. Application to Existing District, Boundaries,
 137 Plan of Reclamation and Drainage, etc.-The powers hereinabove
 138 vested in the Board of Supervisors of Sunshine Water Control
 139 District shall apply to the presently existing district, the
 140 presently existing boundaries thereof or as the boundaries may
 141 be extended as authorized by law, and the present plan of
 142 reclamation and drainage together with any assessment of
 143 benefits which may be approved by law, and the boundaries of

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YEAR

144 said district and the plan of reclamation and drainage and the
 145 assessment and levying of taxes for carrying out said plan of
 146 reclamation and drainage and for the maintenance and operation
 147 thereof, may be changed in whole or in part as units, or, with
 148 reference to the entire district, in accordance with the
 149 provisions of chapter 298, Florida Statutes, and this act.

150 Section 7. Severability.-In case any one or more of the
 151 sections or provisions of this act or the application of such
 152 sections or provisions to any situations, circumstances or
 153 person shall for any reason be held to be unconstitutional, such
 154 unconstitutionality shall not affect any other sections or
 155 provisions of this act or the applications of such sections or
 156 provisions to any other situation, circumstances or person, and
 157 it is intended that this law shall be construed and applied as
 158 if such section or provision had not been included herein for
 159 any unconstitutional application.

160 Section 8. Effect of Conflict.-In the event of a conflict
 161 between the provisions of this act and the provisions of any
 162 other act, the provisions of this act shall control to the
 163 extent of such conflict.

164 Section 9. (1) Prior to November 5, 2024, the district is
 165 governed by a three-member board, elected on a 1-acre, one-vote
 166 basis by the landowners in the district. However, landowners
 167 owning less than 1 acre shall be entitled to one vote.

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168 Landowners with more than 1 acre shall be entitled to 1
 169 additional acre for any fraction of an acre owned when all
 170 acreage has been aggregated for purposes of voting. The
 171 procedures for conducting district elections and for
 172 qualification of electors shall be pursuant to chapters 189 and
 173 298, Florida Statutes, as they may be amended from time to time.
 174 However, a quorum for purposes of holding the annual meeting or
 175 any special meeting shall consist of those landowners present in
 176 person or represented by proxy at the meeting. The membership
 177 and organization of the board shall be as set forth in this act
 178 and chapter 298, Florida Statutes, as they may be amended from
 179 time to time.

180 (2) As of November 5, 2024, the Board of Supervisors shall
 181 consist of five members.

182 (3) Notwithstanding any provision of law to the contrary,
 183 members of the Board of Supervisors shall be elected by the
 184 qualified electors of the district. Election of board members by
 185 the qualified electors shall be the exclusive method for the
 186 election of the members of the Board of Supervisors.

187 (4) The Board of Supervisors shall call an election at
 188 which the members of the board will be elected. Such election
 189 shall be held in conjunction with the general election in
 190 November 2024. Candidates may qualify for the offices of Board
 191 of Supervisors, which shall be designated as seat 1, seat 2,

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192 seat 3, seat 4, and seat 5, each elected at large within the
 193 district. A candidate qualifying for election must be an elector
 194 and resident of the district. Each board member shall be elected
 195 by the qualified electors of the district for a term of 4 years,
 196 except that, at the first such election, the three members
 197 elected to seat 1, seat 2, and seat 3 shall be elected for terms
 198 of 4 years each, and the two members elected to seat 4 and seat
 199 5 shall be elected for terms of 2 years each. Thereafter, there
 200 shall be an election held every 2 years for expiring terms and
 201 all members shall be elected for terms of 4 years each. The
 202 candidate receiving the most votes for each seat shall be
 203 elected. All elected board members must be qualified electors of
 204 the district. Members of the Board of Supervisors as of October
 205 1, 2023, shall serve until the certification of the November
 206 2024 general election results.

207 (5) Elections of board members by qualified electors held
 208 pursuant to this section shall be nonpartisan and shall be
 209 conducted in a manner prescribed by law for holding general
 210 elections. Board members shall assume the office on the second
 211 Tuesday following their election.

212 (6) Candidates seeking election to office by qualified
 213 electors under this subsection shall conduct their campaigns in
 214 accordance with the provisions of chapter 106, Florida Statutes,
 215 and shall file qualifying papers and qualify for individual

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216 seats in accordance with section 99.061, Florida Statutes.
 217 Candidates shall pay a qualifying fee, which shall consist of a
 218 filing fee and election assessment or, as an alternative, shall
 219 file a petition signed by not less than 1 percent of the
 220 qualified electors of the district, and take the oath required
 221 in section 99.021, Florida Statutes, with the Supervisor of
 222 Elections of Broward County. The amount of the filing fee is 3
 223 percent of the annual salary of the office. The amount of the
 224 election assessment is 1 percent of the annual salary of the
 225 office. The filing fee and election assessment shall be
 226 distributed as provided in section 105.031(3), Florida Statutes.

227 (7) The Supervisor of Elections of Broward County shall
 228 appoint the inspector and clerks of elections, prepare and
 229 furnish the ballots, designate polling places, and canvass the
 230 returns of the election of board members by qualified electors.
 231 The county canvassing board shall declare and certify the
 232 results of the election.

233 (8) The terms "qualified elector" and "elector" mean any
 234 person at least 18 years of age who is a citizen of the United
 235 States, a permanent resident of the state, and a resident of the
 236 county within which the district lands are location when the
 237 registration books are open.

238 Section 3. The provisions of this Act shall be liberally
 239 construed to effect their purposes and shall be deemed

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BILL

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240 cumulative, supplemental and alternative authority for the
 241 exercise of the powers provided herein.

242 Section 4. Chapters 67-764 and 2021-255, Laws of Florida,
 243 and the decree in chancery No. 62-4596-F entered by the Circuit
 244 Court in and for the Fifteenth Judicial Circuit of the State of
 245 Florida on January 23, 1963, creating and incorporating the
 246 Sunshine Water Control District as a public corporation of the
 247 State of Florida, are repealed.

248 Section 5. Notwithstanding section 189.0311(2), Florida
 249 Statutes, the Sunshine Water Control District is not dissolved
 250 as of June 1, 2023, but continues in full force and effect.

251 Section 6. This act shall take effect upon becoming a law.

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V

HOUSE OF REPRESENTATIVES
LOCAL BILL ECONOMIC IMPACT STATEMENT FORM

Read all instructions carefully.

The House local bill policy prohibits a local bill from being considered by a committee or a subcommittee without an Economic Impact Statement. This form must be prepared by an individual who is qualified to establish fiscal data and impacts and has personal knowledge of the information given (for example, a chief financial officer of a local government) and include information for the first two full fiscal years after the effective date of the local bill. Please file this completed form with the Clerk of the House as soon as possible after a local bill is filed. Additional pages may be attached as necessary.

BILL #: _____
SPONSOR(S): Rep. Dan Daley
RELATING TO: Sunshine Water Control District, Broward County
[Indicate area affected (city, county, or special district) and subject]

Check if this is a revised Economic Impact Statement

I. REVENUES:

These figures are new revenues in the first two full fiscal years after the effective date of the bill that would not otherwise exist but for the passage of the bill. The term "revenue" contemplates, but is not limited to, taxes, fees, and special assessments. For example, license plate fees may be a revenue source. If the bill will add or remove property or individuals from the tax base, include this information as well.

	<u>First FY</u>	<u>Second FY</u>
Revenue decrease due to bill:	\$ <u>0</u>	\$ <u>0</u>
Revenue increase due to bill:	\$ <u>0</u>	\$ <u>0</u>

II. COST:

Include all costs, both direct and indirect, including start-up costs, in the first two full fiscal years after the effective date of the bill. If the bill repeals the existence of a certain entity, state the related costs, such as satisfying liabilities and distributing assets.

Expenditures for implementation, administration, and enforcement:

<u>First FY</u>	<u>Second FY</u>
\$ <u>0</u>	\$ <u>0</u>

Please include explanations and calculations regarding how each dollar figure was determined in reaching total cost.

The bill simply ratifies, confirms and approves the continuation of the District and will
_____ have no impact on district revenues or expenses.

III. FUNDING SOURCE(S):

State the specific sources from which funding will be received, for example, license plate fees, state funds, borrowed funds, or special assessments. If certain funding changes are anticipated to occur beyond the first two full fiscal years after the effective date of the bill, explain the change and at what rate taxes, fees, or assessments will be collected in those years.

	<u>First FY</u>	<u>Second FY</u>
Local:	\$ <u>0</u>	\$ <u>0</u>
Not applicable		

State:	\$ <u>0</u>	\$ <u>0</u>
Not applicable		

Federal:	\$ <u>0</u>	\$ <u>0</u>
Not applicable.		

IV. ECONOMIC IMPACT:

Potential advantages:

Include all possible outcomes linked to the bill, such as increased efficiencies, and positive or negative changes to tax revenue. If an act is being repealed or an entity dissolved, include the increased or decreased efficiencies caused thereby. Include specific figures for anticipated job growth.

1. Advantages to individuals: Individuals will continue to receive service from the District without interruption.
2. Advantages to businesses: Businesses will continue to receive service from the district without interruption.
3. Advantages to government: Continuation of the district will negate the need to transfer duties and obligations, including debt, to another government entity.

Potential disadvantages:

Include all possible outcomes linked to the bill, such as inefficiencies, shortages, or market changes anticipated. Include reduced business opportunities, such as reduced access to capital or training, and state any decreases in tax revenue as a result of the bill.

1. Disadvantages to Individuals: None.

2. Disadvantages to Businesses: None.

3. Disadvantages to Government: None.

V. DESCRIBE THE POTENTIAL IMPACT OF THE BILL ON PRESENT GOVERNMENTAL SERVICES:

There would be no potential impact on present governmental services as the bill simply provides for continuation of the District.

VI. SPECIFIC DATA USED IN REACHING ESTIMATES:

Include the type(s) and source(s) of data used, percentages, dollar figures, all assumptions made, history of the industry/issue affected by the bill, and any audits.

Years of experience representing special districts and consultation with legal counsel.

**SUNSHINE
WATER CONTROL DISTRICT**

**STAFF
REPORTS
BI**

November 30, 2022

Board of Supervisors
Sunshine Water Control District
2300 Glades Road, Suite 410W
Boca Raton, Florida 33073

**RE: SUNSHINE WATER CONTROL DISTRICT - MONTHLY ENGINEER'S REPORT (MER)
(November 9, 2022 & December 7, 2022 Board Meetings)
November 2, 2022 – November 30, 2022
CAS PROJECT NO. 15-1826**

Dear Board of Supervisors:

Craig A. Smith & Associates, Inc. (CAS) is pleased to provide you with the MER summarizing activity performed by our team on behalf of SWCD during the referenced period including future work. This report represents updated activities from last month's postponed meeting as well as new activities for the upcoming meeting. Anything of significance or modifications occurring after this writing will be brought up at the December 7, 2022 BOS meeting.

Electrical Repairs at Pump Station Nos. 1 and 2

Current Connections Inc continues to work on the building permit for the foundation work at PS2.

West Outfall Canal Phase 2B Improvements & Work at PS1

1. CAS WOFC survey work for slope verification is complete at the location where resident claimed slopes are steeper than 4:1 (hor:ver). Slopes were taken at five locations near where the resident claimed to be steeper than 4:1; between 100 ft to 200 ft upstream of PS2. Slopes were surveyed from nearly waters' edge up to the canal top of bank and no slope was found to be in substantial deviation, i.e., steeper than 3.5:1 in accordance with the South Florida Water Management District Permit Information Manual Vol IV (5/2016) which is applied to lakes and not canals. Slopes were within tolerance levels as shown in the attached survey.
2. Radise International design plans for the intake bay at PS1 are completed and are attached to this report.
3. CAS canal survey work at PS1 is completed. CAS is working on plans for limited canal work upstream of the station entailing the installation of a Fabriform revetment system (see Figure 1) between the current pump station and location of the old pump station to be installed at canal bottom.



561.314.4445



21045 Commercial Trail
Boca Raton, FL 33486



Figure 1



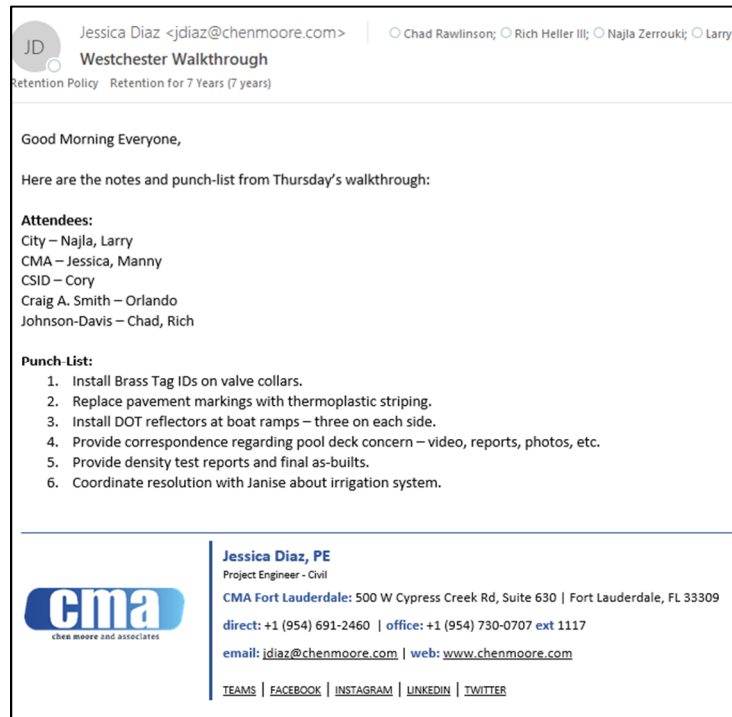
4. Plans are being developed for installation of the revetment system at the WOFC canal slopes to improve slope stability and minimize maintenance. This will extend approximately 80 feet upstream the pump station.
5. Radise International design plans for WOFC canal improvements at Riverside Dr are under development. Preliminary plans are being worked and coordination with Broward County Highway Engineering has been made.

CAS has requested a price proposal from Rio-Bak Corporation (RBC) to perform the necessary construction for items 2-4. RBC is currently under contract with the SWCD to perform canal related work.

Culvert Replacement – NW 24th St (Westchester Blvd)

A project walk-through took place on November 3, 2022 at 1 PM between the City, SWCD, CMA-Engineer of Record, and the contractor; Johnson-Davis, Inc. A punch list was developed (see Figure 2). On November 17, 2022, we received the requested field density tests which demonstrated the installation of the culverts passed the soil compaction requirements. As-built plans have been submitted and we are awaiting the engineer's final certification.

Figure 2



Right-of-Way Permits

The following applications are recommended for approval or are under review as noted:

- Project Site: near 4084 Coral Springs Dr; Crossing under Canal “GG” via directional bore of ~170 LF of 3” Flex Pipe by AT&T Florida
- Project Site: Coral Springs Dr Bridge and West Outfall Canal; Bridge deck repair by Broward County Board of County Commissioners.
- Amera Downtown Development Co., LLC – Sample Road and University Drive: Application submittal has been received and review comments have been sent to engineer of record.
- Drainage as-builts have been submitted for the Corporate Park Area under SWCD Permit No. 2020-10 are under review.

As always, we continue to look forward to working with the SWCD staff on current and future important projects. Should there be any questions, I can be reached at the letterhead numbers shown or by electronic mail at orubio@craigasmith.com.

Sincerely,

CRAIG A. SMITH & ASSOCIATES

A handwritten signature in blue ink, appearing to read 'Orlando A. Rubio', is positioned above the name and title.

Orlando A. Rubio, PE
VP of Stormwater Engineering

Enclosures: CAS Slope Survey of WOFC
ROW Permit Recommendations (2)

cc: **SWCD** - Cory Selchan, John McKune, PE (via e-mail)
WHA - Jamie Sanchez, Cindy Cerbone, Debbie Tudor, Daphne Gillyard, Andrew Kantarzi, Gianna Denofrio, Caryn Kupiec (via e-mail)
CAS - Steve C. Smith, PE, (via e-mail)

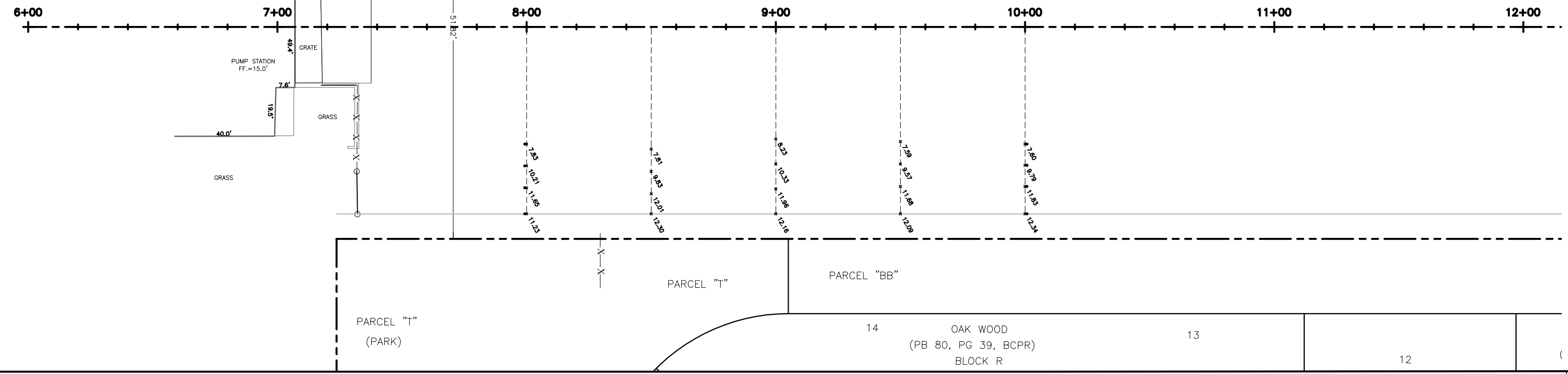
\\cas-file\projects\districts\sunshine_water_control\monthly engineers reports\2022mer\2022-12\swcd-monthlyrpt-2022-11-29.docx

UNPLATTED
PORTION OF SEC 32,
TWS 48S, RGN 41E



0 10 20 40
HORIZONTAL GRAPHIC SCALE
24" X 36" SCALE: 1" = 20'-0"
11" X 17" SCALE: 1" = 40'-0"

SUNSHINE WATER CONTROL DISTRICT
WEST OUTFALL CANAL
(170' RIGHT-OF-WAY)



LOCATION MAP
SCALE: N.T.S.



- SURVEYOR'S NOTES:**
1. REPRODUCTIONS OF THIS SURVEY ARE NOT VALID WITHOUT THE SIGNATURE AND ORIGINAL RAISED SEAL OF A FLORIDA LICENSED SURVEYOR AND MAPPER.
 2. NO SEARCH OF THE PUBLIC RECORDS WAS PERFORMED BY THIS FIRM IN THE MAKING OF THIS SURVEY. THERE MAY EXIST EASEMENTS, RESTRICTIONS, RIGHTS OF WAY, ETC., WHICH APPEAR IN THE PUBLIC RECORDS, OR THAT ARE BASED ON UNDOCUMENTED AND/OR UNRECORDED AGREEMENTS, WHICH AFFECT THIS SURVEY.
 3. ELEVATIONS SHOWN HEREON ARE RELATIVE TO NATIONAL GEODETIC VERTICAL DATUM OF 1929 (NGVD '29) AND ARE BASED ON BROWARD COUNTY PUBLISHED BENCHMARK 2277 (ELEVATION = 13.536).
 4. THE CANAL RIGHT-OF-WAY SHOWN HEREON IS BASED ON PLAT INFORMATION (AS REFERENCED) AND PHYSICAL MONUMENTATION AS AVAILABLE. A "BEST FIT" APPROACH WAS TAKEN FOR THE PLACEMENT OF SAID RIGHT-OF-WAY ON THE SURVEY.
 5. THE EXISTENCE OF UNDERGROUND IMPROVEMENTS, I.E. FOOTINGS, UTILITIES, DRAINAGE, UTILITIES ETC. NOT VISIBLE TO THE SURVEYOR IS UNKNOWN AND NOT ADDRESSED PER THIS SURVEY.
 6. THE ACCURACY OF THIS SURVEY IS PREMISED ON THE EXPECTED USE OF THE SURVEY. THE PREMISE/EXPECTED USE OF THE SURVEY IS TO VERIFY LAKE SLOPE RATIOS IN THE AREAS REQUESTED.
 7. DIMENSIONS AND ELEVATIONS SHOWN HEREON ARE IN ACCORDANCE WITH THE UNITED STATES STANDARDS USING FEET AND DECIMALS THEREOF.
 8. THE SURVEY LEGEND IS A COMPREHENSIVE LIST OF STANDARDS AND IS NOT JOB SPECIFIC.
 9. ALL SYMBOLS SHOWN ARE FOR REPRESENTATION PURPOSES ONLY AND ARE NOT TO SCALE.

GENERAL ABBREVIATIONS

ABRV	DESCRIPTION
CL	CENTER LINE
CONC	CONCRETE
(D)	DEED/DESCRIPTION
ELEV	ELEVATION
EP	EDGE OF PAVEMENT
FF	FINISHED FLOOR
FND	FOUND
GE	GRATE ELEVATION
IE	INVERT ELEVATION
IR	IRON ROD
IRC	IRON ROD AND CAP
IP	IRON PIPE
LB	LICENSED BUSINESS
(M)	MEASURED
MND	MAGNETIC NAIL AND DISC
ORB	OFFICIAL RECORDS BOOK
(P)	PLAT
PB	PLAT BOOK
PG	PAGE
R/W	RIGHT OF WAY
PBCR	PALM BEACH COUNTY RECORDS
26-45-89	SECTION-TOWNSHIP-RANGE

STANDARD LINETYPES

SYMBOL	DESCRIPTION
—	LOT LINE
---	RIGHT OF WAY LINE
- - - - -	CENTER LINE
-X-X-X-X-X-X-X-	FENCE LINE

DIGITAL SIGNATURE

IF THIS DOCUMENT WAS DIGITALLY SIGNED BY THE SURVEYOR ON THE DATE SHOWN, PRINTED COPIES OF THE DOCUMENT ARE NOT CONSIDERED SIGNED AND SEALED AND THE DIGITAL SIGNATURE MUST BE VERIFIED ON ANY ELECTRONIC COPIES.

SURVEYORS CERTIFICATE:

I HEREBY CERTIFY THAT THIS SURVEY IS ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF AND MEETS APPLICABLE SECTIONS OF THE STANDARDS OF PRACTICE AS SET FORTH BY THE FLORIDA BOARD OF PROFESSIONAL SURVEYORS AND MAPPERS IN CHAPTER 5J-17, FLORIDA ADMINISTRATIVE CODE, PURSUANT TO SECTION 472.027, FLORIDA STATUTES, SUBJECT TO QUALIFICATIONS NOTED HEREON.

FOR THE FIRM BY: _____
ROBERT D. KEENER
PROFESSIONAL SURVEYOR & MAPPER
FLORIDA REGISTRATION NO. 4846

FIELD DATE: 10/25/22

SIGNATURE DATE: _____

P:\Projects\Sunshine_Water_Control\08-22-038-V-01-SVRY.dwg, 11/1/2022 2:20:36 PM, omamrifo, 1:2

NO.	DATE	FB / PG	DWN	REVISION	CKD
1	11/01/22	143/01	SEE	MAP OF SPECIFIC PURPOSE SURVEY	RDK

PREPARED FOR
SUNSHINE WATER CONTROL DISTRICT

CRAIG A. SMITH & ASSOCIATES
CONSULTING ENGINEERS-PLANNERS-SURVEYORS
21045 COMMERCIAL TRAIL
BOCA RATON, FLORIDA 33486
(561) 314-4445
CERTIFICATE NO. LB0003110

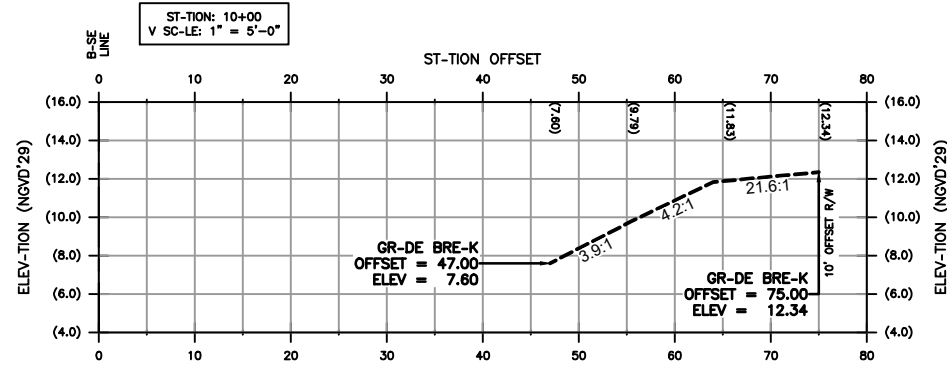
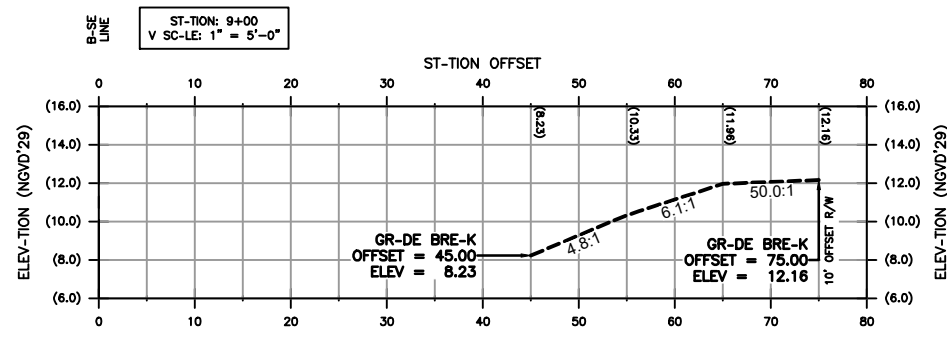
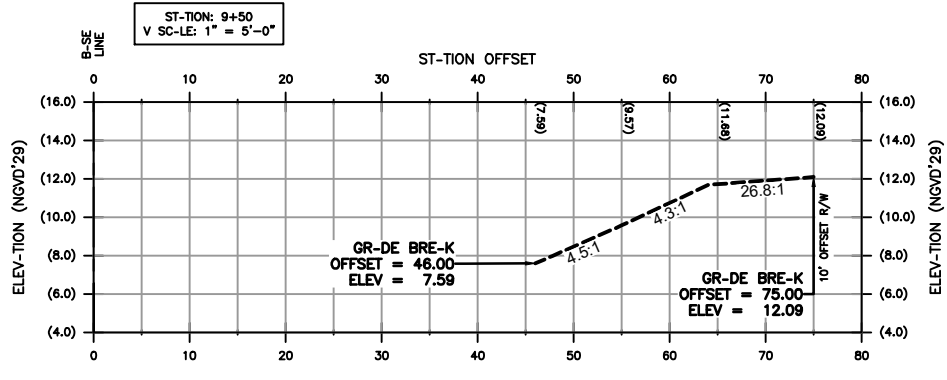
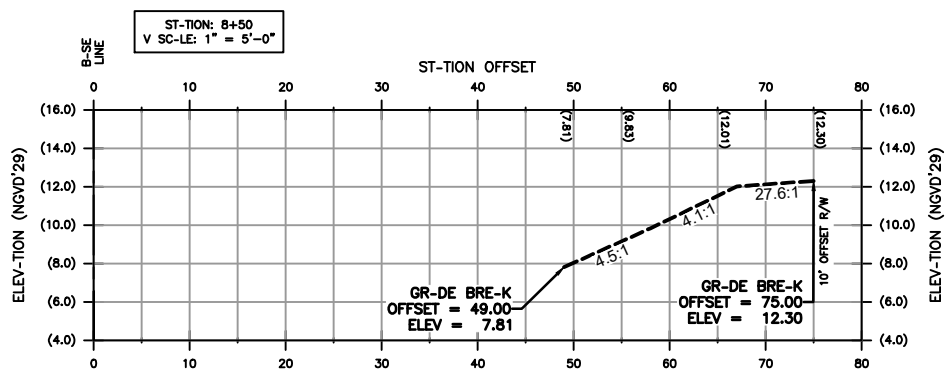
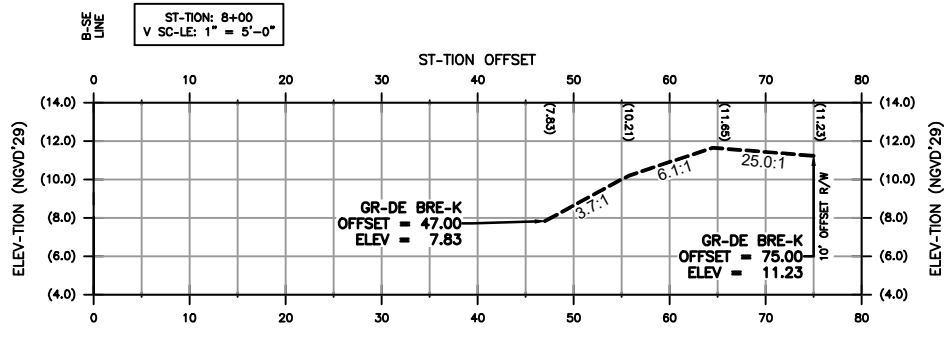
MAP OF SPECIFIC PURPOSE SURVEY

SUNSHINE WATER CONTROL DISTRICT WEST OUTFALL CANAL PHASE 2

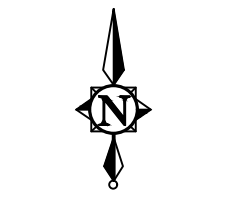
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LAST SAVED: 11/01/22 - 2:19pm
GAS PROJECT NUMBER
08-22-038

SHEET
V-01
OF
02

P:\Projects\Sunshine_Water_Control\08-22-038-V-02-X-SEC-5\SURVEY.dwg, 11/1/2022 1:45:28 PM, onetwof, 1:2



CROSS-SECTION LEGEND:
V = VERTIC-L
N.G.V.D '29 = N-TION-L GEODETIC
VERTIC-L D-TUM OF 1929.
(7.81) = EXISTING ELEV-TION
6.1:1 = SIDE SLOPE R-TIO



0 10 20 40
HORIZONT-L GR-PHIC SC-LE
24" X 36" SC-LE: 1" = 20'-0"
11" X 17" SC-LE: 1" = 40'-0"

0 2.5 5 10
VERTIC-L GR-PHIC SC-LE
24" X 36" SC-LE: 1" = 05'-0"
11" X 17" SC-LE: 1" = 10'-0"

SECTION VIEW

NO.	DATE	FB / PG	DWN	REVISION	CKD
1	11/01/22	143/01	SEE	M-P OF SPECIFIC PURPOSE SURVEY	RDK

PREPARED FOR
SUNSHINE WATER CONTROL DISTRICT

CRAIG A. SMITH & ASSOCIATES
CONSULTING ENGINEERS-PLANNERS-SURVEYORS
21045 COMMERCIAL TRAIL
BOCA RATON, FLORIDA 33486
(561) 314-4445
CERTIFIC-TE. NO. LB0003110

MAP OF SPECIFIC PURPOSE SURVEY

SUNSHINE WATER CONTROL DISTRICT WEST OUTFALL CANAL PHASE 2
CROSS-SECTION VIEWS

FILE N- E: 08-22-038-V-02-X-SEC-5 SURVEY.dwg
L-ST S- ED: 11/01/22 - 1:44pm
GAS PROJECT NUMBER
08-22-038

V-02
OF
02

**SUNSHINE
WATER CONTROL DISTRICT**

**STAFF
REPORTS
BIIa**



October 20, 2022

Board of Supervisors
Sunshine Water Control District
2300 Glades Road, Suite 410W
Boca Raton, Florida 33073

**RE: SWCD RIGHT-OF-WAY (ROW) PERMIT APPLICATION –
Crossing under Canal “GG” via directional bore of ~170 LF of 3” Flex Pipe
Owner: AT&T Florida
Project Site: near 4084 Coral Springs Dr
CAS PROJECT NO. 15-1826**

Dear Board of Supervisors:

We have reviewed a ROW permit application submitted by AT&T Florida Canal for the directional bore under SWCD Canal “GG”. The applicant has met SWCD applicable criteria and we recommend that the SWCD Board of Supervisors issue a Right-of-Way Permit to the applicant, subject to the following Special Conditions to be made part of the Permit:

1. All work must be in compliance with the latest SWCD Permit Criteria Manual.
2. Permittee will ensure that all necessary Sediment & Erosion Control devices will be utilized at the SWCD right-of-way during construction.
3. Trash bond (\$2,500) shall be submitted prior to permit issuance and the Contractor shall repair and replace any SWCD facilities damaged during construction at no cost to the District.
4. A copy of Record As-builts and Engineer Certification shall be provided to SWCD upon completion of all work.
5. All applicable permits and approvals for Work shall be obtained.
6. All disturbed areas are to be restored.
7. SWCD shall be notified at least 48 hours prior to construction.

Sincerely,

CRAIG A. SMITH & ASSOCIATES

Orlando A. Rubio, PE
VP of Stormwater Engineering

cc: SWCD – Cory Selchan, Field Superintendent (via e-mail)
WHA - Cindy Cerbone, Debbie Tudor, Daphne Gillyard, Jamie Sanchez, Gianna Denofrio (via e-mail)
CAS – Stephen C. Smith, PE, (via e-mail)

\\cas-file\Projects\Districts\Sunshine_Water_Control\19-2064-1CP-SWCD Non recovery\01-RIGHT-OF-WAY\2022\15-1826-ATT4084CSD\04-Correspondence\02-Letters\SWCD-ATT-4084-2022.10.20.docx



561.314.4445

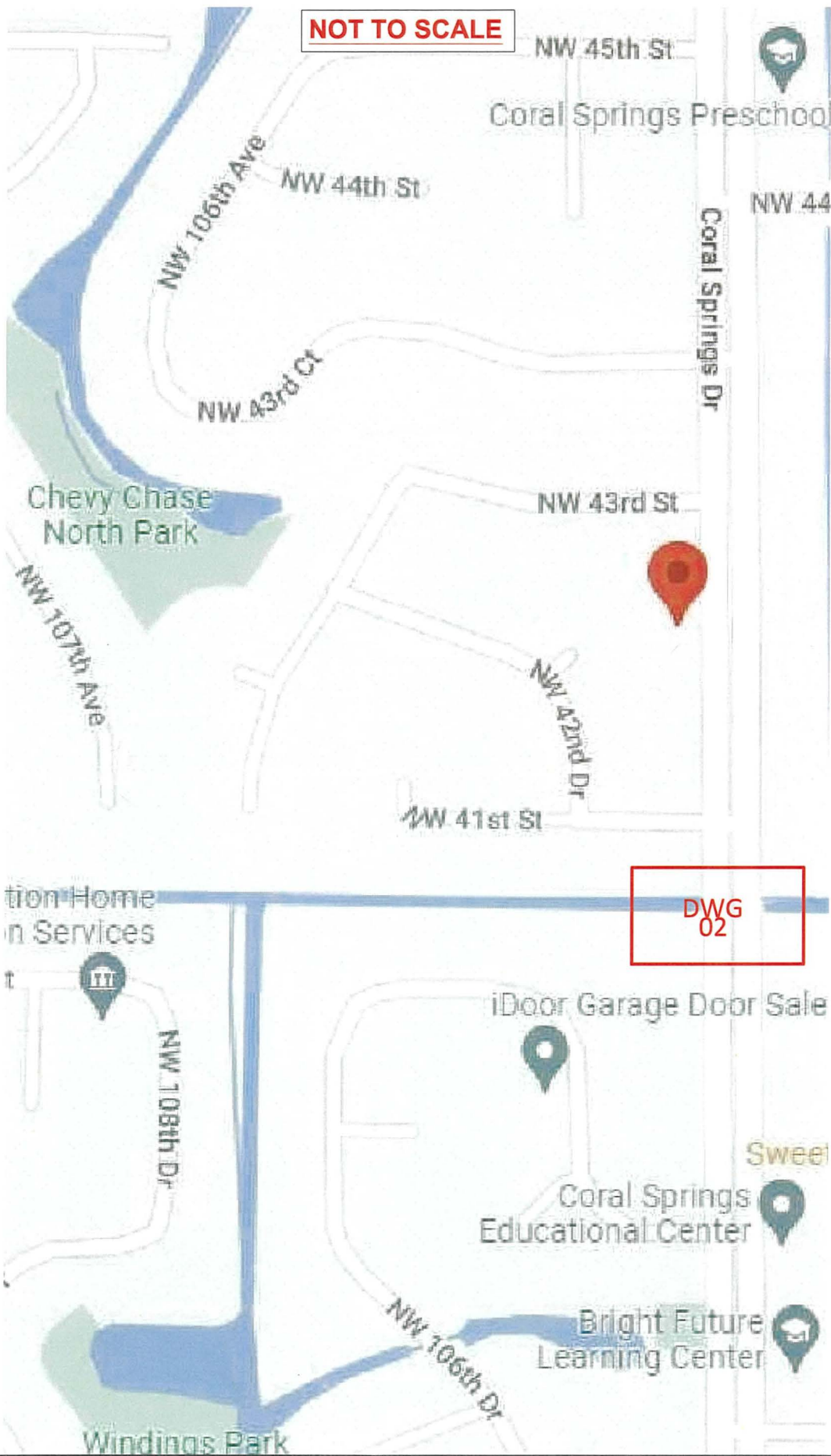


21045 Commercial Trail
Boca Raton, FL 33486

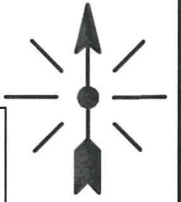


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VICINITY MAP



GENERAL NOTES



811 Know what's below
Call before you dig

LEGEND

SS	SS	SANITARY
SD	SD	STORM
W	W	WATER
C	C	COMMUNICATIONS
E	E	ELECTRIC
G	G	GAS
R/W		RIGHT OF WAY
P/L		PROPERTY LINE
UE		UTILITY EASEMENT
		EDGE OF PAVEMENT
C/L		CENTER LINE
D/W		DRIVEWAY
SWK		SIDE WALK
○		SANITARY MANHOLE
⊙		SANITARY VALVE
⊗		STORM SEWER MANHOLE
⊕		STORM INLET
⊖		WATER MANHOLE
⊗		WATER VALVE
⊕		WATER METER
⊖		FIRE HYDRANT
□		COMMUNICATION PEDESTAL
⊞		AT&T MANHOLE
⊞		COMMUNICATION HANDHOLE
⊞		ELECTRIC CONCRETE POLE
⊞		ELECTRIC WOOD POLE
⊞		STREET LIGHT
⊞		FPL HANDHOLE
⊞		ELECTRIC MANHOLE
⊞		TRAFFIC LIGHT
⊞		TRAFFIC SIGNAL
⊞		GAS VALVE

CONSTRUCTION NOTES AND SPECIFICATIONS:

- RESTORATION TO COMPLY WITH CITY, COUNTY, AND STATE SPECIFICATIONS AND BSP 622-300-200.
- RESTORE OR RELOCATE SHRUBBERY, TREES, SOD, SPRINKLER SYSTEM PUMPS AND ASSOCIATED PIPES TO ORIGINAL CONDITION.
- RESTORE PAVEMENT, CURBS AND SIDEWALKS TO ORIGINAL CONDITION OR BETTER, IN ACCORDANCE WITH STATE & MUNICIPAL REQUIREMENTS. ALL SIDEWALKS MUST BE REPLACED WITH CONCRETE (NOT ASPHALT) AND 6" FOR CONNECTORS AND DRIVEWAYS.

NOTE:
 - EQUAL OR BETTER MEANS IN COMPLIANCE.
 - CONNECTORS MUST HAVE DETECTABLE WARNING SURFACES (DWS).
 - RESTORATION FOR SIDEWALKS SHALL BE IN COMPLIANCE WITH ADA TITLE II MANDATES.

- TYPES AND INSIDE DIMENSIONS OF HANDHOLES ARE SHOWN AT HANDHOLE LOCATIONS.
- EXISTING UTILITY LOCATIONS HAVE BEEN TAKEN PRIMARILY FROM UTILITY OWNER OR GOVERNMENT RECORDS. NO GUARANTEE IS MADE OF THE CERTAINTY OF THESE LOCATIONS AND THE CONTRACTOR MUST VERIFY ALL LOCATIONS IN THE FIELD.
- MINIMUM SEPARATION FROM FOREIGN UTILITIES SHALL BE 12" PARALLEL AND 6" PERPENDICULAR.
- FOLLOW MIAMI-DADE COUNTY MOT STANDARD R19.5 DURING THE ROAD CLOSURES.
- ANY FLAG NEXT TO THE TRENCHING SITES, MUST BE REPLACED IF DAMAGED BEFORE OR DURING CONSTRUCTION

SAFETY RULES:

- ALL EXISTING BURIED CABLES, UNDERGROUND AND LATERAL CONDUIT MUST BE MAINTAINED UNLESS OTHERWISE SPECIFIED BY ENGINEER OR PLANT CONTRACT SUPERVISOR.
- OBSERVE PRECAUTIONS PER BSP 622-100-010 DURING MANHOLE AND CONDUIT CONSTRUCTION.
- NOTIFY LOCAL TEST CENTER AND LOCATE SUBSCRIBER CABLES BEFORE DIGGING OR BORING. (CHECK FIRST DIG LATER).
- NOTIFY OTHER UTILITIES AND LOCATE UNDERGROUND OBSTRUCTIONS BEFORE DIGGING OR BORING.

CONTRACTOR RESPONSIBLE FOR:

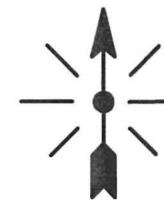
- PROPER BARRICADING AND LIGHTING DURING CONSTRUCTION.
 - VEHICULAR TRAFFIC COORDINATION WITH BROWARD POLICE DEPARTMENT.
- BROWARD COUNTY TRAFFIC CONTROL AND STATE OF FLORIDA, DEPARTMENT OF TRANSPORTATION, TRAFFIC CONTROL.
- SPECIAL NOTE: SUPPORT AND MAINTAIN ALL TRAFFIC CONTROL DEVICES.
 - ANY INTERRUPTED BUS SERVICE MUST BE REPORTED TO BROWARD TRANSIT AT 954-357-8555 PRIOR TO CONSTRUCTION SPECIAL.
- NOTE: SUPPORT AND MAINTAIN ALL TRAFFIC CONTROL DEVICES.

NOTE: MAINTAIN 24" MIN. VERTICAL SEPARATION WHERE CROSSING EXISTING UTILITIES WITH DIRECTIONAL BORE CONDUIT AND MAINTAIN 18' MIN. VERTICAL SEPARATION WHERE CROSSING EXISTING UTILITIES WITH OPEN CUT TRENCH CONDUIT BOTH WHILE MAINTAINING 36" MIN. UTILITY COVER UNDER PAVED TRAVELWAYS AND 30' MIN. UTILITY COVER OTHERWISE.

PERMITS REQUIRED: CHECK ALL THAT APPLY

- SUNSHINE WCD
- MIAMI-DADE COUNTY.
- CORAL SPRINGS CITY
- OTHERS.
- NONE.

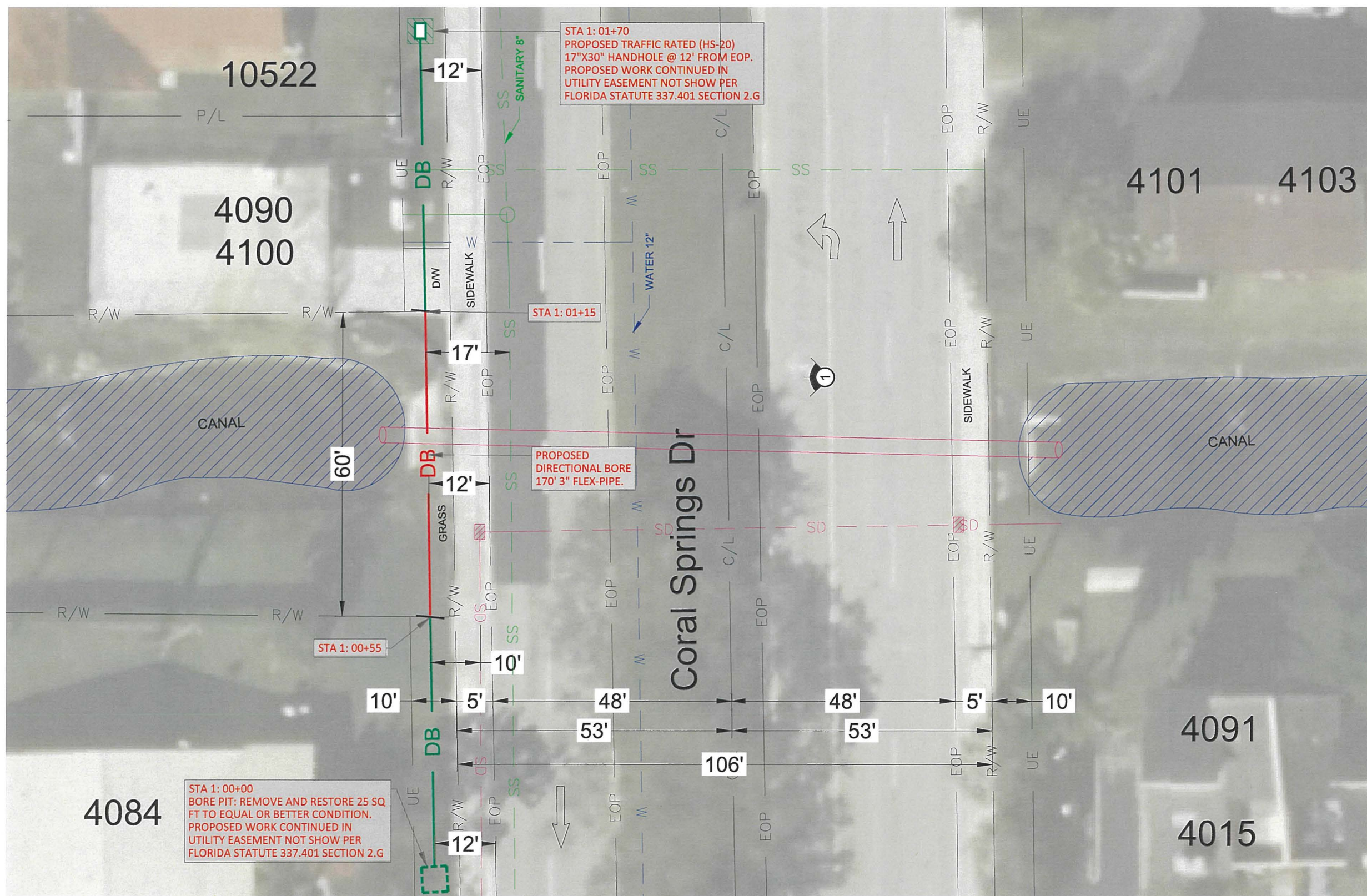
ATTSE	
PROPOSED TELEPHONE FACILITIES ON RIGHT OF WAY OF SUNSHINE WCD	
4084 CORAL SPRINGS DR	
Exchange:	954752
Designer:	PIPALVA, VIVEK
Phone:	954-562-9174
Authorization:	A02CSAP
DWG: 01 OF 02	



SCALE
HORIZONTAL: 1" = 20'
VERTICAL: 1" = 20'

PLAT BOOK: 70 PG: 49

MOT: 102-602, 102-660



STA 1: 01+70
PROPOSED TRAFFIC RATED (HS-20)
17"X30" HANDHOLE @ 12' FROM EOP.
PROPOSED WORK CONTINUED IN
UTILITY EASEMENT NOT SHOW PER
FLORIDA STATUTE 337.401 SECTION 2.G

STA 1: 01+15

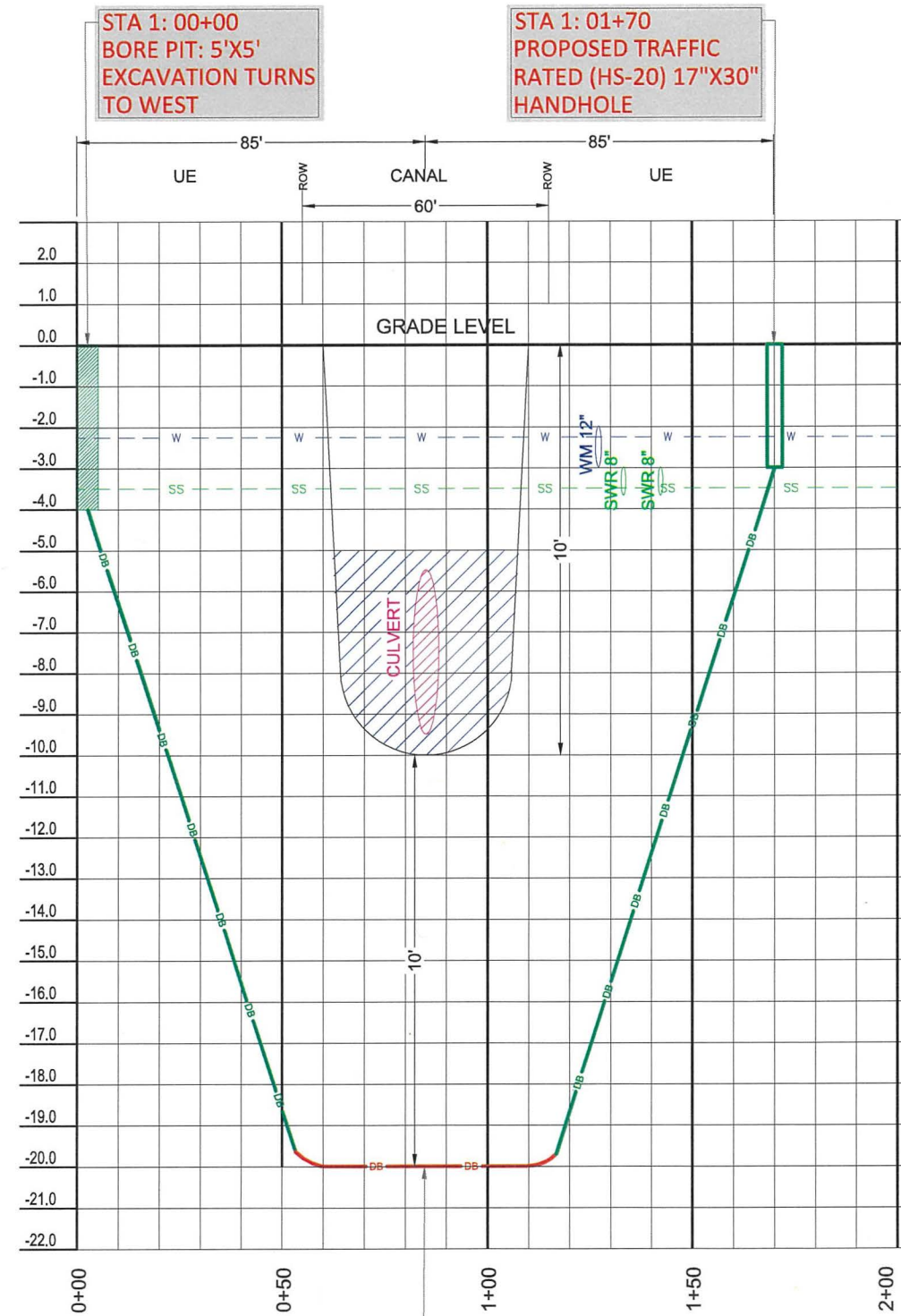
PROPOSED
DIRECTIONAL BORE
170' 3" FLEX-PIPE.

STA 1: 00+55

STA 1: 00+00
BORE PIT: REMOVE AND RESTORE 25 SQ
FT TO EQUAL OR BETTER CONDITION.
PROPOSED WORK CONTINUED IN
UTILITY EASEMENT NOT SHOW PER
FLORIDA STATUTE 337.401 SECTION 2.G

ATTSE	
PROPOSED TELEPHONE FACILITIES ON RIGHT OF WAY OF SUNSHINE WCD	
4084 CORAL SPRINGS DR	
Exchange:	954752
Designer:	PIPALVA, VIVEK
Phone:	954-562-9174
Authorization:	A02CSAP
DWG: 02 OF 02	

PROFILES - ALONG CORAL SPRINGS DR



ENGINEERING RECORDS CITY OF CORAL SPRINGS:
 WATER & SEWER
 REFERENCE DOCUMENT:
 -CHEVY CHASE WATER AND SEWER (034-004 & 034-005)
 DRAINAGE
 REFERENCE DOCUMENT:
 -CHEVY CHASE PAVING AND DRAINAGE (034-013, 034-014 & 034-015)

SCALE
 HORIZONTAL: 1" = 20'
 VERTICAL: 1" = 20'

PLAT BOOK: 70 PG: 49

PROPOSED
 DIRECTIONAL BORE
 170' 1-3" FLEX-PIPE.



ATTSE	
PROPOSED TELEPHONE FACILITIES ON RIGHT OF WAY OF SUNSHINE WCD	
4084 CORAL SPRINGS DR	
Exchange:	954752
Designer:	PIPALVA, VIVEK
Phone:	954-562-9174
Authorization:	A02CSAP
DWG: 02A OF 02	

**SUNSHINE
WATER CONTROL DISTRICT**

**STAFF
REPORTS
BIIb**



October 31, 2022

Board of Supervisors
Sunshine Water Control District
2300 Glades Road, Suite 410W
Boca Raton, Florida 33073

**RE: SWCD RIGHT-OF-WAY (ROW) PERMIT APPLICATION – Bridge Deck Repair at Coral Springs Drive Bridge
Broward County Board of County Commissioners (BCBOCC)
Project Site: West Outfall Canal/Coral Springs Drive Bridge
CAS PROJECT NO. 15-1826**

Dear Board of Supervisors:

We have reviewed a ROW permit application submitted by FG Construction Services, LLC on behalf of the BCBOCC for the proposed repair work at the bridge over the West Outfall Canal. No work is proposed in the canal but work platforms are needed to work under the bridge deck. The applicant has met SWCD applicable criteria and we recommend that the SWCD Board of Supervisors issue a Right-of-Way Permit to the applicant, subject to the following Special Conditions to be made part of the Permit:

1. All work must be in compliance with the latest SWCD Permit Criteria Manual.
2. Permittee will ensure that all necessary Sediment & Erosion Control devices will be utilized at the SWCD right-of-way during construction.
3. Trash bond (\$2,500) shall be submitted prior to permit issuance and the Contractor shall repair and replace any SWCD facilities damaged during construction at no cost to the District.
4. A copy of Record As-builts and Engineer Certification shall be provided to SWCD upon completion of all work.
5. All applicable permits and approvals for Work shall be obtained.
6. All disturbed areas are to be restored.
7. SWCD shall be notified at least 48 hours prior to construction.
8. In the event of a reasonably forecasted severe storm event, all material/equipment shall be removed from the canal right-of-way so as to not impede flow conditions within the West Outfall Canal during SWCD pumping operations.

Sincerely,

CRAIG A. SMITH & ASSOCIATES

Orlando A. Rubio, PE
VP of Stormwater Engineering
Enclosures: Engineering Plans

cc: FGC – Bao Dang, PE (via-email)
WHA - Cindy Cerbone, Debbie Tudor, Daphne Gillyard, Jamie Sanchez, Gianna Denofrio (via e-mail)
SWCD – Cory Selchan, Field Superintendent (via e-mail)
CAS – Stephen C. Smith, PE, (via e-mail)

\\cas-file\Projects\Districts\Sunshine_Water_Control\19-2064-1CP-SWCD Non recovery\01-RIGHT-OF-WAY\2022\15-1826-BC-CSDBridge\04-Correspondence\02-Letters\SWCD-CSD-Bridge_2022.10.31.docx



561.314.4445



21045 Commercial Trail
Boca Raton, FL 33486



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INDEX OF BRIDGE PLANS

SHEET NO. SHEET DESCRIPTION

GENERAL SHEETS

- B-1 KEY SHEET
- B-2 GENERAL NOTES
- B-3 ROADWAY PLAN
- B-4 SIDEWALK RAMPS DETAILS

BRIDGE 864005

- B1-1 SUMMARY OF QUANTITIES & MATERIAL NOTES
- B1-2 PLAN AND ELEVATION
- B1-3 PRESTRESSED SLAB UNIT LAYOUT PLAN
- B1-4 CONSTRUCTION SEQUENCE
- B1-5 TOP OF DECK STRENGTHENING PROCEDURE
- B1-6 UNDERDECK STRENGTHENING PROCEDURE (1 OF 2)
- B1-7 UNDERDECK STRENGTHENING PROCEDURE (2 OF 2)
- B1-8 DECK WATERPROOFING PROCEDURE (1 OF 2)
- B1-9 DECK WATERPROOFING PROCEDURE (2 OF 2)
- B1-10 SPALL AND CRACK REPAIR DETAILS
- B1-11 CONSTRUCTION DETAILS

BRIDGE 864006

- B2-1 SUMMARY OF QUANTITIES & MATERIAL NOTES
- B2-2 PLAN AND ELEVATION
- B2-3 PRESTRESSED SLAB UNIT LAYOUT PLAN
- B2-4 CONSTRUCTION SEQUENCE
- B2-5 TOP OF DECK STRENGTHENING PROCEDURE
- B2-6 UNDERDECK STRENGTHENING PROCEDURE (1 OF 2)
- B2-7 UNDERDECK STRENGTHENING PROCEDURE (2 OF 2)
- B2-8 DECK WATERPROOFING PROCEDURE (1 OF 2)
- B2-9 DECK WATERPROOFING PROCEDURE (2 OF 2)
- B2-10 SPALL AND CRACK REPAIR DETAILS
- B2-11 CONSTRUCTION DETAILS

FDOT INDEX SHEETS

- 102-100 TEMPORARY BARRIER
- 102-613 MULTILANE ROADWAY, LANE CLOSURES
- 102-600 GENERAL INFORMATION FOR TRAFFIC CONTROL THROUGH WORK ZONE
- 415-001 BAR BENDING DETAILS (STEEL)

BROWARD COUNTY

PAVEMENT MARKINGS AND SIGNS DETAILS

GOVERNING STANDARDS AND SPECIFICATIONS:
FLORIDA DEPARTMENT OF TRANSPORTATION,
DESIGN STANDARDS DATED 2022-2023,
AND STANDARD SPECIFICATIONS FOR ROAD AND
BRIDGE CONSTRUCTION DATED 2022,
AS AMENDED BY CONTRACT DOCUMENTS.

REVISIONS
HBMD PROJECT 2022-1-119

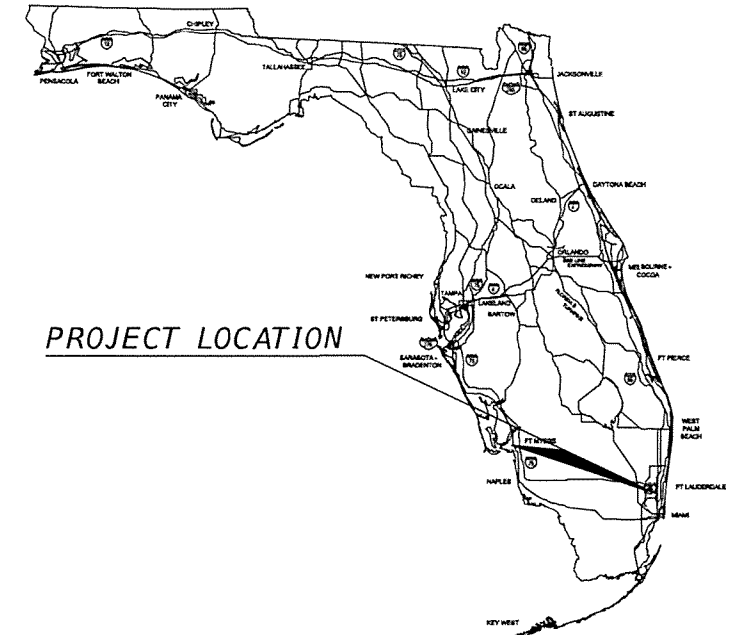
PUBLIC WORKS DEPARTMENT
HIGHWAY AND BRIDGE MAINTENANCE DIVISION

BROWARD COUNTY BOARD OF COUNTY COMMISSIONERS
MARK D. BOGEN LAMAR P. FISHER BEAM FURR STEVE GELLER JARED E. MOSKOWITZ
NAH H. RICH TIM RYAN MICHAEL UDINE

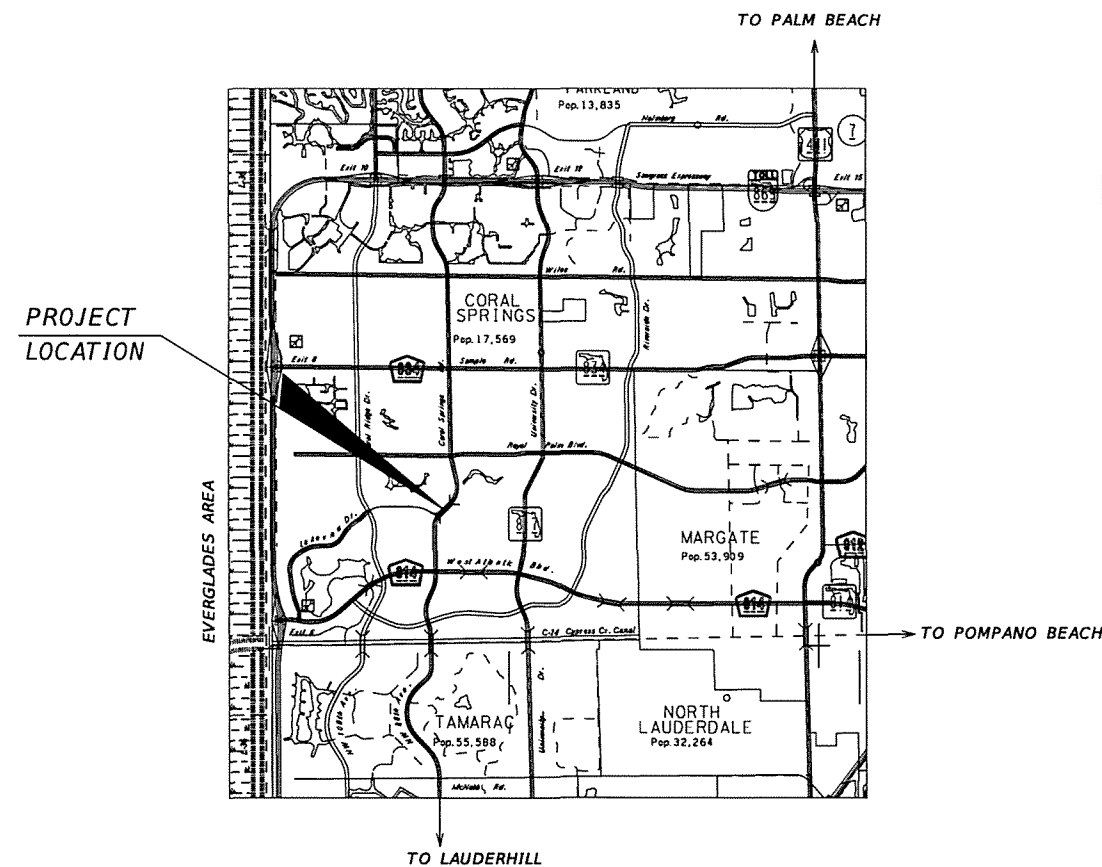
CONTRACT PLANS

CORAL SPRINGS DR. OVER W. OUTFALL CANAL
(Bridges No. 864005 and 864006)

HIGHWAY AND BRIDGE MAINTENANCE DIVISION PROJECT NO. 2022-1-119



PROJECT LOCATION



PLANS PREPARED BY:
BROWARD COUNTY PUBLIC WORKS
HIGHWAY AND BRIDGE MAINTENANCE DIVISION
1600 BLOUNT ROAD, POMPANO BEACH, FL 33069



NOTE: THE SCALE OF THESE PLANS MAY
HAVE CHANGED DUE TO REPRODUCTION.

OCTOBER, 2022

LENGTH OF PROJECT		
	LINEAR FEET	MILES
BRIDGE LENGTH	70	0.01326
NET LENGTH OF PROJECT	70	0.01326
EXCEPTIONS	-	-
GROSS LENGTH OF PROJECT	70	0.01326

KEY SHEET REVISIONS	
DATE	DESCRIPTION

FISCAL YEAR	SHEET NO.
22	B-1

STANDARDS/SPECIFICATIONS:

1. AASHTO LRFD BRIDGE DESIGN SPECIFICATIONS, 9TH EDITION, 2020.
2. FDOT STANDARD SPECIFICATIONS FOR ROAD AND BRIDGE CONSTRUCTION, JANUARY 2022.
3. FDOT STANDARD PLANS FOR BRIDGE CONSTRUCTION, MAY 2022-23.
4. FHWA BRIDGE MAINTENANCE REFERENCE MANUAL, MAY 2015.
5. FDOT BRIDGE LOAD RATING MANUAL, JANUARY 2021.

GENERAL NOTES:

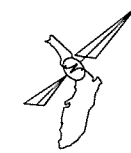
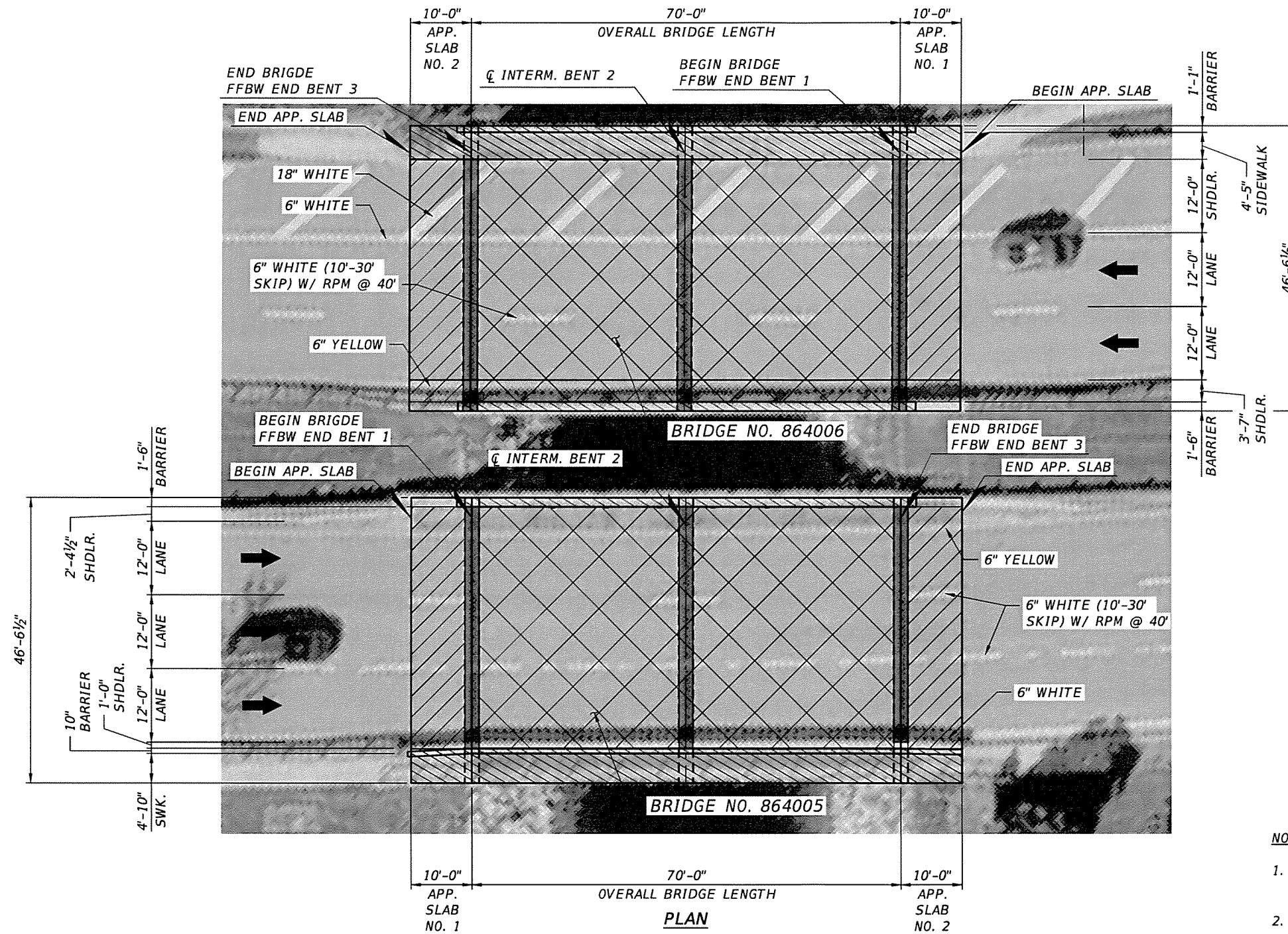
1. UNLESS OTHERWISE NOTED IN THE TECHNICAL SPECIFICATIONS: INSTALLATION, ACCEPTANCE, AND PAYMENT FOR ALL ITEMS REQUIRED IN THESE PLANS SHALL BE IN ACCORDANCE WITH THE CURRENT EDITIONS OF THE FOLLOWING: MANUAL ON UNIFORM TRAFFIC CONTROL DEVICES (MUTCD), FDOT STANDARD SPECIFICATIONS FOR ROAD AND BRIDGE CONSTRUCTION (STANDARD SPECIFICATIONS), FDOT ROADWAY DESIGN STANDARD (STANDARD INDEXES), BROWARD COUNTY MINIMUM STANDARDS, BROWARD COUNTY TRAFFIC ENGINEERING DIVISION STANDARDS AND SPECIFICATIONS, AND ANY OR ALL BROWARD COUNTY REQUIREMENTS THAT MEET OR EXCEED THOSE FOUND IN THE ABOVE REFERENCED DOCUMENTS.
2. EXISTING DRAINAGE STRUCTURES (SCUPPERS, CURB & GUTTERS) WITHIN CONSTRUCTION LIMITS SHALL REMAIN.
3. PORTION OF UTILITIES MAY EXTEND INTO THE CONSTRUCTION ZONE. EXTREME CAUTION WILL BE NECESSARY DURING WORK AT THESE LOCATIONS, ESPECIALLY DURING GUARDRAIL INSTALLATION.
4. ALL STORM LINES AND INLETS AFFECTED BY CONSTRUCTION OR WITHIN CONSTRUCTION LIMITS SHALL BE CLEANED OF DEBRIS BEFORE CONTRACT CLOSEOUT.
5. THE CONTRACTOR IS RESPONSIBLE FOR VERIFYING PROPER DRAINAGE AND GUTTER FLOW LINE WITHIN CONSTRUCTION LIMITS.
6. EROSION AND SEDIMENTATION CONTROL PROTECTION SHALL BE PROVIDED AT ALL INLETS IMPACTED BY THE PROJECT AND BE REMOVED AT THE END OF THE PROJECT. THE CONTRACTOR SHALL BE RESPONSIBLE FOR COMPLIANCE WITH ALL LOCAL, STATE, AND FEDERAL REGULATIONS OF SOUTH FLORIDA WATER MANAGEMENT DISTRICT (SFWMD) AND FDPE (NPDES). SEDIMENT BARRIER TO BE PLACED NEXT TO THE CANAL.
7. THE EXACT LOCATION OF EXISTING UTILITIES SHALL BE DETERMINED IN THE FIELD BY THE CONTRACTOR PRIOR TO BEGINNING ACTUAL CONSTRUCTION. SHOULD THERE BE UTILITY CONFLICTS, THE CONTRACTOR SHALL INFORM THE COUNTY PROJECT ENGINEER AND NOTIFY THE RESPECTIVE UTILITY OWNER TO RESOLVE ANY ADJUSTMENTS. ANY DAMAGES TO EXISTING UTILITIES, WHETHER SHOWN ON THE PLANS OR NOT, SHALL BE REPAIRED BY THE CONTRACTOR AT ITS OWN EXPENSE.
8. THE CONTRACTOR SHALL USE EXTREME CAUTION WHEN INSTALLING AND BACKFILLING AROUND EXISTING UTILITIES.
9. THE CONTRACTOR SHALL NOTIFY UTILITY OWNERS A MINIMUM OF 48 HOURS IN ADVANCE OF BEGINNING CONSTRUCTION ON JOB SITES.
10. ALL EXISTING SIGNALIZATION EQUIPMENT TO REMAIN, IS ASSUMED TO BE IN GOOD WORKING ORDER UNLESS BCTED IS NOTIFIED IN WRITING PRIOR TO THE START OF THE CONSTRUCTION. ANY SUBSEQUENT DAMAGE TO THE SIGNAL EQUIPMENT SHALL BE REPAIRED BY THE CONTRACTOR AT THE CONTRACTOR'S EXPENSE.
11. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE REPAIR AND RESTORATION OF EXISTING PAVEMENT, UTILITIES, LANDSCAPE AREAS, AND ANY OTHER DAMAGED INFRASTRUCTURE AS A RESULT OF THE CONTRACTOR'S OPERATIONS. REPAIRS AND RESTORATION SHALL BE TO ORIGINAL CONDITION OR BETTER AT NO ADDITIONAL COST TO THE COUNTY.
12. THE CONTRACTOR SHALL NOT BRING ANY HAZARDOUS MATERIALS ONTO THE PROJECT. SHOULD THE CONTRACTOR REQUIRE SUCH FOR PERFORMING THE CONTRACTED WORK, THE CONTRACTOR SHALL REQUEST, IN WRITING, WRITTEN PERMISSION FROM THE COUNTY PROJECT ENGINEER. THE CONTRACTOR SHALL PROVIDE THE ENGINEER WITH A COPY OF THE MATERIAL SAFETY DATA SHEET (MSDS) FOR EACH HAZARDOUS MATERIAL PROPOSED FOR USE. THE COUNTY PROJECT ENGINEER SHALL ISSUE WRITTEN APPROVAL TO THE CONTRACTOR. BECAUSE STATE LAW DOES NOT TREAT PETROLEUM PRODUCTS THAT ARE PROPERLY CONTAINERIZED AND INTENDED FOR EQUIPMENT USE AS A HAZARDOUS MATERIAL, SUCH PRODUCTS DO NOT NEED A MSDS SUBMITTAL.
13. ANY KNOWN OR SUSPECTED HAZARDOUS MATERIAL FOUND ON THE PROJECT BY THE CONTRACTOR SHALL BE IMMEDIATELY REPORTED TO THE COUNTY PROJECT ENGINEER, WHO SHALL DIRECT THE CONTRACTOR TO PROTECT THE AREA OF KNOWN OR SUSPECTED CONTAMINATION FROM FURTHER ACCESS. THE COUNTY PROJECT ENGINEER WILL ARRANGE FOR INVESTIGATION, IDENTIFICATION, AND REMEDIATION OF THE HAZARDOUS MATERIAL.

THE CONTRACTOR SHALL NOT RETURN TO THE AREA OF CONTAMINATION UNTIL APPROVAL IS PROVIDED BY THE COUNTY PROJECT ENGINEER. NOTE THAT EXISTING BRIDGE BEARINGS INCLUDE ASBESTOS, HOWEVER, THE SCOPE OF WORK INCLUDED IN THESE PLANS DOES NOT INCLUDE ANY WORK IN CLOSE VICINITY OF THE BEARINGS.

14. ANY SURVEY MONUMENT WITHIN THE LIMITS OF CONSTRUCTION IS TO BE PROTECTED. IF ANY CONFLICT IS ENCOUNTERED, THE CONTRACTOR SHALL NOTIFY:
BROWARD COUNTY HIGHWAY CONSTRUCTION AND ENGINEERING DIVISION
1 N. UNIVERSITY DRIVE, SUITE 200B
PLANTATION, FL 33324-2038
PHONE: (954) 577-4555
15. ALL PERMANENT GRASS AREAS DAMAGED DURING CONSTRUCTION ARE TO RECEIVE A 2-IN TOP SOIL AND SOD TO MATCH EXISTING.
16. ALL TREES, BUSHES OR VEGETATION REMAIN UNLESS OTHERWISE NOTED.
17. THE MAINTENANCE OF TRAFFIC (MOT) FOR THIS PROJECT SHALL BE IN ACCORDANCE WITH THE MANUAL OF UNIFORM TRAFFIC CONTROL DEVICES FOR STREETS AND HIGHWAYS; THE STATE OF FLORIDA MANUAL OF ROADWAYS & TRAFFIC DESIGN STANDARDS; 600 SERIES INDEX OF THE FDOT DESIGN STANDARDS CURRENT EDITION, AND THE BROWARD COUNTY TRAFFIC ENGINEERING REQUIREMENTS. THE CONTRACTOR SHALL SUBMIT MOT PLANS, APPLICABLE TO THE WORK AREAS FOR THE ROADWAY AND THE SIDEWALK, TO HIGHWAY AND BRIDGE MAINTENANCE DIVISION FOR REVIEW AND APPROVAL.
18. THE CONTRACTOR SHALL HAVE ON-SITE AND AVAILABLE FOR IMMEDIATE REFERENCE, IF REQUESTED: MOT PLANS, MOT PERMIT, PROJECT PLANS, CONTACT INFORMATION FOR PRIME CONTRACTOR (IF SUB-CONTRACTOR), COUNTY PROJECT MANAGER, AND COPY OF PRE-CONSTRUCTION CHECKLIST.
19. THE CONTRACTOR SHALL MAINTAIN ACCESS TO ADJACENT PROPERTIES AND DRIVEWAYS AT ALL TIMES AS APPROVED BY THE COUNTY, AND THE COUNTY PROJECT ENGINEER.
20. ALL MATERIALS AND CONSTRUCTION SHALL CONFORM TO THE CURRENT EDITION OF BROWARD COUNTY ENGINEERING DIVISION MINIMUM STANDARDS, FDOT ROADWAY DESIGN STANDARDS, AND FDOT STANDARD SPECIFICATIONS FOR ROAD AND BRIDGE CONSTRUCTION.
21. THE CONTRACTOR IS RESPONSIBLE FOR VERIFYING CONCRETE FINISH. SURFACES MUST COMPLY WITH REQUIREMENTS DESCRIBED IN FDOT STANDARD SPECIFICATIONS FOR ROAD AND BRIDGE CONSTRUCTION.
22. PAVEMENT MARKINGS SHALL BE ALKYD BASED THERMOPLASTIC AND FULLY RETROREFLECTORIZED WITH UNIFORM REFLECTIVITY AND REFLECTIVE BEADS ACROSS THE ENTIRE STRIPE RESULTING IN A MINIMUM READING OF 250 MILLICANDELAS FOR WHITE STRIPING.
23. ANY DAMAGED PAVEMENT MARKINGS DUE TO CONSTRUCTION SHALL BE REPLACED AT CONTRACTORS EXPENSE.
24. THE MILLED SURFACE SHALL NOT BE EXPOSED TO TRAFFIC.
25. MILLINGS SHALL BE DELIVERED TO HBMD MAINTENANCE YARD AT 1600 BLOUNT ROAD MON-THURS 7:30 AM TO 4:30 PM.
26. ALL PAVEMENT MARKINGS SHALL CONFORM TO BROWARD COUNTY TRAFFIC ENGINEERING "PAVEMENT MARKINGS AND SIGN DETAILS".
27. A MAINTENANCE OF TRAFFIC PLAN MUST BE SUBMITTED AND RECEIVE APPROVAL FROM HBMD PRIOR TO STARTING WORK.
28. A MINIMUM OF ONE TRAVEL LANE MUST BE OPEN TO TRAFFIC AT ALL TIMES. FLAGGERS MUST BE PROVIDED ALLOWING FOR TWO-WAY TRAVEL.
29. PAVEMENT MARKINGS SHALL BE RESTORED PRIOR TO REOPENING TO TRAFFIC.
30. LIMITS OF MILLING & RESURFACING SHALL BE MARKED DURING THE FIELD REVIEW WITH CONTRACTOR.
31. MILLINGS SHALL NOT BE STORED WITHIN THE PROJECT LIMITS, NOR ON COUNTY RIGHT OF WAY.
32. PAVING MARKINGS SHALL BE WORKED WITH BROWARD COUNTY TRAFFIC ENGINEERING - PAVEMENT MARKINGS AND SIGNS DETAIL SHEET.
33. PRIOR TO COMMENCEMENT OF WORK ON THE UNDERSIDE OF THE BRIDGE, THE CONTRACTOR SHALL OBTAIN A ROW OCCUPANCY PERMIT FROM THE SUNSHINE WATER CONTROL DISTRICT.

Bridge Nos. 864005 and 864006

REVISIONS					BROWARD COUNTY HIGHWAY AND BRIDGE MAINTENANCE DIVISION 1600 BLOUNT ROAD POMPAN0 BEACH, FL 33069		BRIDGE REPAIRS		CORAL SPRINGS DR. OVER W. OUTFALL CANAL	SHEET NO.
DATE	NO.	REMARKS	BY	DATE			ROAD	HBMD PROJ. NO.		
							CORAL SPRINGS DR.	2022-1-119	GENERAL NOTES	B-2



NOTES:

1. NEW ASPHALT PAVEMENT SHALL MATCH EXISTING GRADES AND ELEVATIONS.
2. MILL FULL DEPTH (2½" FOR BRIDGE 864005 AND 3" FOR BRIDGE 864006, DETERMINED BASED ON FIELD MEASUREMENT) EXISTING ASPHALT OVERLAY ON TOP OF BRIDGE SLAB UNITS AND APPROACH SLABS.
3. FOR BRIDGE AND APPROACH SLABS, PAVE NEW ASPHALT OVERLAY CONCRETE FRICTION COURSE (1"), TRAFFIC C, FC-9.5, PG 76-22 AND SUPERPACE ASPHALTIC CONCRETE, TRAFFIC C, PG 76-22 (1" ON BRIDGE SLABS AND APPROACH SLABS).
4. FOR PAVEMENT MARKING DETAILS, MATCH EXISTING.

Bridge Nos. 864005 and 864006

LEGEND:

- MILLING TO TOP OF CONCRETE APPROACH SLAB AND RESURFACING (NO WATERPROOFING AND DEPTH TO MATCH EXISTING).
- MILLING TO TOP OF CONCRETE DECK, WATERPROOFING MEMBRANE INSTALLATION & RESURFACING (DEPTH TO MATCH EXISTING).
- POWERWASHING & APPLICATION OF HIGH MOLECULAR WEIGHT METHACRYLATES.
- REMOVE EXISTING EXPANSION JOINT INCLUDING POLYMER NOSING, SAWCUT FULL DEPTH NEW ASPHALT OVERLAY TO ACCOMODATE NEW EXPANSION JOINT NOSING AND INSTALL NEW EXPANSION JOINT INCLUDING POLYMER NOSING.

REVISIONS				
DATE	NO.	REMARKS	BY	DATE

BROWARD COUNTY HIGHWAY AND
BRIDGE MAINTENANCE DIVISION
1600 BLOUNT ROAD
POMPANO BEACH, FL 33069



BRIDGE REPAIRS	
ROAD	HBMD PROJ. NO.
CORAL SPRINGS DR.	2022-1-119

CORAL SPRINGS DR. OVER W. OUTFALL CANAL	
ROADWAY PLAN	

SHEET NO.
B-3



NOTES:

1. SIDEWALK RAMPS SHALL BE PROVIDED IN ACCORDANCE WITH FDOT INDEX 522-002 "DETECTABLE WARNINGS AND SIDEWALK CURB RAMPS".
2. THE VERTICAL DEVIATION FOR A NEW SIDEWALK SHALL NOT BE MORE THAN 1/2". STAMPED CONCRETE IS NOT ALLOWED IN LIEU OF TRUNCATED DOMES.
3. SIDEWALKS SHALL BE CONSTRUCTED OF 6" THICK CONCRETE (CLASS NS) 3000 PSI MIN. 28-DAY COMPRESSIVE STRENGTH.
4. ALL SOD MATERIALS SHALL BE SUBJECT TO INSPECTION PRIOR TO PLACEMENT. ANY SOD WITH NOXIOUS WEEDS AND GRASSES, INCLUDING TROPICAL SODA APPLE, SHALL BE REJECTED FOR USE ON THE PROJECT.
5. PLACEMENT OF ROOT BARRIERS AROUND TREES SHOULD BE 15' TO EACH SIDE OF TREES.
6. THE CONTRACTOR SHALL FOLLOW PROPER ROOT TRIMMING AS PER ARBORIST RECOMMENDATION.
7. THE CONTRACTOR SHALL NOTIFY DESIGNATED INSPECTOR WITH AMPLE NOTICE TO INSPECT FORMS PRIOR TO PLACING CONCRETE. CONCRETE PLACED WITHOUT A FORM INSPECTION SATISFACTORY COMPLETED IS AT CONTRACTOR'S OWN RISK AND ANY REWORK NECESSARY TO RECTIFY DEFICIENCIES WILL BE AT CONTRACTOR'S COST TO FIX.
8. BASES: LIMEROCK OF THE MIAMI FORMATION SHALL BE USED, HAVING A MINIMUM PERCENTAGE OF CARBONATES OF CALCIUM AND MAGNESIUM OF 70%, AND A MINIMUM LBR OF 100. LIMEROCK BASES SHALL BE TWELVE (12) INCH THICK CONSTRUCTED IN LIFTS NOT TO EXCEED SIX (6) INCHES. BASE MATERIAL SHALL BE COMPACTED TO A DENSITY OF NOT LESS THAN 98% OF MAXIMUM DRY DENSITY AS DETERMINED BY AASHTO T-180. ALTERNATIVE BASE MATERIALS MAY PROPOSED FOR USE IN LIEU OF LIMEROCK; SUCH PROPOSAL SHALL BE SUBMITTED TO THE ENGINEER FOR APPROVAL.

Bridge Nos. 864005 and 864006

REVISIONS					BROWARD COUNTY FLORIDA	BRIDGE REPAIRS		CORAL SPRINGS DR. OVER W. OUTFALL CANAL	SHEET NO.
DATE	NO.	REMARKS	BY	DATE		ROAD	HBMD PROJ. NO.		
					BROWARD COUNTY FLORIDA	CORAL SPRINGS DR.	2022-1-119	SIDEWALK RAMPS DETAILS	B-4

BROWARD COUNTY HIGHWAY AND
BRIDGE MAINTENANCE DIVISION
1600 BLOUNT ROAD
POMPANO BEACH, FL 33069

MATERIAL NOTES

CFRP LAMINATES:

Carbon Fiber Fabric	Renewwrap EST CF600	Sikagard Hex 103C	Tyfo SCH-41
Laminating Epoxy	Renewwrap ESR Saturant	Sikagard Hex 300	Tyfo S
UV Coating	Sikagard 670 W (Gray Color)	Sikagard 670 W (Gray Color)	Tyfo A Paint

MATERIALS AND INSTALLATION SHALL CONFORM TO THE TECHNICAL SPECIAL PROVISIONS (TSP) T100 AND NCHRP 609 ATTACHMENT A. BOTH FIBER AND EPOXY MUST COME FROM THE SAME MANUFACTURER.

1 PLY CFRP LAMINATE QUANTITY			
LENGTH (FT.)	WIDTH (FT.)	No. OF LAMINATES	QUANTITY (SQFT.)
12.00	2.083	24	599.90
10.00	2.083	8	166.67
TOTAL CFRP QUANTITIES			766.57

CONCRETE PATCHING:

Material Type	Compressive Strength, PSI		
	1 Day	7 Days	28 Days
Planitop XS	3000	4000	5000
MasterEmaco S 440CI	2500	5300	6500
Sika-Repair 223	3500	6000	7500

DOWEL STEEL BAR:

DOWEL STEEL BARS SHALL BE GRADE 60 IN ACCORDANCE WITH ASTM A955/A955M-20 STANDARD SPECIFICATIONS FOR DEFORMED STAINLESS STEEL BARS FOR CONCRETE REINFORCEMENT.

SS. DOWEL BAR QUANTITY						
BAR NAME	BAR SIZE	LENGTH		No. OF BARS	QUANTITY (FT.)	TYPE
		FT	IN			
6A1	#6	11	9	16	188.0	TYPE 1
6A2	#6	12	0	32	384.0	TYPE 1
6A3	#6	9	9	16	156.0	TYPE 1
4A4	#4	4	0	35	140.0	TYPE II
TOTAL BAR QUANTITIES					868.0	

BONDING EPOXY:

Structural Adhesive	Horizontal & Vertical Application	Overhead Application	Underwater Application
	Dayton Superior Sure Anchor I J51	Sikadur 31 Hi-Mod Gel	Pilgrim Magmaflow Type K
	ET-HP Epoxy	Euclid Chemical Dural 452 Gel	
Pilgrim RS-600			

WATERPROOFING MEMBRANE:

WATERPROOFING MEMBRANE SHALL CONFORM WITH FDOT SPECIFICATION SECTION 518 "PAVEMENT WATERPROOFING FABRIC" DATED 2000, LOCATED AT:
<https://www.fdot.gov/docs/default-source/programmanagement/Implemented/SpecBooks/2000/Files/2000Book.pdf>
 AND MANUFACTURER'S SPECIFICATION.

Waterproofing Membrane	Polyguard NW-75
	Crafco PavePrep SA CRA
	MEL-DEK SealTight

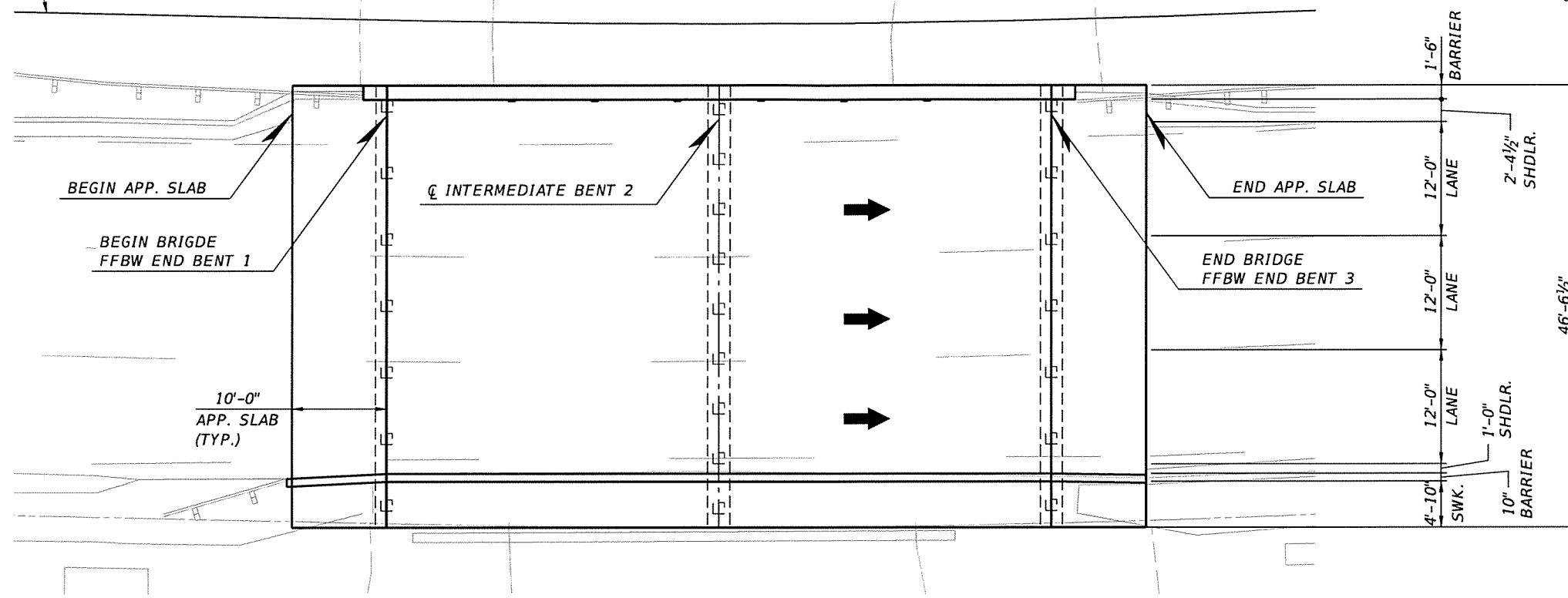
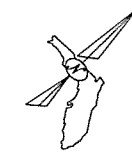
QUANTITIES

PAY ITEM QUANTITIES - BRIDGE 8640005			
Item No.	Description	Quantity	Unit
1	FDOT PAY ITEM 101-1: MOBILIZATION, NIGHT WORK	1	EACH
5	FDOT PAY ITEM 102-14: TRAFFIC CONTROL OFFICER	208	HOURLY
6	FDOT PAY ITEM 102-60: WORK ZONE SIGNS, F & I	192	DAY
10	FDOT PAY ITEM 102-71-1B: BARRIER WALL, TEMPORARY, F&I, WATERFILLED, UP TO 30 DAYS	90	LINEAR FOOT
16	FDOT PAY ITEM 102-74-1: CHANNELIZING DEVICE, TYPES I, II, DI, VP, DRUM, OR LCD, F & I	3115	DAY
24	FDOT PAY ITEM 102-76: ARROW BOARD / ADVANCE WARNING ARROW PANEL, F & I	26	DAY
26	FDOT PAY ITEM 102-99: PORTABLE CHANGEABLE MESSAGE SIGN, TEMPORARY, F & I	151	DAY
36	FDOT PAY ITEM 104-11: FLOATING TURBIDITY BARRIER	70	LINEAR FOOT
45	FDOT PAY ITEM 110-3-5: REMOVAL OF EXISTING BRIDGE JOINT	125	LINEAR FOOT
49	FDOT PAY ITEM 110-4-10A: REMOVAL OF EXISTING CONCRETE-SIDEWALK, PAVEMENT OR SLOPE PAVEMENT ANY THICKNESS	234	SQUARE YARD
68	FDOT PAY ITEM 173-71: DRILLING HOLES FOR PRESSURE GROUTING FOR PIPE UP TO 4 INCH INSIDE DIA	9	LINEAR FOOT
69	FDOT PAY ITEM 173-76: GROUT PIPE INSTALLATION UP TO 4 IN. INSIDE DIA	2	LINEAR FOOT
81	FDOT PAY ITEM 327-70-8: MILLING EXIST ASPH PAVT, 2 1/2 IN AVG DEPTH	394	SQUARE YARD
88	FDOT PAY ITEM 334-1-52, 334-1-53, 334-1-54, OR 334-1-55: SUPERPAVE ASPHALTIC CONCRETE, TRAFFIC B, C, D, OR E, PG 76-22	55	TONS
89	FDOT PAY ITEM 337-7-80, 337-7-81, 337-7-82, 337-7-83, 337-7-85, OR 337-7-88: ASPHALT CONCRETE FRICTION COURSE, TRAFFIC B, C, D, OR E, FC-9.5, FC-12.5 PG 76-22	55	TONS
99	FDOT ITEM # N/A: PAVEMENT WATERPROOFING FABRIC	3911	SQUARE FOOT
129	FDOT PAY ITEM N/A: STAINLESS STEEL DOWEL (LF)	868	LINEAR FOOT
155	FDOT PAY ITEM 400-145B: CLEANING CONCRETE SURFACE, EQUAL OR GREATER THAN 500 SF	395	SQUARE FOOT
158	FDOT PAY ITEM 400-148: PLAIN NEOPRENE BEARING PADS	5	CUBIC FOOT
160	FDOT PAY ITEM 401-70-1B: RESTORE SPALLED AREAS, STRUCTURES, TYPE F-1 EPOXY	9	CUBIC FOOT
165	FDOT PAY ITEM 413-154A: CLEANING AND SEALING CONCRETE SURFACES: METHACRYLATES, EQUAL OR GREATER THAN 500 SF	4285	SQUARE FOOT
188	FDOT PAY ITEM 458-1-21A: BRIDGE DECK EXPANSION JOINT, REHABILITATION, POURED JOINT WITH BACKER ROD (TYPE D SILICONE)	125	LINEAR FOOT
192	FDOT PAY ITEM 458-2: POLYMER NOSING (XJS SYSTEMS) FOR BRIDGE DECK EXPANSION JOINT WITH POURED JOINT WITH BACKER ROD	29	CUBIC FOOT
227	FDOT PAY ITEM N/A: CARBON FIBER REINFORCED POLYMER (CFRP) LAMINATE FOR STRUCTURES OVER WATER	767	SQUARE FOOT
250	FDOT PAY ITEM N/A: ADA COMPLIANT CURB RAMP, SINGLE DIRECTION	2	EACH
251	FDOT PAY ITEM N/A: ADA COMPLIANT CURB RAMP, TWO-DIRECTION	3	EACH
252	FDOT PAY ITEM N/A: DETECTABLE WARNING ON EXISTING WALKING SURFACE, CAST-IN-PLACE, F & I	70	SQUARE YARD
374	FDOT PAY ITEM 706-1-1: RETRO-REFLECTIVE PAVEMENT MARKERS	8	SQUARE YARD
375	FDOT PAY ITEM 710-11-101, 710-11-201, OR 710-11-421: PAINTED PAVEMENT MARKINGS, STANDARD, WHITE, YELLOW, OR BLUE, SOLID, 6 IN	180	LINEAR FOOT
380	FDOT PAY ITEM 710-11-131 OR 710-11-231: PAINTED PAVEMENT MARKINGS, STANDARD, WHITE OR YELLOW, SKIP, 10-30 OR 3-9 SKIP, 6 IN WIDE	180	LINEAR FOOT
385	FDOT PAY ITEM 711-16-101 OR 711-16-201: THERMOPLASTIC, STANDARD, WHITE OR YELLOW, SOLID, 6 IN	180	LINEAR FOOT
390	FDOT PAY ITEM 711-16-131 OR 711-16-231: THERMOPLASTIC, STANDARD, WHITE OR YELLOW, SKIP, 10-30 OR 3-9 SKIP, 6 IN	180	LINEAR FOOT
415	FDOT PAY ITEM N/A: WORK SKIFF	42	DAY
430	FDOT PAY ITEM N/A: PORTABLE TOILET, SINGLE STALL	13	WEEK
431	FDOT PAY ITEM N/A: LIGHT TOWER, AMIDA/TEREX AL4000 OR EQUIVALENT	24	DAY
437	PASS-THRU: PERMITS AND FEES	1	EACH

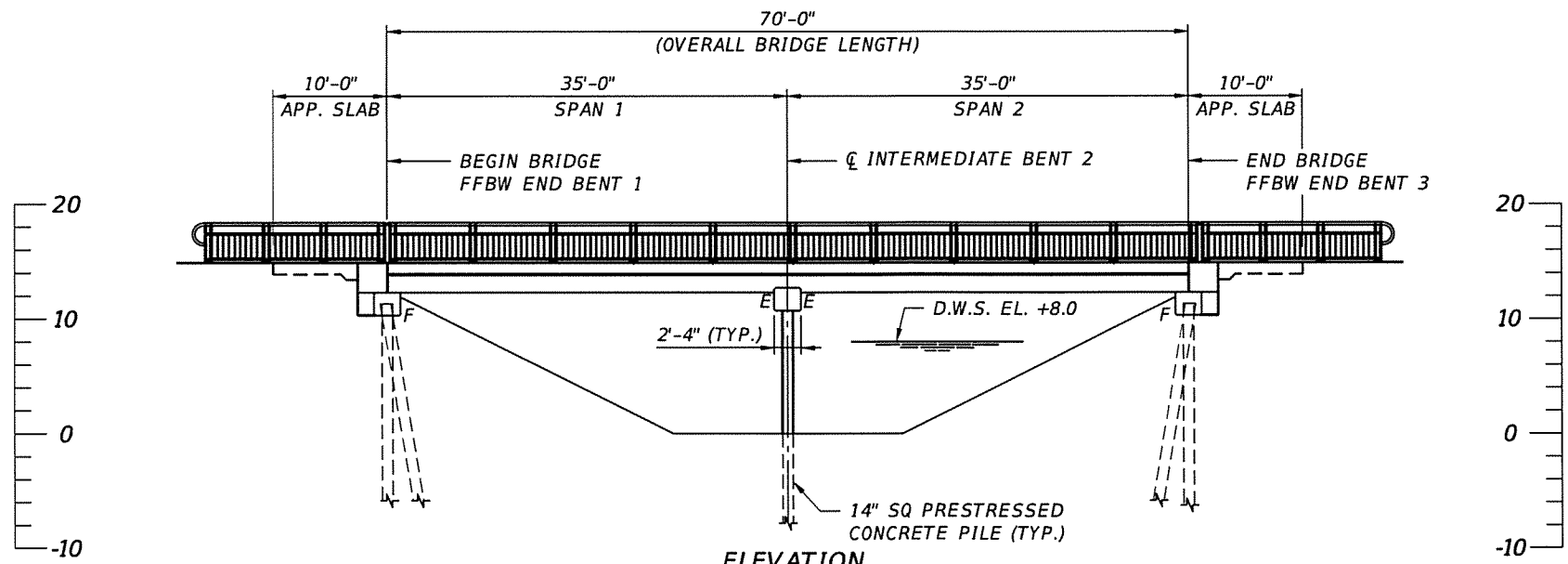
Bridge No. 864005

REVISIONS					BROWARD COUNTY HIGHWAY AND BRIDGE MAINTENANCE DIVISION 1600 BLOUNT ROAD POMPANO BEACH, FL 33069		BRIDGE REPAIRS		CORAL SPRINGS DR. OVER W. OUTFALL CANAL	SHEET NO.
DATE	NO.	REMARKS	BY	DATE			ROAD	HBMD PROJ. NO.	SUMMARY OF QUANTITIES AND MATERIAL NOTES	B1-1
							CORAL SPRINGS DR.	2022-1-119		

☉ CORAL SPRINGS DR.



PLAN



ELEVATION

NOTES:

1. UTILITIES ARE NOT SHOWN FOR CLARITY.
2. AS BUILTS PLANS WERE NOT FOUND. DIMENSIONS SHALL BE FIELD VERIFY AS NEEDED.
3. FOR LIMITS OF MILLING, RESURFACING AND PAVEMENT MARKINGS, REFER TO ROADWAY PLAN SHEET.
4. FOR TRAFFIC MARKINGS, MATCH EXISTING. FOR TRAFFIC MARKINGS DETAILS, REFER TO PAVEMENT MARKINGS AND SIGNS PLAN OF BROWARD COUNTY.

Bridge No. 864005

REVISIONS				
DATE	NO.	REMARKS	BY	DATE

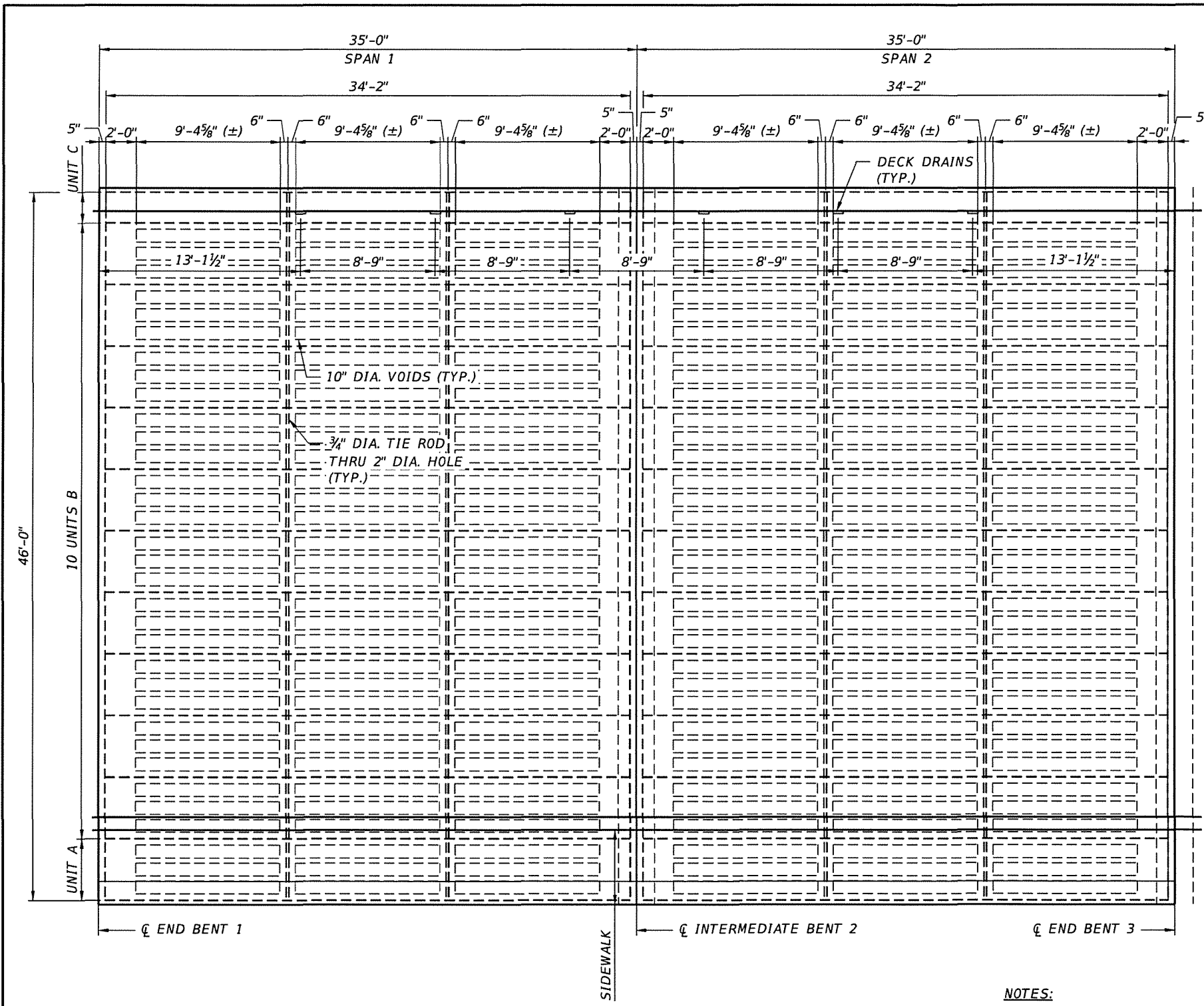
BROWARD COUNTY HIGHWAY AND
BRIDGE MAINTENANCE DIVISION
1600 BLOUNT ROAD
POMPANO BEACH, FL 33069



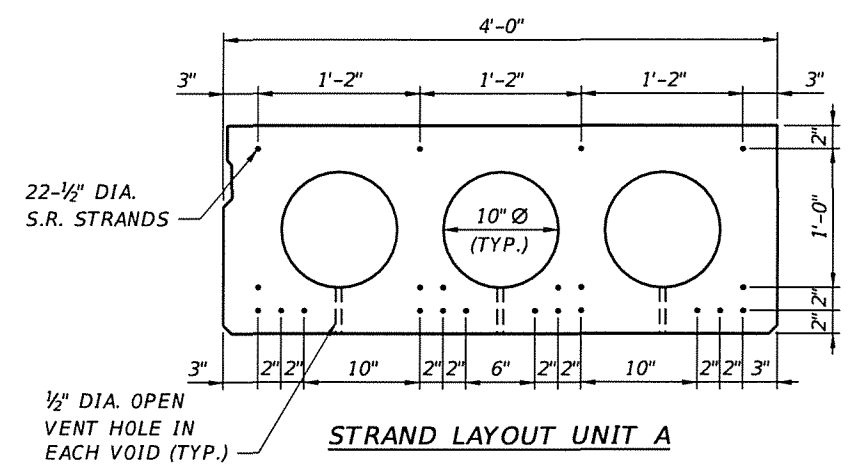
BRIDGE REPAIRS	
ROAD	HBMD PROJ. NO.
CORAL SPRINGS DR.	2022-1-119

CORAL SPRINGS DR. OVER W. OUTFALL CANAL	
PLAN AND ELEVATION	

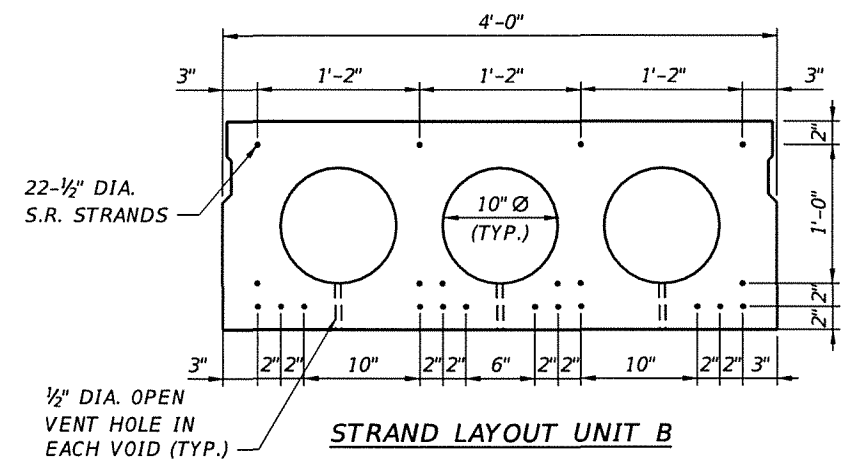
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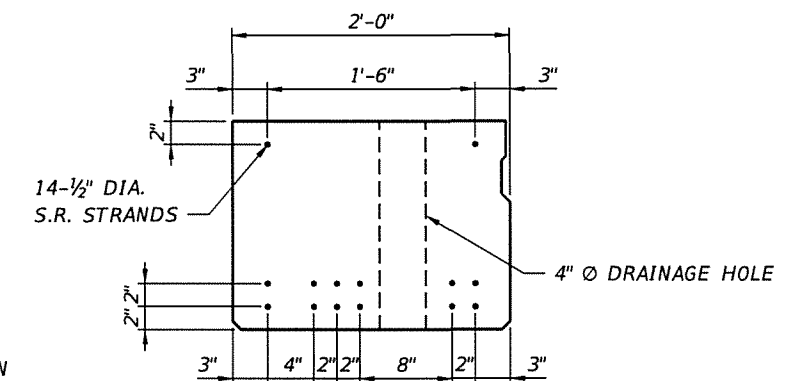
PLAN



STRAND LAYOUT UNIT A



STRAND LAYOUT UNIT B



STRAND LAYOUT UNIT C

- NOTES:**
1. STRAND SPACING SHOWN IS BASED ON AVAILABLE EXISTING PLANS FOR TWIN BRIDGE 864006, ACTUAL STRAND SPACING MAY DIFFER.
 2. THE NUMBER AND LOCATION OF DECK DRAINS ON BRIDGE 864005 SHALL BE FIELD VERIFIED UPON REMOVAL OF ASPHALT OVERLAY.

Bridge No. 864005

REVISIONS				
DATE	NO.	REMARKS	BY	DATE

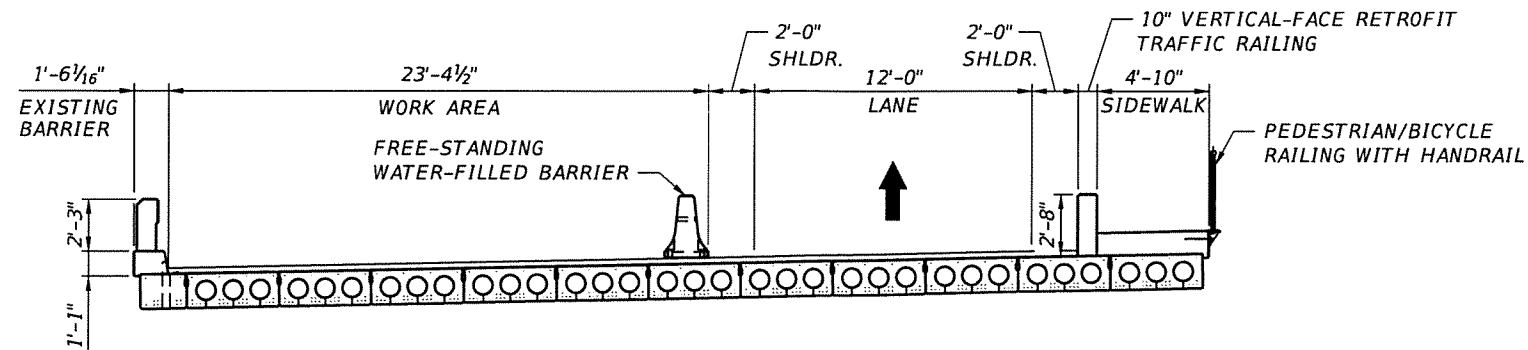
BROWARD COUNTY HIGHWAY AND BRIDGE MAINTENANCE DIVISION
1600 BLOUNT ROAD
POMPANO BEACH, FL 33069



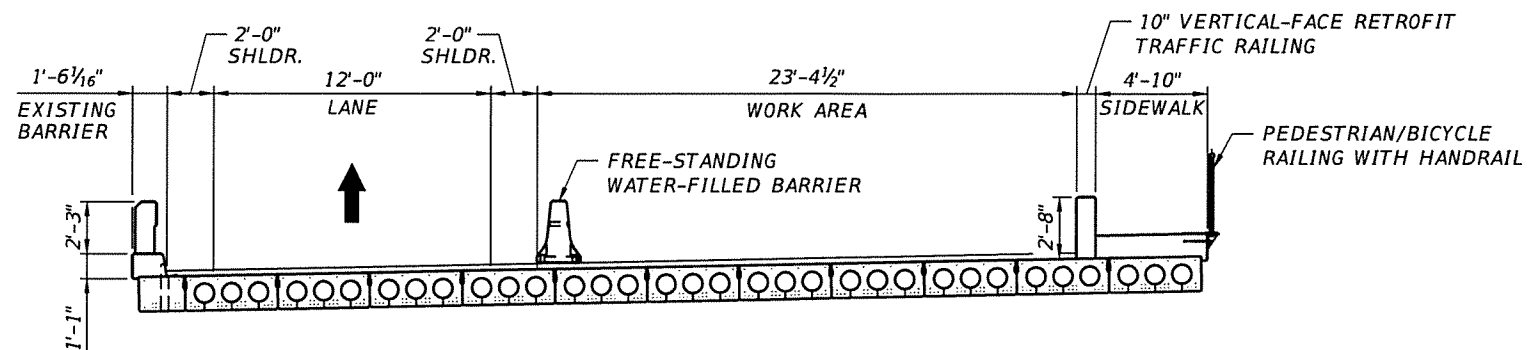
BRIDGE REPAIRS	
ROAD	HBMD PROJ. NO.
CORAL SPRINGS DR.	2022-1-119

CORAL SPRINGS DR. OVER W. OUTFALL CANAL	
PRESTRESSED SLAB UNIT LAYOUT PLAN	

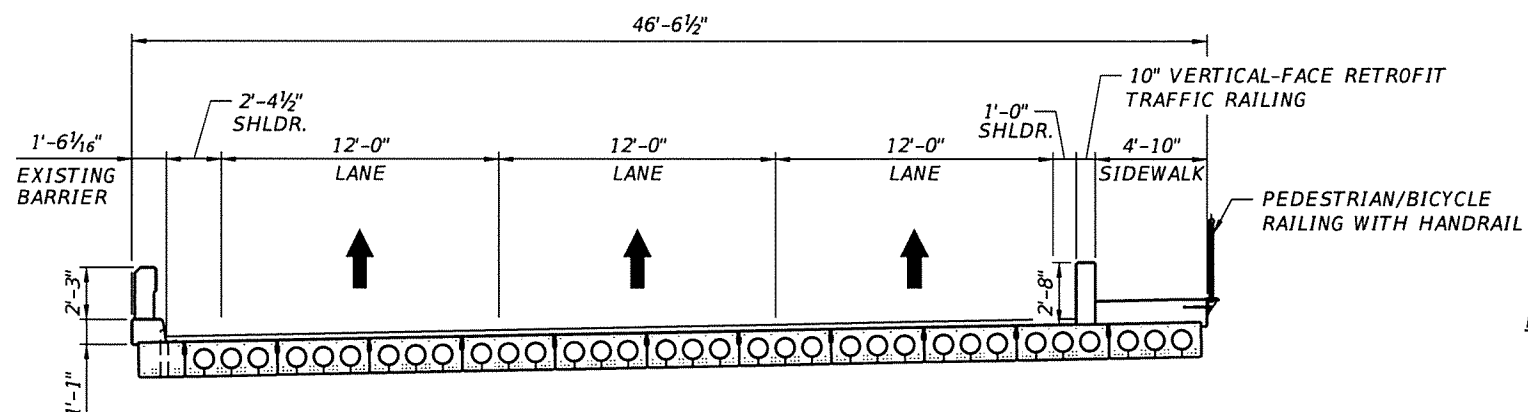
SHEET NO.
B1-3



TYPICAL SECTION
(PHASE I)



TYPICAL SECTION
(PHASE II)



TYPICAL SECTION
(FINAL)

NOTES:

1. REFER TO FDOT STANDARD PLANS INDEX 102-613 "MULTILANE ROADWAY, LANE CLOSURES."
2. REFER TO FDOT STANDARD PLANS INDEX 102-600 "GENERAL INFORMATION FOR TRAFFIC CONTROL THROUGH WORK ZONES". FOR GENERAL TRAFFIC GUIDELINES AND STANDARDS.
3. FOR BOTH PHASES, MILL EXISTING ASPHALT OVERLAY, INSTALL WATERPROOFING MEMBRANE, AND PAVE NEW ASPHALT OVERLAY, SEE DECK WATERPROOFING PROCEDURE SHEET AND ROADWAY PLAN SHEET FOR DETAILS.
4. CONTRACTOR SHALL NOTIFY ENGINEER AT A MINIMUM 2 WEEKS PRIOR TO LANE CLOSURES.

Bridge No. 864005

REVISIONS				
DATE	NO.	REMARKS	BY	DATE

BROWARD COUNTY HIGHWAY AND
BRIDGE MAINTENANCE DIVISION
1600 BLOUNT ROAD
POMPANO BEACH, FL 33069



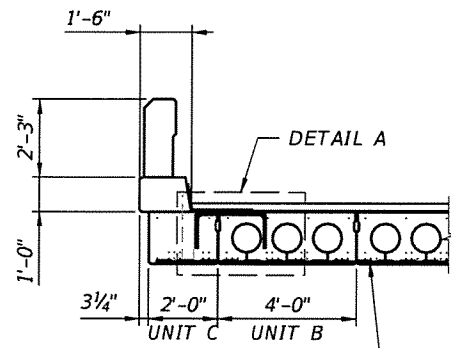
BRIDGE REPAIRS	
ROAD	HBMD PROJ. NO.
CORAL SPRINGS DR.	2022-1-119

CORAL SPRINGS DR. OVER W. OUTFALL CANAL

CONSTRUCTION SEQUENCE

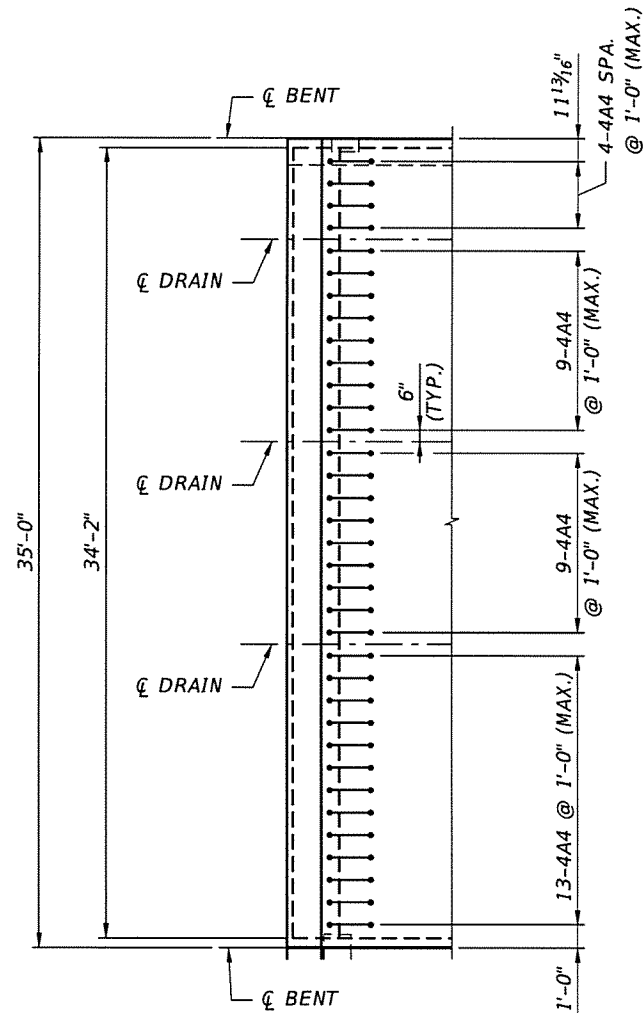
SHEET NO.

B1-4

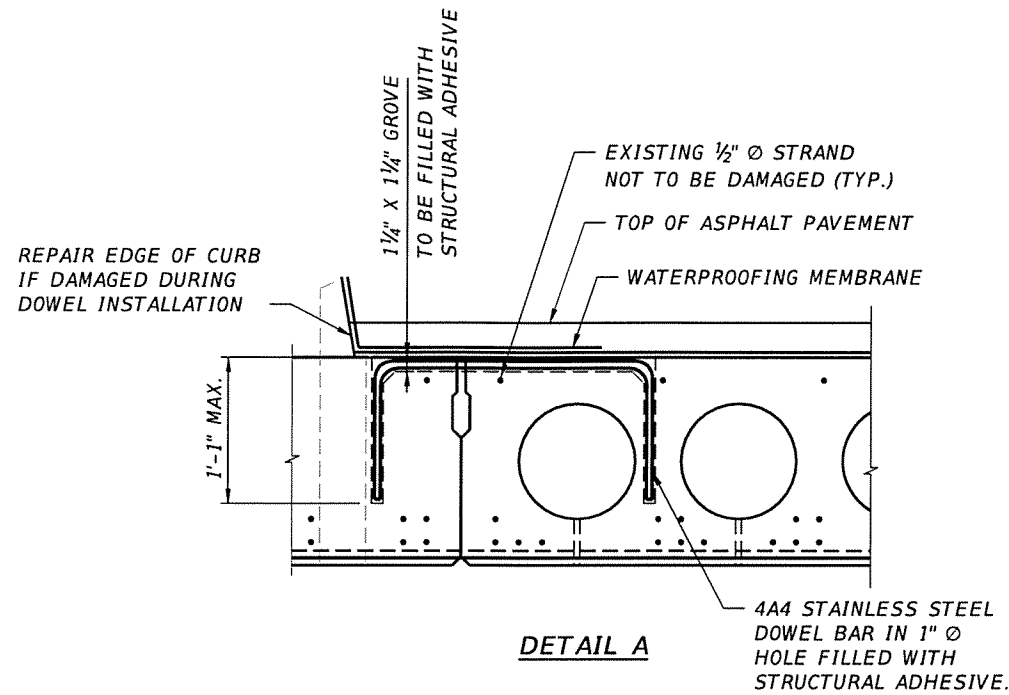


SECTION

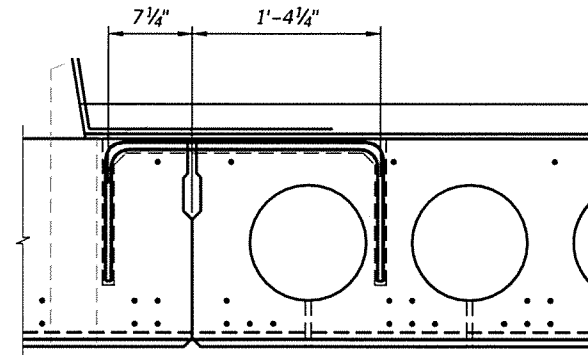
4A4 S.S. BAR IN 1 1/4" GROVE AND CFRP LAMINATE, SEE UNDERDECK STRENGTHENING PROCEDURE SHEET.



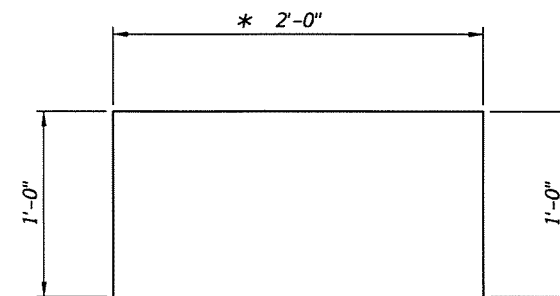
PARTIAL DECK PLAN



DETAIL A



DETAIL A



BAR BENDING DETAIL

* FIELD ADJUST AS REQUIRED TO AVOID CONFLICT WITH EXISTING STRANDS

NOTES:

1. CONTRACTOR TO NOTIFY ENGINEER AFTER ASPHALT HAS BEEN REMOVED. ENGINEER TO MARK LOCATION OF EXISTING REINFORCEMENT AND VERIFY DOWEL LAYOUT PRIOR TO DRILLING.
2. NO DRILLING OR CUTTING IS ALLOWED UNTIL CONCRETE COVER TO EXISTING STRANDS HAS BEEN FIELD VERIFIED BY THE ENGINEER.
3. TOP OF DECK DOWEL INSTALLATION SHALL BE COMPLETED PRIOR TO WATERPROOFING MEMBRANE INSTALLATION.
4. SHIFT DOWEL HOLE LOCATIONS IF EXISTING REINFORCING STEEL IS ENCOUNTERED. FILL UNUSED DRILLED HOLES WITH EPOXY. DOWEL SPACING TO BE FIELD ADJUSTED TO AVOID CONFLICTS AS REQUIRED, PROVIDED TOTAL NUMBER OF DOWELS IS MAINTAINED. CUTTING OF GROOVES SHALL ONLY OCCUR AFTER HOLES HAVE BEEN DRILLED AT FINAL LOCATIONS.

PROCEDURE:

1. MILL EXISTING ASPHALT OVERLAY TO TOP OF DECK. DO NOT DAMAGE THE TOPS OF THE PRECAST PRESTRESSED CONCRETE SLAB UNITS. CONTRACTOR TO NOTIFY ENGINEER AFTER ASPHALT OVERLAY HAS BEEN REMOVED AND VERIFY THICKNESS OF EXISTING ASPHALT.
2. REPAIR ALL DELAMINATIONS AND SPALLS ON THE TOPS OF THE PRECAST PRESTRESSED CONCRETE SLAB UNITS, AS PER DETAILS ON SPALL AND CRACK REPAIR DETAILS SHEET .
3. DRILL HOLES AND CUT GROOVES TO RECEIVE #4 STAINLESS STEEL DOWEL BARS BETWEEN EXTERIOR SLAB UNIT C AND FIRST INTERIOR SLAB UNIT B.
4. FILL HOLES AND GROOVES WITH EPOXY.
5. CLEAN DECK SURFACE TO REMOVE DUST AND OTHER DELETERIOUS MATERIAL.
6. REFER TO NOTES ON DECK WATERPROOFING PROCEDURE SHEET.

Bridge No. 864005

REVISIONS				
DATE	NO.	REMARKS	BY	DATE

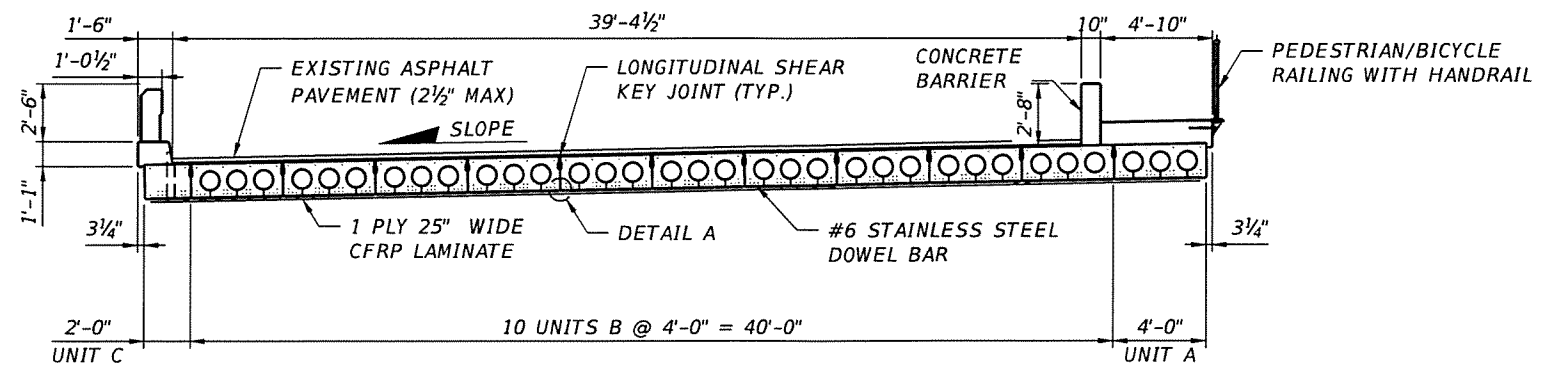
BROWARD COUNTY HIGHWAY AND BRIDGE MAINTENANCE DIVISION
1600 BLOUNT ROAD
POMPANO BEACH, FL 33069



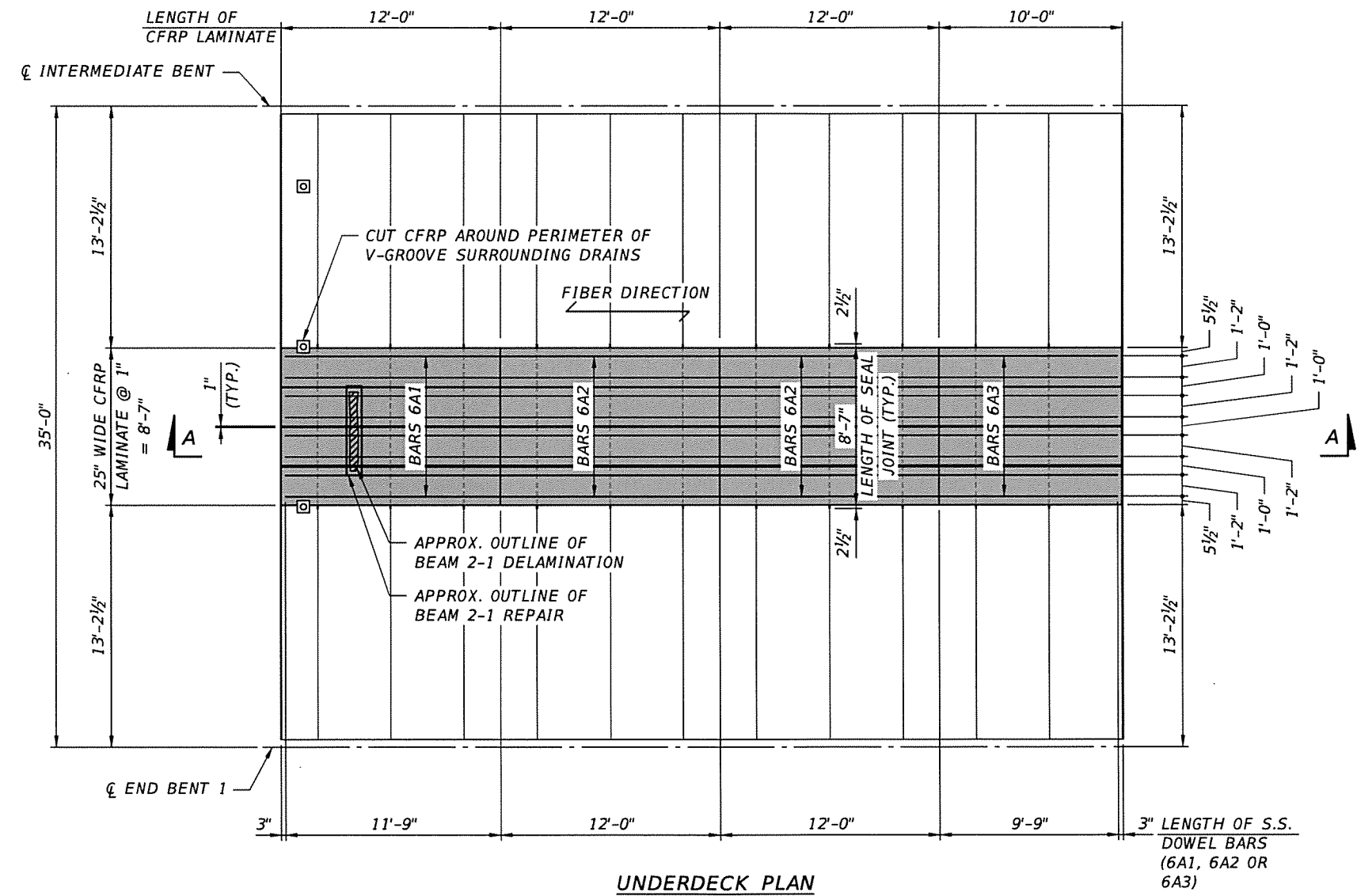
BRIDGE REPAIRS	
ROAD	HBMD PROJ. NO.
CORAL SPRINGS DR.	2022-1-119

CORAL SPRINGS DR. OVER W. OUTFALL CANAL	
TOP OF DECK STRENGTHENING PROCEDURE	

SHEET NO.
B1-5



SECTION A-A




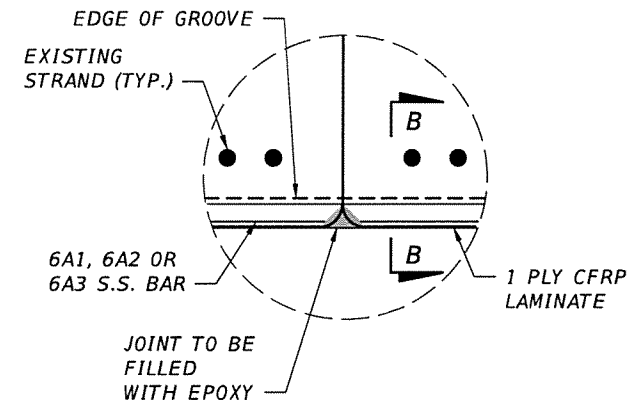
UNDERDECK PLAN
(SPAN 1 SHOWN, SPAN 2 SIMILAR)

NOTES:

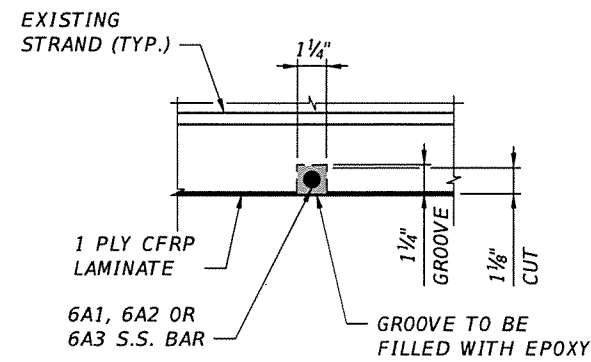
1. FOR DETAIL A SEE UNDERDECK STRENGTHENING PROCEDURE (2 OF 2) SHEET.
2. FOR ADDITIONAL NOTES SEE UNDERDECK STRENGTHENING PROCEDURE (2 OF 2) SHEET.
3. CFRP LAMINATE WIDTH VARIES BASED ON MANUFACTURER. CONTRACTOR TO NOTIFY ENGINEER OF FINAL CFRP MANUFACTURER SELECTION SO 25" WIDTH MAY BE ADJUSTED ACCORDINGLY.
4. FOR DELAMINATION REPAIR, SEE SPALL & CRACK REPAIR DETAILS AND CONSTRUCTION DETAILS SHEETS.

Bridge No. 864005

REVISIONS					BROWARD COUNTY HIGHWAY AND BRIDGE MAINTENANCE DIVISION 1600 BLOUNT ROAD POMPANO BEACH, FL 33069		BRIDGE REPAIRS		CORAL SPRINGS DR. OVER W. OUTFALL CANAL	SHEET NO. B1-6
DATE	NO.	REMARKS	BY	DATE			ROAD	HBMD PROJ. NO.		
							CORAL SPRINGS DR.	2022-1-119	UNDERDECK STRENGTHENING PROCEDURE (1 OF 2)	



DETAIL A



SECTION B-B

NOTES:

1. CONTRACTOR TO NOTIFY ENGINEER AFTER THE LOCATION OF GROOVES HAS BEEN STRING LINED FOR APPROVAL BY THE ENGINEER.
2. NO CUTTING IS ALLOWED UNTIL CONCRETE COVER TO EXISTING STRANDS HAS BEEN FIELD VERIFIED BY THE ENGINEER.
3. THE 1/8" DEEP CUT AS SHOWN ON THIS SHEET MAY BE ADJUSTED BY THE ENGINEER BASED ON FIELD COVER MEASUREMENTS.

PROCEDURE:

1. SAWCUT (8) TRANSVERSE 1/4"x1/8" GROOVES BY WAY OF 2 ADJACENT SAWCUTS AND CHIP OUT INTERSTITIAL CONCRETE BETWEEN SAWCUTS TO ACHIEVE A FINAL 1/4" DEPTH. CIRCULAR SAW TO BE MOUNTED ON STEEL TRACKS ALONG THE GROOVE PATH.
2. CLEAN GROOVES THOROUGHLY OF DIRT AND DUST WITH HIGH PRESSURE AIR COMPRESSOR.
3. PLACE #6 STAINLESS STEEL DOWEL BARS (6A1, 6A2 or 6A3) CENTERED WITHIN THE GROOVES. USE STAINLESS STEEL SELF DRILLING SCREWS TO SECURE THE BARS.
4. DOWEL BARS SHALL NOT BUTT UP AGAINST STRANDS. IN CASES WHERE DOWEL BARS MUST BUTT UP AGAINST STRANDS, SEPERATE DOWEL BARS FROM STRANDS WITH DIELECTRIC TAPE.
5. INSERT EPOXY TO FILL ALL EMPTY SPACE WITHIN THE GROOVES, ALL AROUND THE STAINLESS STEEL DOWELS.
6. FILL LONGITUDINAL JOINTS BETWEEN SLAB UNITS WITH EPOXY TO THE LIMITS SHOWN IN THESE PLANS.
7. CLEAN AND PATCH ALL EXPOSED SPALLS AND DELAMINATIONS. SEE SPALL AND CRACK REPAIR DETAILS SHEET.
8. PREPARE CONCRETE SURFACE TO RECEIVE CFRP LAMINATES PER TSP T100.
9. APPLY CFRP LAMINATES PER TSP T100.
10. APPLY UV PROTECTIVE COATING.

Bridge No. 864005

REVISIONS				
DATE	NO.	REMARKS	BY	DATE

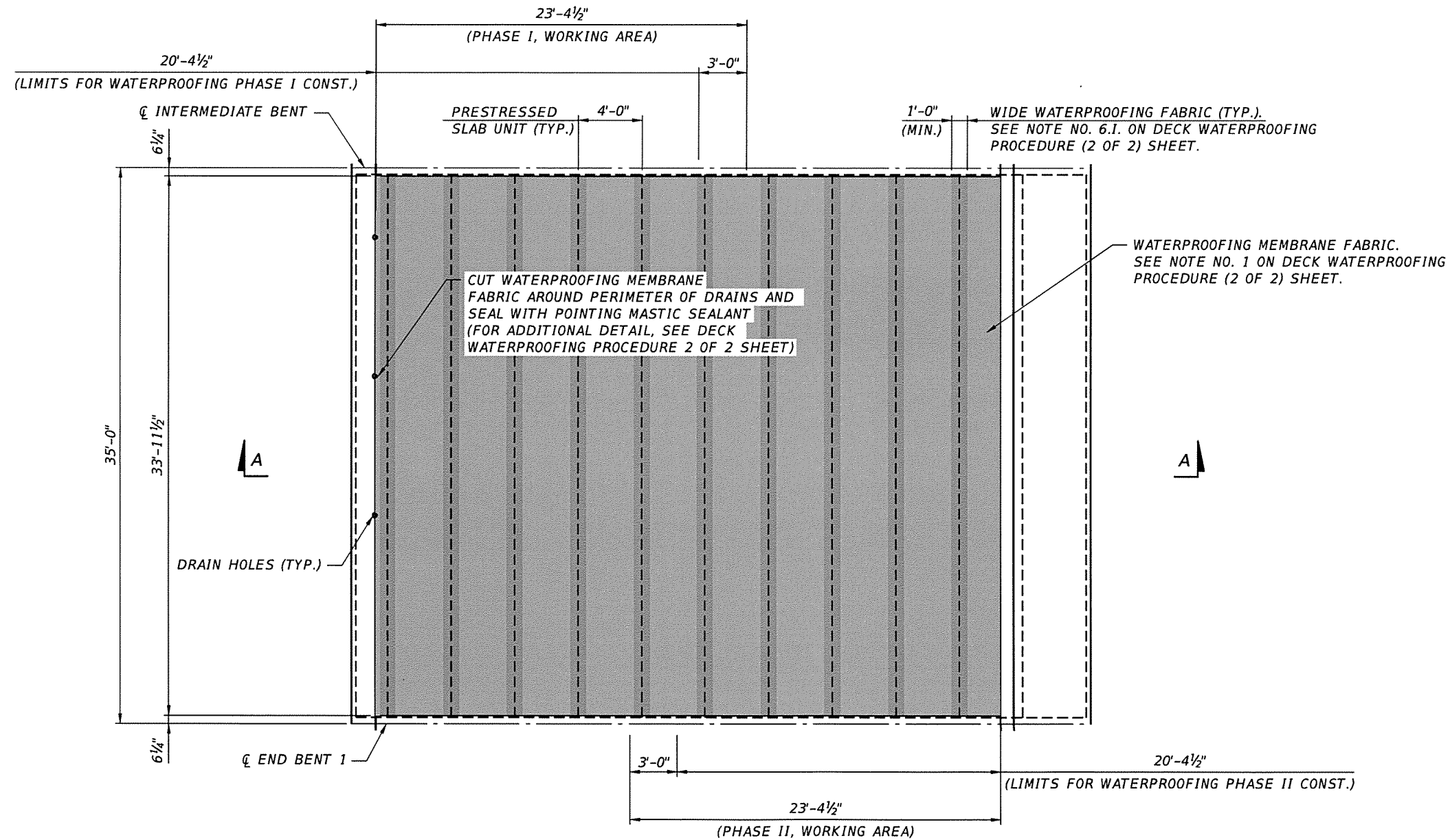
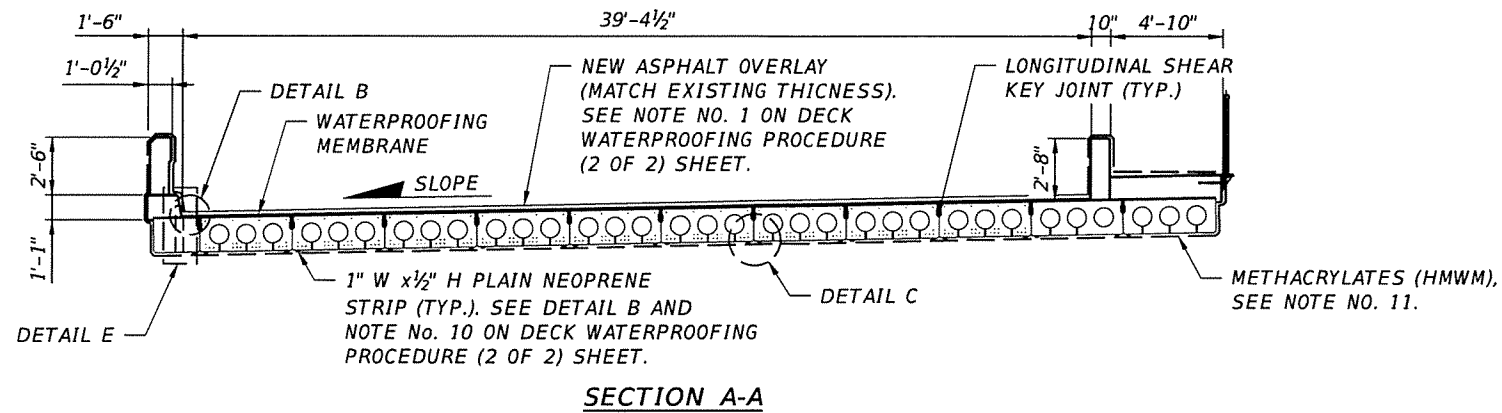
BROWARD COUNTY HIGHWAY AND
BRIDGE MAINTENANCE DIVISION
1600 BLOUNT ROAD
POMPANO BEACH, FL 33069



BRIDGE REPAIRS	
ROAD	HBMD PROJ. NO.
CORAL SPRINGS DR.	2022-1-119

CORAL SPRINGS DR. OVER W. OUTFALL CANAL
UNDERDECK STRENGTHENING PROCEDURE (2 OF 2)

SHEET NO.
B1-7



NOTE:
FOR DETAILS AND NOTES, SEE DECK WATERPROOFING PROCEDURE (2 OF 2) SHEET.

PLAN
(SPAN 1 SHOWN, SPAN 2 SIMILAR)

Bridge No. 864005

REVISIONS				
DATE	NO.	REMARKS	BY	DATE

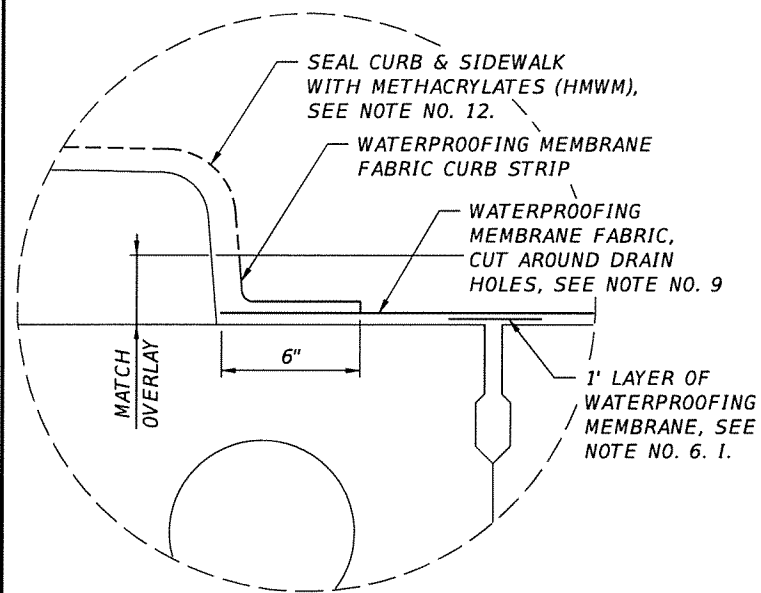
BROWARD COUNTY HIGHWAY AND
BRIDGE MAINTENANCE DIVISION
1600 BLOUNT ROAD
POMPANO BEACH, FL 33069



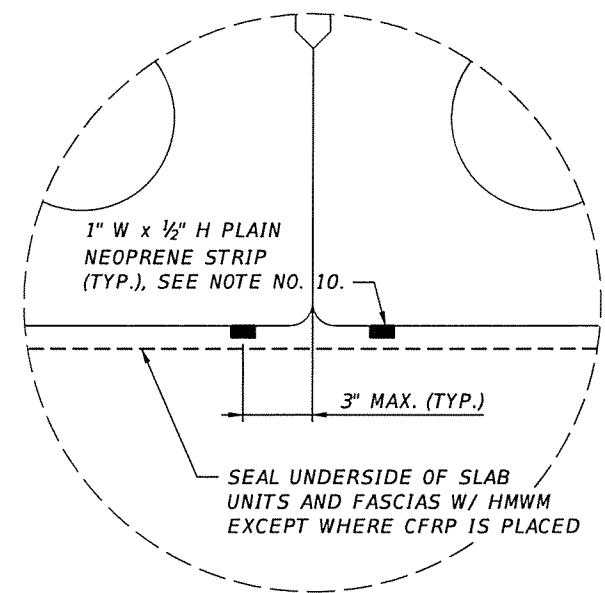
BRIDGE REPAIRS	
ROAD	HBMD PROJ. NO.
CORAL SPRINGS DR.	2022-1-119

CORAL SPRINGS DR. OVER W. OUTFALL CANAL	
DECK WATERPROOFING PROCEDURE (1 OF 2)	

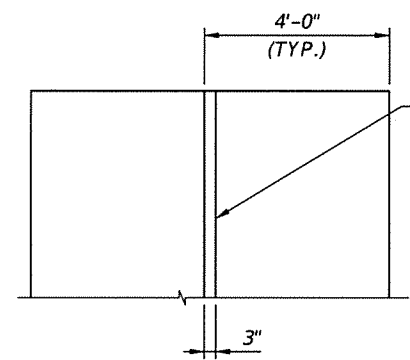
SHEET NO.
B1-8



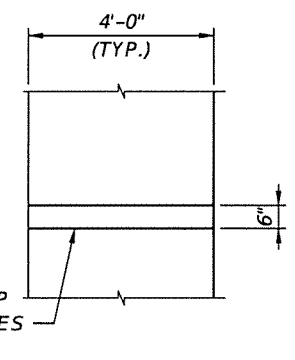
DETAIL B



DETAIL C

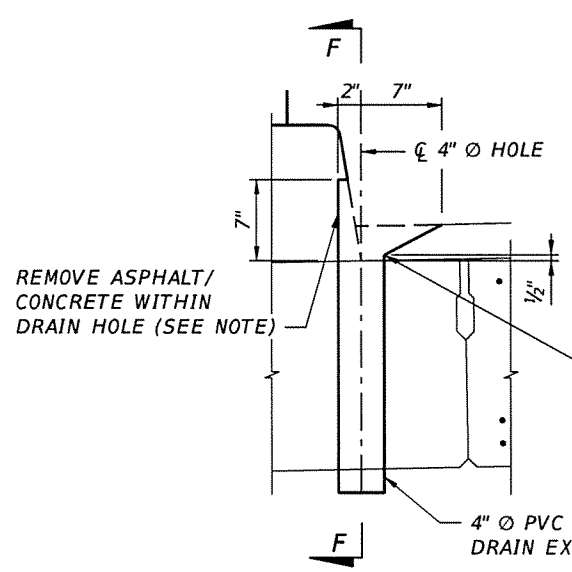


TYPICAL TRANSVERSE OVERLAP FOR WATERPROOFING MEMBRANES

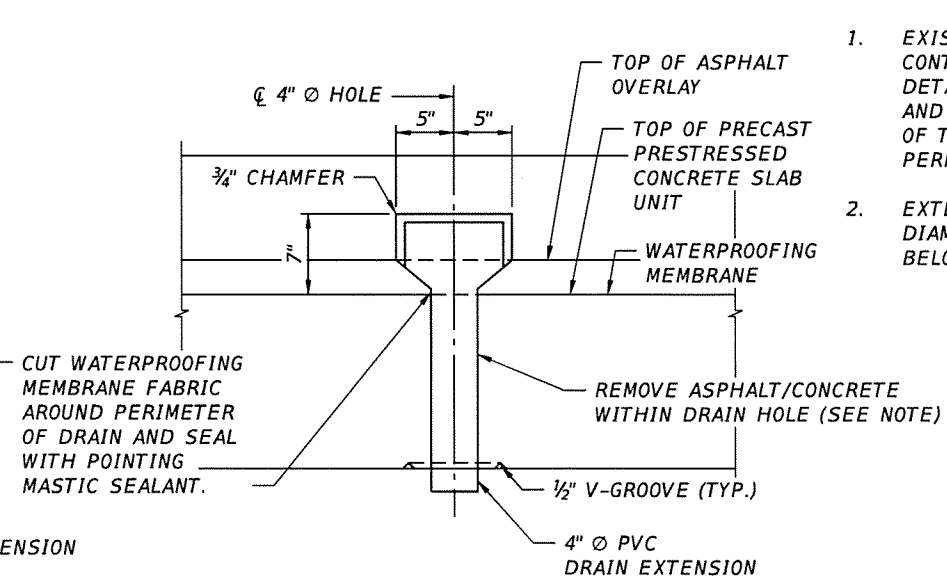


TYPICAL LONGITUDINAL OVERLAP FOR WATERPROOFING MEMBRANES

DETAIL D



DETAIL E



SECTION F-F

NOTES:

1. EXISTING CROSS SLOPE VALUE SHALL BE DETERMINED IN THE FIELD BEFORE MILLING EXISTING ASPHALT.
2. THE EXISTING ASPHALT OVERLAY THICKNESS SHALL BE FIELD VERIFIED. MILL EXISTING ASPHALT OVERLAY TO TOP OF DECK. DO NOT DAMAGE THE TOP OF THE PRECAST PRESTRESSED CONCRETE SLAB UNITS.
3. REPAIR ALL DELAMINATIONS AND SPALLS ON THE TOPS OF THE PRECAST PRESTRESSED CONCRETE SLAB UNITS, AS PER DETAILS ON SHEET NO. 10 "SPALL AND CRACK REPAIRS DETAILS".
4. APPLY WATERPROOFING MEMBRANE FABRIC AS PER FDOT STANDARD SPECIFICATIONS FOR ROAD AND BRIDGE CONSTRUCTION (2000) SECTION 518 "PAVEMENT WATERPROOFING FABRIC" AND IN ACCORDANCE WITH MANUFACTURER'S SPECIFICATION.
5. FOR WATERPROOFING CONSTRUCTION LIMITS, REFER TO DECK WATERPROOFING PROCEDURE (1 OF 2) SHEET.
6. WATERPROOFING APPLICATION SHALL FOLLOW THESE STEPS:
 - I. A MINIMUM 1 FOOT WIDE WATERPROOFING FABRIC SHALL BE PLACED CENTERED ALONG LONGITUDINAL SHEAR KEYS BETWEEN SLAB UNIT ENDS.
 - II. STARTING FROM THE LOW CROSS SLOPE POINT, WATERPROOFING FABRIC SHALL BE PLACED IN A SHINGLE PATTERN. OVERLAPS SHALL FOLLOW DETAIL D.
 - III. AT CURBS, AN ADDITIONAL WATERPROOFING STRIP SHALL BE PROVIDED EXTENDING 6IN ONTO THE HORIZONTAL AND MATCH THE ASPHALT OVERLAY THICKNESS ON THE VERTICAL FACE. SEE DETAIL B.
7. ROLL MEMBRANE FIRMLY TO ELIMINATE WRINKLES AND AIR POCKETS.
8. WATERPROOFING FABRIC SHALL BE CUT AT BENT EXPANSION JOINTS 6" FROM THE EDGES OF THE DECK TO ACCOMMODATE THE EXPANSION JOINT NOSING.
9. WATERPROOFING TERMINATIONS SHALL BE SEALED WITH POINTING MASTIC SEALANT. INCLUDING AROUND BRIDGE DRAIN HOLES.
10. PLACE PLAIN NEOPRENE STRIPS GLUED WITH EPOXY ALONG LONGITUDINAL EDGES OF SLAB UNITS, OMITTING LOCATIONS WHERE CFRP LAMINATES ARE PROVIDED, SEE DETAIL C. THE NEOPRENE STRIPS SHALL BE PLACED PRIOR TO THE APPLICATION OF METHACRYLATES (HMWM).
11. APPLY METHACRYLATES (HMWM) PER FDOT SPECIFICATION SECTION 413 AS SHOWN. OMIT APPLICATION OF SAND DURING METHACRYLATES (HMWM) APPLICATION. DO NOT APPLY METHACRYLATES (HMWM) OVER AREAS TO RECEIVE CFRP LAMINATES.
12. CLEAN AND SEAL ALL EXPOSED CONCRETE SURFACES INCLUDING UNDERSIDE OF SLAB UNITS, SIDEWALK, CURB, OVERHANG, EXCEPT WHERE CFRP LAMINATE IS PLACED.

BRIDGE DRAIN NOTES:

1. EXISTING DRAIN HOLES HAVE PREVIOUSLY FILLED WITH CONCRETE AND/OR COVERED WITH ASPHALT OVERLAY. CONTRACTOR TO REMOVE CONCRETE AND ASPHALT TO RESTORE BRIDGE DRAINS TO THEIR ORIGINAL CONDITION AS DETAILED ABOVE AT DRAIN LOCATIONS IDENTIFIED IN THESE PLANS (6 DRAINS). CONTRACTOR SHALL SUBMIT MEANS AND METHODS SUCH AS SAW CUTTING. CORE DRILLING (CORE DRILLING DIAMETER SHALL NOT EXCEED THE DIAMETER OF THE EXISTING DRAIN HOLES). DRILLING AND SHIPPING TO THE ENGINEER FOR REVIEW AND APPROVAL PRIOR TO PERFORMING THE WORK.
2. EXTEND EXISTING BRIDGE DRAINS BY CLEANING THE EXISTING EXPOSED PVC PIPE ENDS AND EPOXY GLUING NEW 4" DIAMETER PVC PIPE EXTENSIONS TO EXISTING PVC PIPES SO THAT THE PIPE EXTENSIONS EXTEND 2" MINIMUM BELOW BOTTOM OF SLAB UNITS.

Bridge No. 864005

REVISIONS				
DATE	NO.	REMARKS	BY	DATE

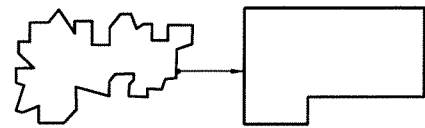
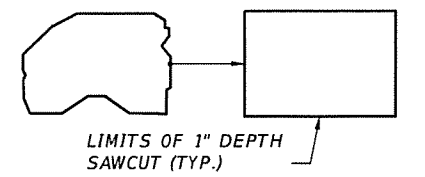
BROWARD COUNTY HIGHWAY AND BRIDGE MAINTENANCE DIVISION
1600 BLOUNT ROAD
POMPANO BEACH, FL 33069



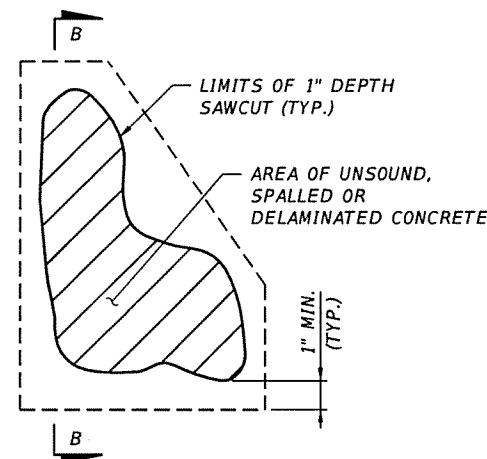
BRIDGE REPAIRS	
ROAD	HBMD PROJ. NO.
CORAL SPRINGS DR.	2022-1-119

CORAL SPRINGS DR. OVER W. OUTFALL CANAL	
DECK WATERPROOFING PROCEDURE (2 OF 2)	

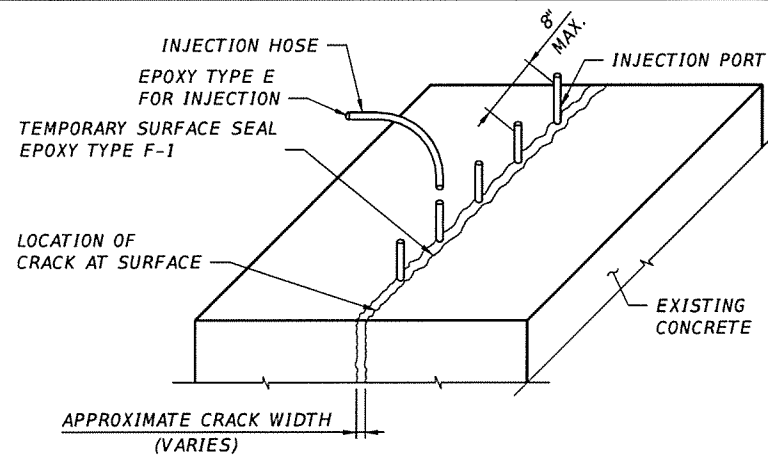
SHEET NO.
B1-9



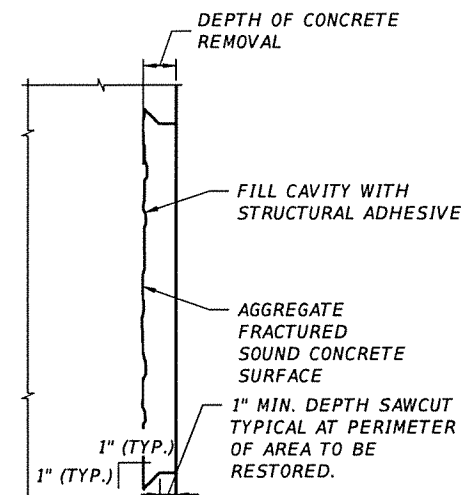
TYPICAL SPALL/DELAMINATION REPAIR CONFIGURATIONS



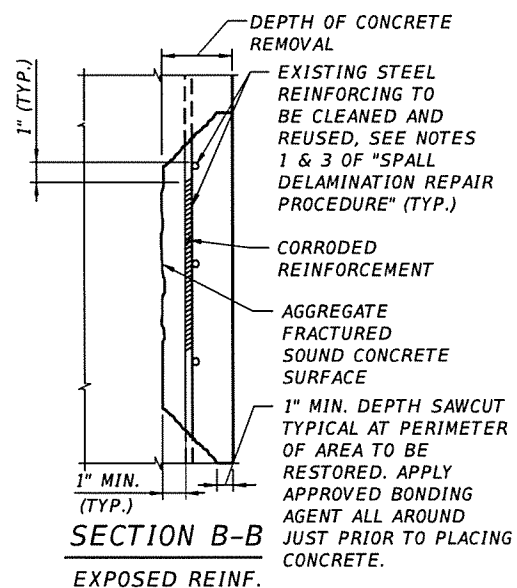
PARTIAL DEPTH REPAIR PLAN



EPOXY INJECT AND SEAL CRACK REPAIR



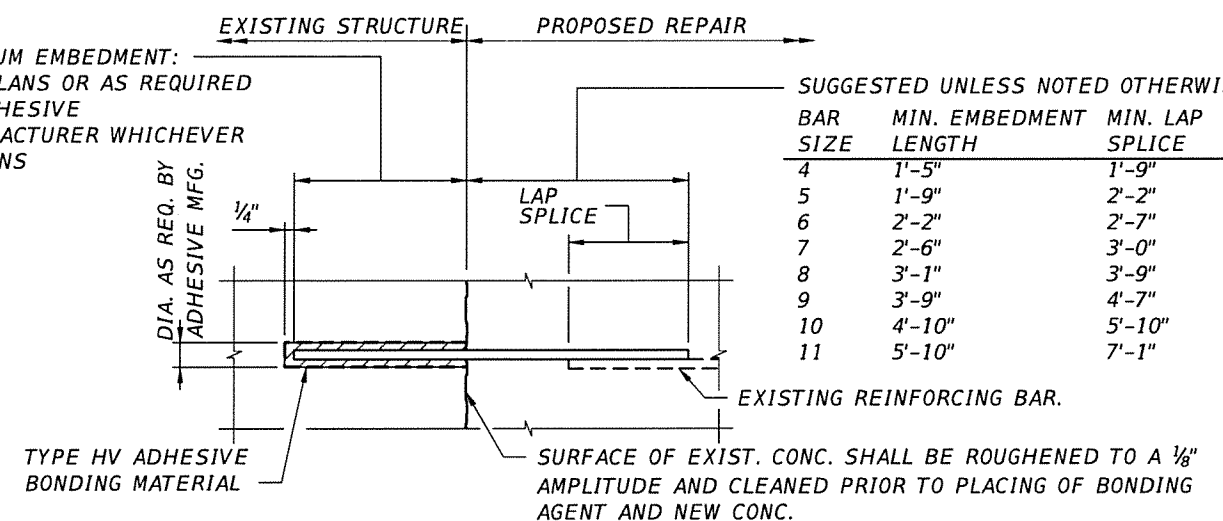
SECTION B-B NO EXPOSED REINF.



SECTION B-B EXPOSED REINF.

SPALL/DELAMINATION REPAIR DETAILS

MINIMUM EMBEDMENT: PER PLANS OR AS REQUIRED BY ADHESIVE MANUFACTURER WHICHEVER GOVERNS



DOWEL DETAIL

SUGGESTED UNLESS NOTED OTHERWISE:

BAR SIZE	MIN. EMBEDMENT LENGTH	MIN. LAP SPLICE
4	1'-5"	1'-9"
5	1'-9"	2'-2"
6	2'-2"	2'-7"
7	2'-6"	3'-0"
8	3'-1"	3'-9"
9	3'-9"	4'-7"
10	4'-10"	5'-10"
11	5'-10"	7'-1"

DOWEL PROCEDURE

- HOLES FOR DOWEL BARS SHALL BE SOUND AND THOROUGHLY CLEANED AS PER MANUFACTURER'S RECOMMENDATIONS PRIOR TO PLACING EPOXY AND DOWELS.
- HOLES SHALL HAVE A MINIMUM OF 3" CLEARANCE FROM THE EDGE OF THE CONCRETE.
- LENGTH OF DOWEL EMBEDMENT SHALL BE SET IN A STRUCTURAL ADHESIVE BONDING COMPOUND DESIGNATED AS TYPE HV. SEE FDOT APPROVED PRODUCTS LIST (APL) AND FDOT STANDARD SPECIFICATIONS SECTIONS 416 AND 937 FOR DETAILS.
- WHERE REINFORCING STEEL IS ENCOUNTERED, SHIFT THE HOLE TO CLEAR AND FILL THE UNUSED DRILLED HOLE WITH EPOXY.
- THE SUGGESTED MINIMUM REQUIRED EMBEDMENT LENGTH FOR DOWEL BARS EXTENDING INTO THE PROPOSED REPAIR IS SHOWN. THIS EMBEDMENT LENGTH MAY VARY AT LOCATIONS REQUIRING LAPPING TO PROPOSED REINFORCING, ETC. AS DETAILED IN THESE PLANS.

SPALL/DELAMINATION REPAIR PROCEDURE

- CONTRACTOR SHALL USE EXTREME CAUTION NOT TO DAMAGE EXISTING REINFORCING STEEL. REINFORCING STEEL SHALL BE MEDIA BLASTED TO A SSPC SP10 CONDITION. IF ANY REINFORCING STEEL IS DAMAGED, THE CONTRACTOR SHALL NOTIFY THE ENGINEER FOR ADDITIONAL INSTRUCTIONS ON THE APPLICABLE REPAIR. ANY REINFORCING STEEL THAT IS DAMAGED BY THE CONTRACTOR IS TO BE REPAIRED AT NO COST TO THE COUNTY.
- PROVIDE AN AGGREGATE-FRACTURED SOUND CONCRETE SURFACE WITH AN APPROXIMATE SURFACE PROFILE AMPLITUDE OF 1/8" BY USE OF SCRABBLER OR OTHER APPROPRIATE MEANS AS NECESSARY.
- IF THE EXISTING REINFORCEMENT HAS LOST MORE THAN 20% OF ITS CROSS SECTION, A NEW BAR OF EQUAL SIZE (DIAMETER) SHALL BE DRILLED AND EPOXIED WITH AN EMBEDDED LENGTH AND/OR LAP SPLICE AS INDICATED IN THESE PLANS. IN NO CASE SHALL ANY REBAR BE PLACED WITH A COVER LESS THAN EXISTING COVER.
- PLACE FORM WORK. FORM WORK MAY BE SUPPORTED BY STAINLESS STEEL INSERTS WHERE REQUIRED. STAINLESS STEEL INSERTS WILL BE LOCATED IN SOUND CONCRETE AND MAY REMAIN IN PLACE. STAINLESS STEEL INSERTS LEFT IN PLACE SHALL BE RECESSED AT LEAST 1" AND PATCHED.
- THE CONTRACTOR SHALL ADHERE TO THE REQUIREMENTS OF FDOT STANDARD SPECIFICATIONS SECTION 930. PLACE THE LATEX MODIFIED PORTLAND CEMENT MORTAR/CONCRETE IN ACCORDANCE WITH MANUFACTURER'S RECOMMENDATIONS.

GENERAL CRACK REPAIR PROCEDURE:

- ALL CRACKS CALLED OUT TO BE REPAIRED IN THESE PLANS ARE NON STRUCTURAL AND SHALL BE REPAIRED IN ACCORDANCE WITH SECTIONS 400-21, 411 AND 413 OF FDOT SPECIFICATIONS.
- SOUND TEST AROUND THE CRACKS PRIOR TO INJECTING TO ASSURE THAT IT IS NOT DELAMINATED. IF CONCRETE AROUND THE CRACK IS DELAMINATED, REPAIR AS A DELAMINATION PRIOR TO REPAIRING CRACK.
- EPOXY INJECTION CONCRETE WITH CRACKS WIDTH EQUAL OR GREATER THAN 3/16".
- USE TYPE F-1 COMPOUND EPOXY FOR SEALING CRACK SURFACES IN PREPARATION FOR INJECTION. REFER TO SECTION 411 OF STANDARD SPECIFICATIONS FOR ADDITIONAL INFORMATION. GRIND OFF THE EXCESS EPOXY AND PORTS TO THE EXISTING PROFILE AFTER EPOXY INJECTION IS COMPLETED AND EPOXY HAS SET.

Bridge No. 864005

REVISIONS				
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BROWARD COUNTY HIGHWAY AND BRIDGE MAINTENANCE DIVISION
1600 BLOUNT ROAD
POMPANO BEACH, FL 33069



BRIDGE REPAIRS	
ROAD	HBMD PROJ. NO.
CORAL SPRINGS DR.	2022-1-119

CORAL SPRINGS DR. OVER W. OUTFALL CANAL	
SPALL & CRACK REPAIR DETAILS	

SHEET NO.
B1-10



REPAIR UNSOUND PATCH
IN THE UNDERSIDE OF
SLAB UNIT 2-2.
SEE SPALL/ DELAMINATION
REPAIR PROCEDURE.

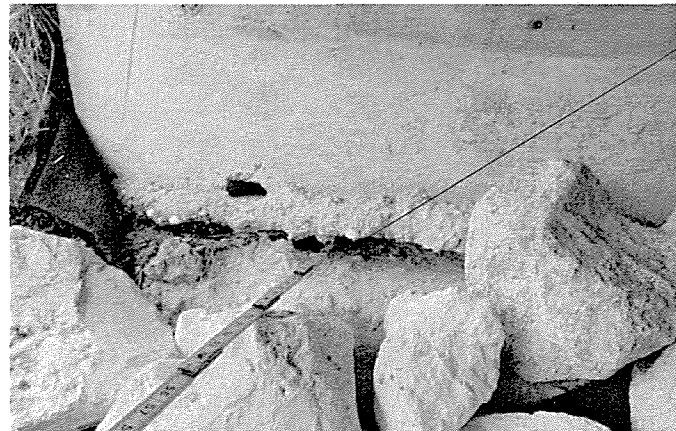
SLAB UNIT 2-2 AT MIDSPAN



REPAIR SPALLS AND DELAMINATIONS
IN THE UNDERSIDE OF THE SLAB
UNIT. SEE SPALL/DELAMINATION
REPAIR PROCEDURE.

UNIT 2-8 AT END BENT 3

NOTE:
THE OUTSIDE LANE OF THE BRIDGE LOCATED DIRECTLY ABOVE
THE BEAM SHALL BE CLOSED TO TRAFFIC DURING THE REPAIR.



CLEAN OUT GAP AND
FILL VOIDS COMPLETELY
WITH GROUT.

EAST OF END BENT 1

NOTES FOR END BENT 1 GAP REPAIRS:

1. REMOVE LOOSE MATERIAL.
2. CLEAN OUT CAP AND EXPOSED SURFACES.
3. FILL VOID WITH GROUT.
4. ADD STONE RIPRAP WITH A SIZE EQUAL OR LARGER THAN THE EXISTING ONE.

REMOVE VEGETATION



NORTHEAST APPROACH SIDEWALK

Bridge No. 864005

REVISIONS					BROWARD COUNTY HIGHWAY AND BRIDGE MAINTENANCE DIVISION 1600 BLOUNT ROAD POMPANO BEACH, FL 33069		BRIDGE REPAIRS		CORAL SPRINGS DR. OVER W. OUTFALL CANAL	SHEET NO.
DATE	NO.	REMARKS	BY	DATE			ROAD	HBMD PROJ. NO.		
							CORAL SPRINGS DR.	2022-1-119	CONSTRUCTION DETAILS	B1-11

MATERIAL NOTES

QUANTITIES

CFRP LAMINATES:

Carbon Fiber Fabric	Renewwrap EST CF600	Sikagard Hex 103C	Tyfo SCH-41
Laminating Epoxy	Renewwrap ESR Saturant	Sikagard Hex 300	Tyfo S
UV Coating	Sikagard 670 W (Gray Color)	Sikagard 670 W (Gray Color)	Tyfo A Paint

MATERIALS AND INSTALLATION SHALL CONFORM TO THE TECHNICAL SPECIAL PROVISIONS (TSP) T100 AND NCHRP 609 ATTACHMENT A. BOTH FIBER AND EPOXY MUST COME FROM THE SAME MANUFACTURER.

1 PLY CFRP LAMINATE QUANTITY			
LENGTH (FT.)	WIDTH (FT.)	No. OF LAMINATES	QUANTITY (SQFT.)
12.00	2.083	24	599.90
10.00	2.083	8	166.64
TOTAL CFRP QUANTITIES			766.54

CONCRETE PATCHING:

Material Type	Compressive Strength, PSI		
	1 Day	7 Days	28 Days
Planitop XS	3000	4000	5000
MasterEmaco S 440CI	2500	5300	6500
Sika-Repair 223	3500	6000	7500

DOWEL STEEL BAR:

DOWEL STEEL BARS SHALL BE GRADE 60 IN ACCORDANCE WITH ASTM A955/A955M-20 STANDARD SPECIFICATIONS FOR DEFORMED STAINLESS STEEL BARS FOR CONCRETE REINFORCEMENT.

SS. DOWEL BAR QUANTITY						
BAR NAME	BAR SIZE	LENGTH		No. OF BARS	QUANTITY (FT.)	TYPE
		FT	IN			
6A1	#6	11	9	16	188.0	TYPE 1
6A2	#6	12	0	32	384.0	TYPE 1
6A3	#6	9	9	16	156.0	TYPE 1
4A4	#4	4	0	35	140.0	TYPE II
TOTAL BAR QUANTITIES					868.0	

BONDING EPOXY:

Structural Adhesive	Horizontal & Vertical Application	Overhead Application	Underwater Application
	Dayton Superior Sure Anchor I J51	Sikadur 31 Hi-Mod Gel	Pilgrim Magmaflow Type K
	ET-HP Epoxy	Euclid Chemical Dural 452 Gel	
	Pilgrim RS-600		

WATERPROOFING MEMBRANE:

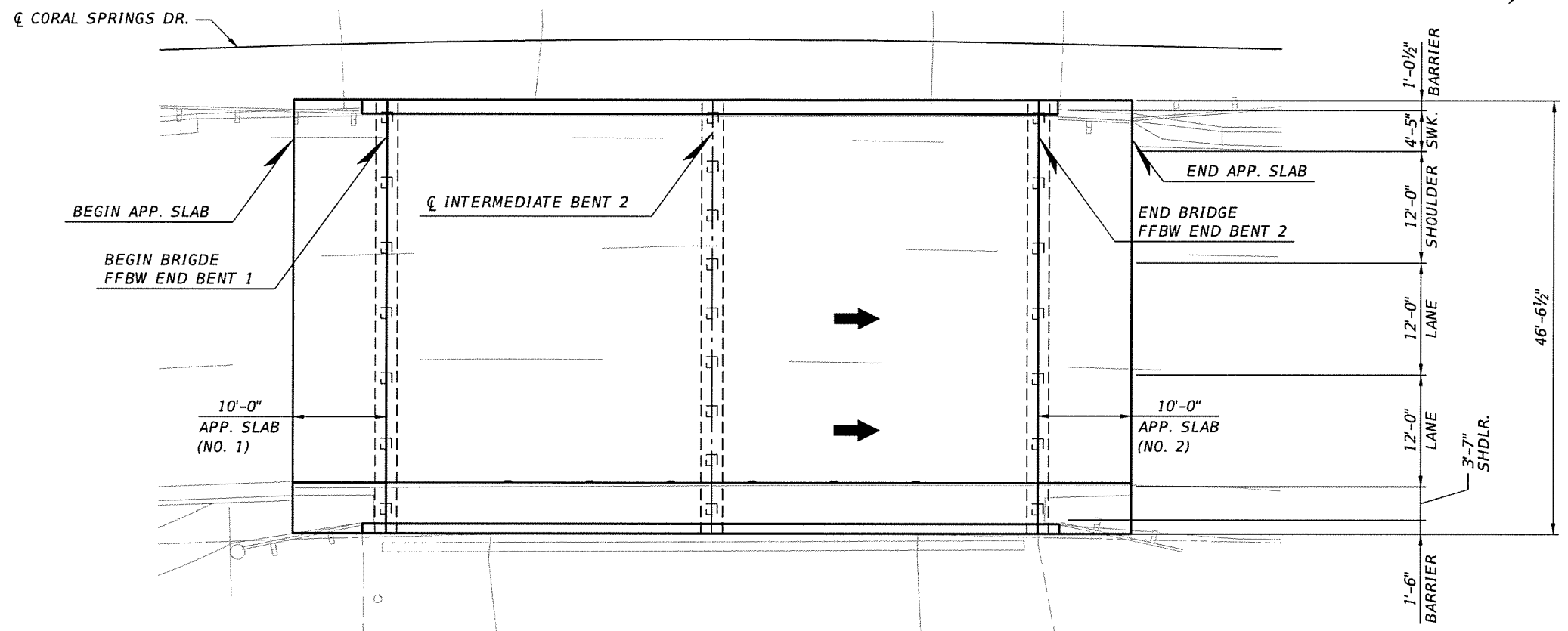
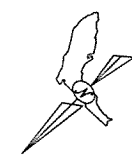
WATERPROOFING MEMBRANE SHALL CONFORM WITH FDOT SPECIFICATION SECTION 518 "PAVEMENT WATERPROOFING FABRIC" DATED 2000, LOCATED AT:
<https://www.fdot.gov/docs/default-source/programmanagement/Implemented/SpecBooks/2000/Files/2000Book.pdf>
 AND MANUFACTURER'S SPECIFICATION.

Waterproofing Membrane	Polyguard NW-75
	Crafco PavePrep SA CRA
	MEL-DEK SealTight

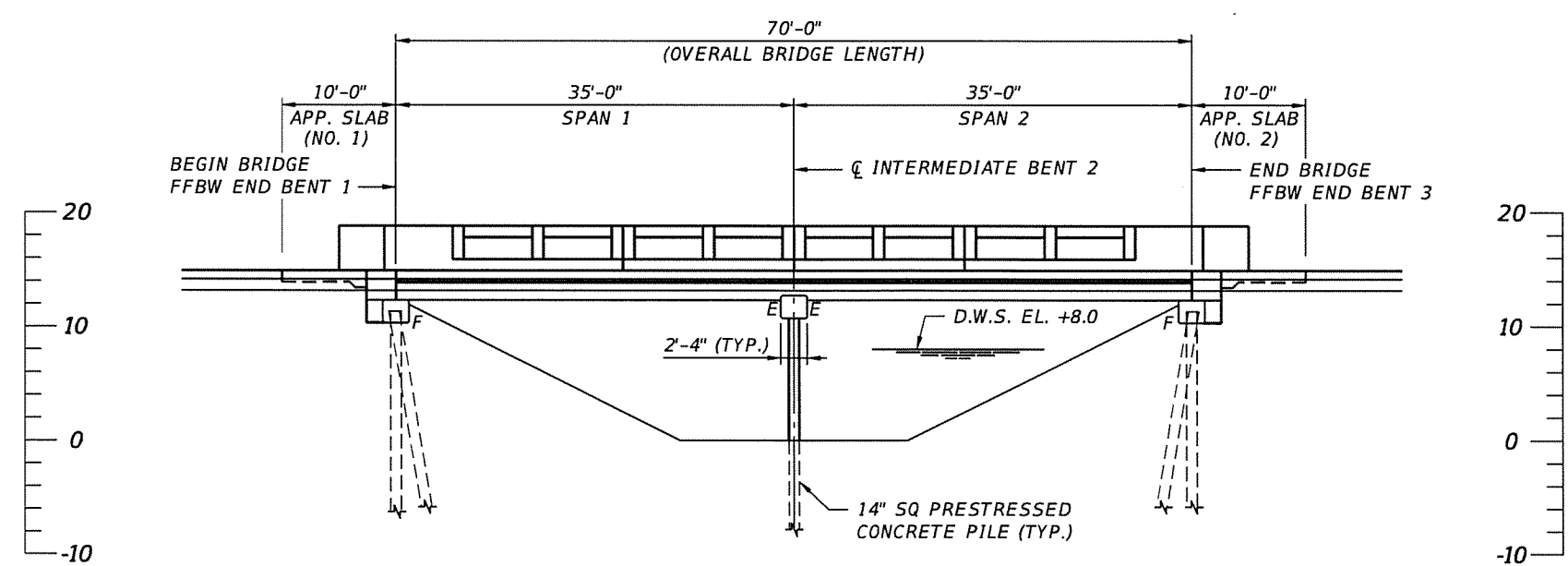
PAY ITEM QUANTITIES - BRIDGE 864006			
Item No.	Description	Quantity	Unit
1	FDOT PAY ITEM 101-1: MOBILIZATION, NIGHT WORK	1	EACH
5	FDOT PAY ITEM 102-14: TRAFFIC CONTROL OFFICER	208	HOUR
6	FDOT PAY ITEM 102-60: WORK ZONE SIGNS, F & I	192	DAY
10	FDOT PAY ITEM 102-71-1B: BARRIER WALL, TEMPORARY, F&I, WATERFILLED, UP TO 30 DAYS	90	LINEAR FOOT
16	FDOT PAY ITEM 102-74-1: CHANNELIZING DEVICE, TYPES I, II, DI, VP, DRUM, OR LCD, F & I	3115	DAY
24	FDOT PAY ITEM 102-76: ARROW BOARD / ADVANCE WARNING ARROW PANEL, F & I	26	DAY
26	FDOT PAY ITEM 102-99: PORTABLE CHANGEABLE MESSAGE SIGN, TEMPORARY, F & I	151	DAY
36	FDOT PAY ITEM 104-11: FLOATING TURBIDITY BARRIER	70	LINEAR FOOT
45	FDOT PAY ITEM 110-3-5: REMOVAL OF EXISTING BRIDGE JOINT	125	LINEAR FOOT
49	FDOT PAY ITEM 110-4-10A: REMOVAL OF EXISTING CONCRETE-SIDEWALK, PAVEMENT OR SLOPE PAVEMENT ANY THICKNESS	234	SQUARE YARD
68	FDOT PAY ITEM 173-71: DRILLING HOLES FOR PRESSURE GROUTING FOR PIPE UP TO 4 INCH INSIDE DIA	9	LINEAR FOOT
69	FDOT PAY ITEM 173-76: GROUT PIPE INSTALLATION UP TO 4 IN. INSIDE DIA	2	LINEAR FOOT
81	FDOT PAY ITEM 327-70-8: MILLING EXIST ASPH PAVT, 2 1/2 IN AVG DEPTH	394	SQUARE YARD
88	FDOT PAY ITEM 334-1-52, 334-1-53, 334-1-54, OR 334-1-55: SUPERPAVE ASPHALTIC CONCRETE, TRAFFIC B, C, D, OR E, PG 76-22	55	TONS
89	FDOT PAY ITEM 337-7-80, 337-7-81, 337-7-82, 337-7-83, 337-7-85, OR 337-7-88: ASPHALT CONCRETE FRICTION COURSE, TRAFFIC B, C, D, OR E, FC-9.5, FC-12.5 PG 76-22	55	TONS
99	FDOT ITEM # N/A: PAVEMENT WATERPROOFING FABRIC	3911	SQUARE FOOT
129	FDOT PAY ITEM N/A: STAINLESS STEEL DOWEL (LF)	868	LINEAR FOOT
155	FDOT PAY ITEM 400-145B: CLEANING CONCRETE SURFACE, EQUAL OR GREATER THAN 500 SF	395	SQUARE FOOT
158	FDOT PAY ITEM 400-148: PLAIN NEOPRENE BEARING PADS	5	CUBIC FOOT
160	FDOT PAY ITEM 401-70-1B: RESTORE SPALLED AREAS, STRUCTURES, TYPE F-1 EPOXY	9	CUBIC FOOT
165	FDOT PAY ITEM 413-154A: CLEANING AND SEALING CONCRETE SURFACES: METHACRYLATES, EQUAL OR GREATER THAN 500 SF	4285	SQUARE FOOT
188	FDOT PAY ITEM 458-1-21A: BRIDGE DECK EXPANSION JOINT, REHABILITATION, POURED JOINT WITH BACKER ROD (TYPE D SILICONE)	125	LINEAR FOOT
192	FDOT PAY ITEM 458-2: POLYMER NOSING (XJS SYSTEMS) FOR BRIDGE DECK EXPANSION JOINT WITH POURED JOINT WITH BACKER ROD	29	CUBIC FOOT
227	FDOT PAY ITEM N/A: CARBON FIBER REINFORCED POLYMER (CFRP) LAMINATE FOR STRUCTURES OVER WATER	767	SQUARE FOOT
250	FDOT PAY ITEM N/A: ADA COMPLIANT CURB RAMP, SINGLE DIRECTION	2	EACH
251	FDOT PAY ITEM N/A: ADA COMPLIANT CURB RAMP, TWO-DIRECTION	3	EACH
252	FDOT PAY ITEM N/A: DETECTABLE WARNING ON EXISTING WALKING SURFACE, CAST-IN-PLACE, F & I	70	SQUARE YARD
374	FDOT PAY ITEM 706-1-1: RETRO-REFLECTIVE PAVEMENT MARKERS	8	SQUARE YARD
375	FDOT PAY ITEM 710-11-101, 710-11-201, OR 710-11-421: PAINTED PAVEMENT MARKINGS, STANDARD, WHITE, YELLOW, OR BLUE, SOLID, 6 IN	180	LINEAR FOOT
380	FDOT PAY ITEM 710-11-131 OR 710-11-231: PAINTED PAVEMENT MARKINGS, STANDARD, WHITE OR YELLOW, SKIP, 10-30 OR 3-9 SKIP, 6 IN WIDE	180	LINEAR FOOT
385	FDOT PAY ITEM 711-16-101 OR 711-16-201: THERMOPLASTIC, STANDARD, WHITE OR YELLOW, SOLID, 6 IN	180	LINEAR FOOT
390	FDOT PAY ITEM 711-16-131 OR 711-16-231: THERMOPLASTIC, STANDARD, WHITE OR YELLOW, SKIP, 10-30 OR 3-9 SKIP, 6 IN	180	LINEAR FOOT
415	FDOT PAY ITEM N/A: WORK SKIFF	42	DAY
430	FDOT PAY ITEM N/A: PORTABLE TOILET, SINGLE STALL	13	WEEK
431	FDOT PAY ITEM N/A: LIGHT TOWER, AMIDA/TEREX AL4000 OR EQUIVALENT	24	DAY
437	PASS-THRU: PERMITS AND FEES	1	EACH

Bridge No. 864006

REVISIONS					BROWARD COUNTY HIGHWAY AND BRIDGE MAINTENANCE DIVISION 1600 BLOUNT ROAD POMPANO BEACH, FL 33069		BRIDGE REPAIRS		CORAL SPRINGS DR. OVER W. OUTFALL CANAL	SHEET NO. B2-1
DATE	NO.	REMARKS	BY	DATE			ROAD	HBMD PROJ. NO.		
									CORAL SPRINGS DR.	2022-1-119



PLAN



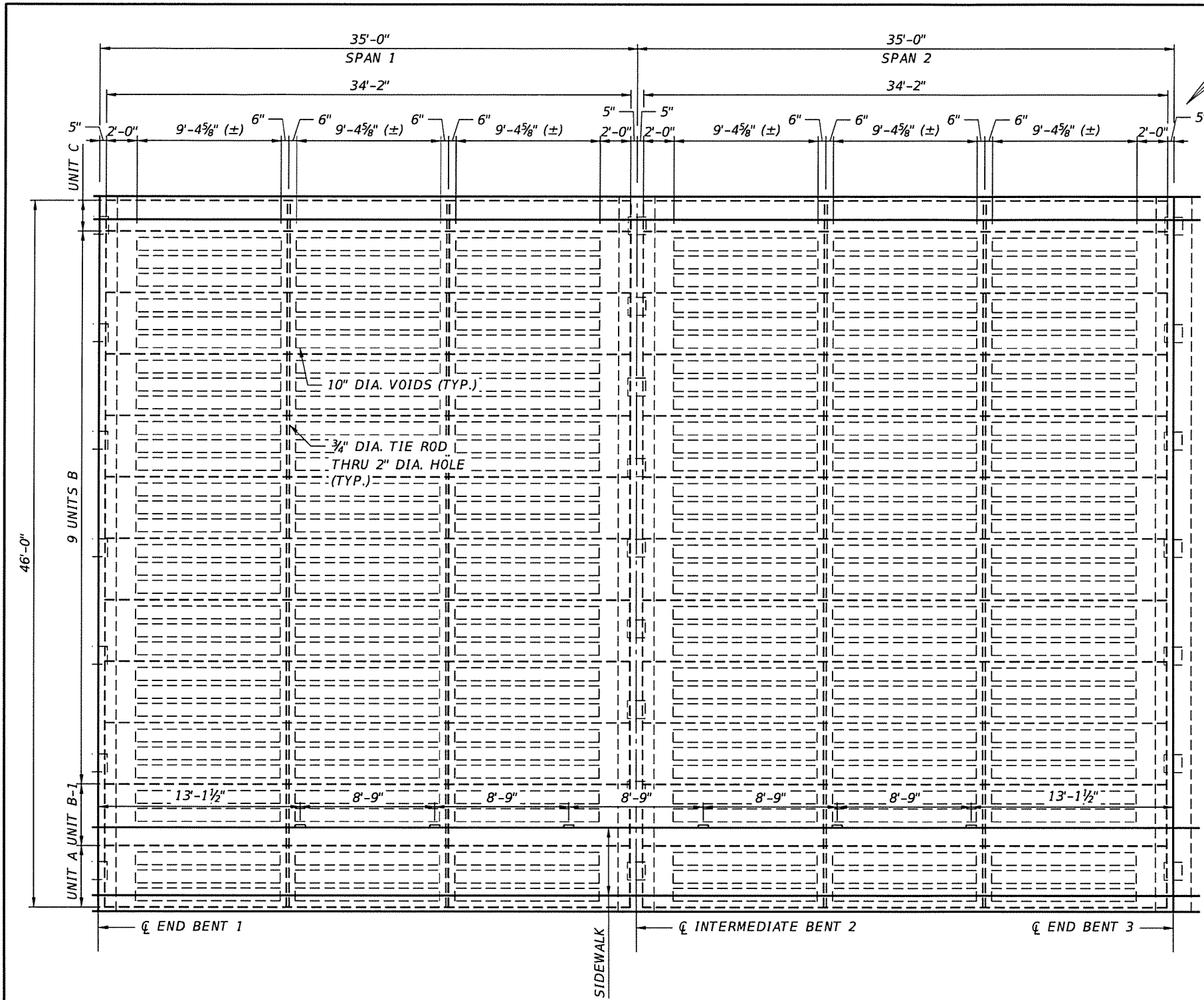
ELEVATION

NOTES:

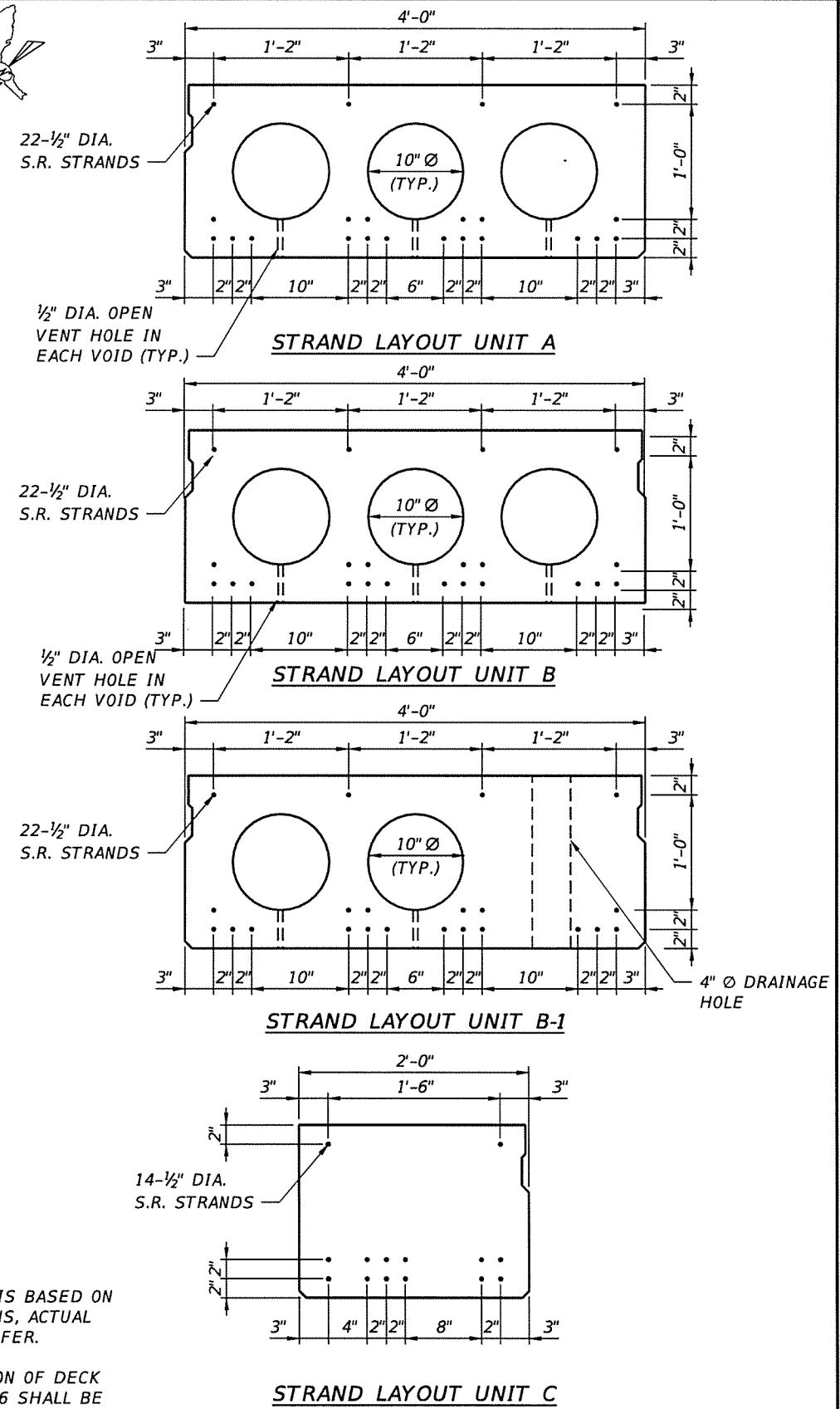
1. UTILITIES ARE NOT SHOWN FOR CLARITY.
2. FOR LIMITS OF MILLING, RESURFACING AND PAVEMENT MARKINGS, REFER TO ROADWAY PLAN SHEET.
3. FOR TRAFFIC MARKINGS, MATCH EXISTING. FOR TRAFFIC MARKINGS DETAILS, REFER TO PAVEMENT MARKINGS AND SIGNS PLAN OF BROWARD COUNTY.

Bridge No. 864006

REVISIONS					BROWARD COUNTY HIGHWAY AND BRIDGE MAINTENANCE DIVISION 1600 BLOUNT ROAD POMPANO BEACH, FL 33069		BRIDGE REPAIRS		CORAL SPRINGS DR. OVER W. OUTFALL CANAL	SHEET NO.
DATE	NO.	REMARKS	BY	DATE			ROAD	HBMD PROJ. NO.		
							CORAL SPRINGS DR.	2022-1-119	PLAN AND ELEVATION	B2-2



PLAN



NOTES:

1. STRAND SPACING SHOWN IS BASED ON AVAILABLE EXISTING PLANS, ACTUAL STRAND SPACING MAY DIFFER.
2. THE NUMBER AND LOCATION OF DECK DRAINS ON BRIDGE 864006 SHALL BE FIELD VERIFIED UPON REMOVAL OF ASPHALT OVERLAY.

Bridge No. 864006

REVISIONS				
DATE	NO.	REMARKS	BY	DATE

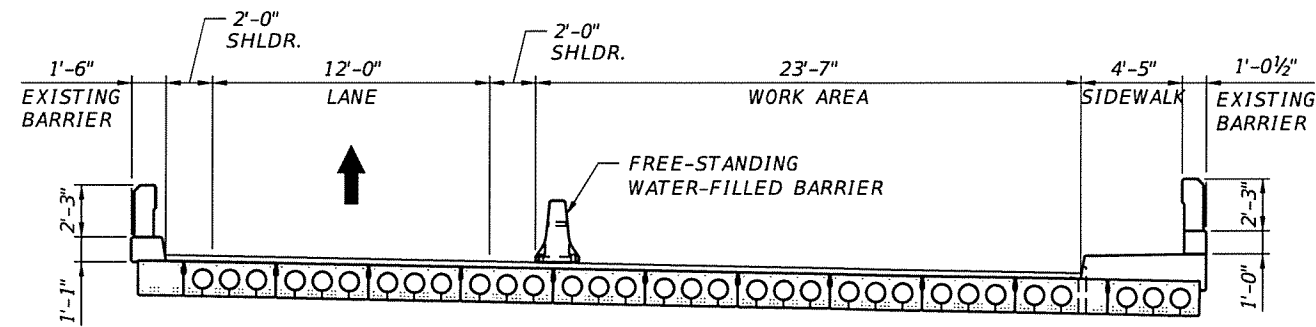
BROWARD COUNTY HIGHWAY AND
BRIDGE MAINTENANCE DIVISION
1600 BLOUNT ROAD
POMPANO BEACH, FL 33069



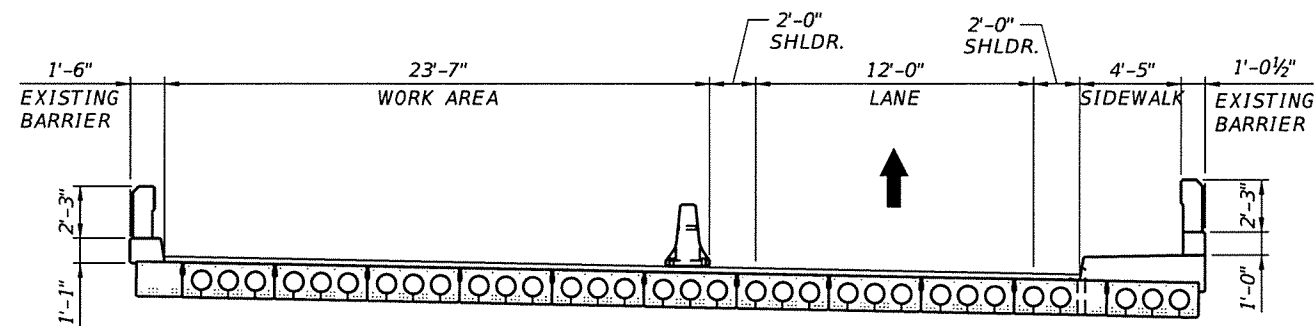
BRIDGE REPAIRS	
ROAD	HBMD PROJ. NO.
CORAL SPRINGS DR.	2022-1-119

CORAL SPRINGS DR. OVER W. OUTFALL CANAL	
PRESTRESSED SLAB UNIT LAYOUT PLAN	

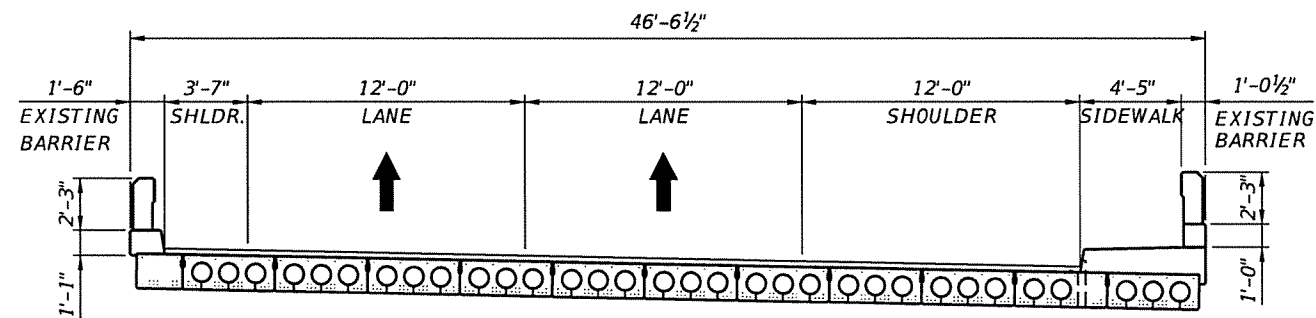
SHEET NO.
B2-3



TYPICAL SECTION
(PHASE I)



TYPICAL SECTION
(PHASE II)



TYPICAL SECTION
(FINAL)

NOTES:

1. REFER TO FDOT STANDARD PLANS INDEX 102-613 "MULTILANE ROADWAY, LANE CLOSURES."
2. REFER TO FDOT STANDARD PLANS INDEX 102-600 "GENERAL INFORMATION FOR TRAFFIC CONTROL THROUGH WORK ZONES". FOR GENERAL TRAFFIC GUIDELINES AND STANDARDS.
3. FOR BOTH PHASES, MILL EXISTING ASPHALT OVERLAY, INSTALL WATERPROOFING MEMBRANE, AND PAVE NEW ASPHALT OVERLAY, SEE DECK WATERPROOFING PROCEDURE SHEET AND ROADWAY PLAN SHEET FOR DETAILS.
4. CONTRACTOR SHALL NOTIFY ENGINEER AT A MINIMUM 2 WEEKS PRIOR TO LANE CLOSURES.

Bridge No. 864006

REVISIONS				
DATE	NO.	REMARKS	BY	DATE

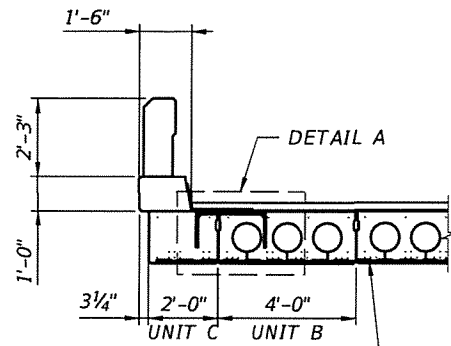
BROWARD COUNTY HIGHWAY AND
BRIDGE MAINTENANCE DIVISION
1600 BLOUNT ROAD
POMPANO BEACH, FL 33069



BRIDGE REPAIRS	
ROAD	HBMD PROJ. NO.
CORAL SPRINGS DR.	2022-1-119

CORAL SPRINGS DR. OVER W. OUTFALL CANAL	
CONSTRUCTION SEQUENCE	

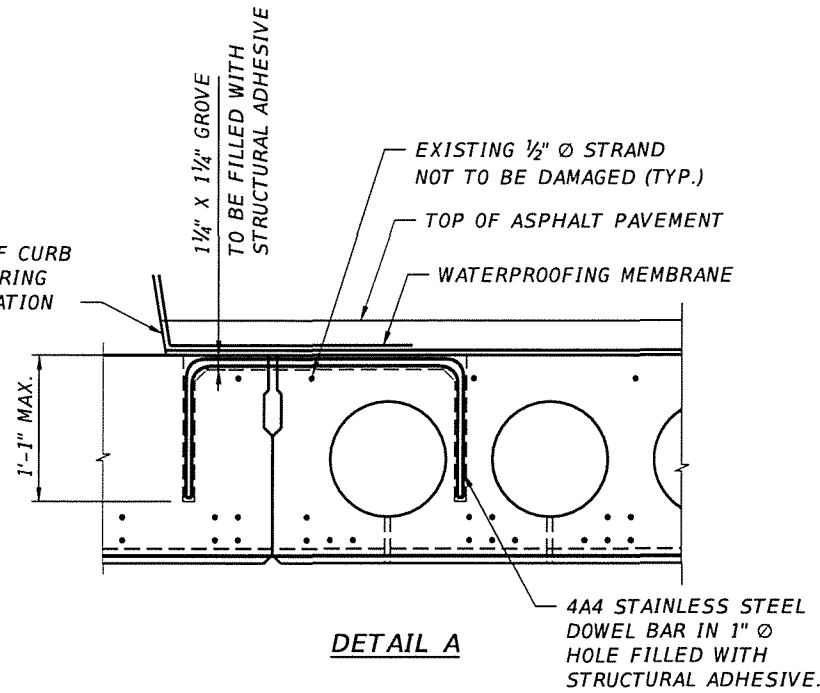
SHEET NO.
B2-4



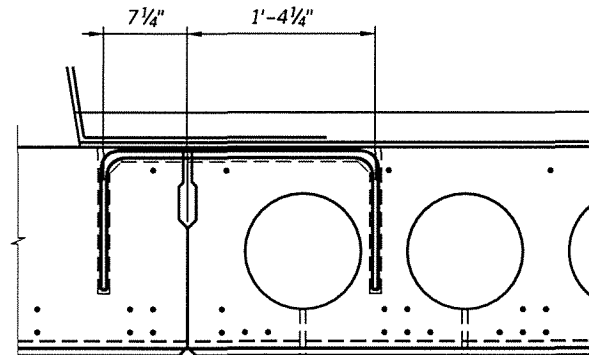
SECTION

4A4 S.S. BAR IN 1 1/4" GROVE AND CFRP LAMINATE, SEE UNDERDECK STRENGTHENING PROCEDURE SHEET.

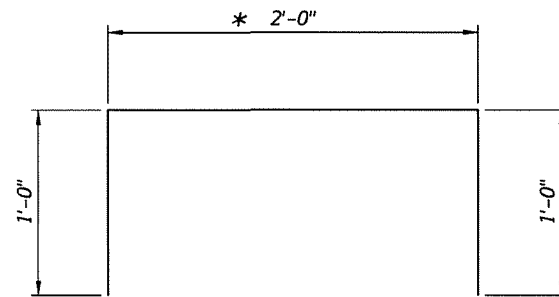
REPAIR EDGE OF CURB IF DAMAGED DURING DOWEL INSTALLATION



DETAIL A



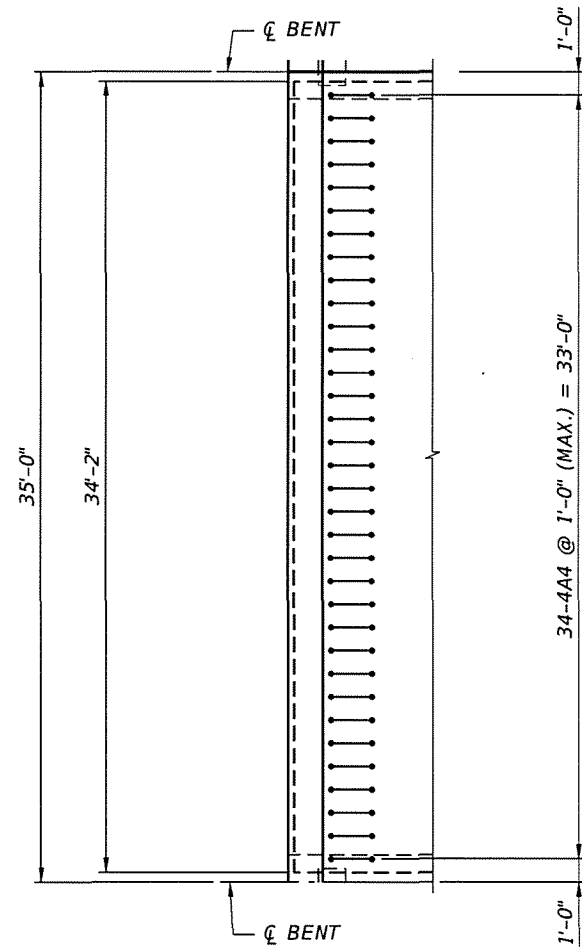
DETAIL A



TYPE 11
4A4 DOWEL BAR

* FIELD ADJUST AS REQUIRED TO AVOID CONFLICT WITH EXISTING STRANDS

BAR BENDING DETAIL



PARTIAL DECK PLAN

NOTES:

1. CONTRACTOR TO NOTIFY ENGINEER AFTER ASPHALT HAS BEEN REMOVED. ENGINEER TO MARK LOCATION OF EXISTING REINFORCEMENT AND VERIFY DOWEL LAYOUT PRIOR TO DRILLING.
2. NO DRILLING OR CUTTING IS ALLOWED UNTIL CONCRETE COVER TO EXISTING STRANDS HAS BEEN FIELD VERIFIED BY THE ENGINEER.
3. TOP OF DECK DOWEL INSTALLATION SHALL BE COMPLETED PRIOR TO WATERPROOFING MEMBRANE INSTALLATION.
4. SHIFT DOWEL HOLE LOCATIONS IF EXISTING REINFORCING STEEL IS ENCOUNTERED. FILL UNUSED DRILLED HOLES WITH EPOXY. DOWEL SPACING TO BE FIELD ADJUSTED TO AVOID CONFLICTS AS REQUIRED, PROVIDED TOTAL NUMBER OF DOWELS IS MAINTAINED. CUTTING OF GROOVES SHALL ONLY OCCUR AFTER HOLES HAVE BEEN DRILLED AT FINAL LOCATIONS.

PROCEDURE:

1. MILL EXISTING ASPHALT OVERLAY TO TOP OF DECK. DO NOT DAMAGE THE TOPS OF THE PRECAST PRESTRESSED CONCRETE SLAB UNITS. CONTRACTOR TO NOTIFY ENGINEER AFTER ASPHALT OVERLAY HAS BEEN REMOVED AND VERIFY THICKNESS OF EXISTING ASPHALT.
2. REPAIR ALL DELAMINATIONS AND SPALLS ON THE TOPS OF THE PRECAST PRESTRESSED CONCRETE SLAB UNITS, AS PER DETAILS ON SPALL AND CRACK REPAIR DETAILS SHEET.
3. DRILL HOLES AND CUT GROOVES TO RECEIVE #4 STAINLESS STEEL DOWEL BARS BETWEEN EXTERIOR SLAB UNIT C AND FIRST INTERIOR SLAB UNIT B.
4. FILL HOLES AND GROOVES WITH EPOXY.
5. CLEAN DECK SURFACE TO REMOVE DUST AND OTHER DELETERIOUS MATERIAL.
6. REFER TO NOTES ON DECK WATERPROOFING PROCEDURE SHEET.

Bridge No. 864006

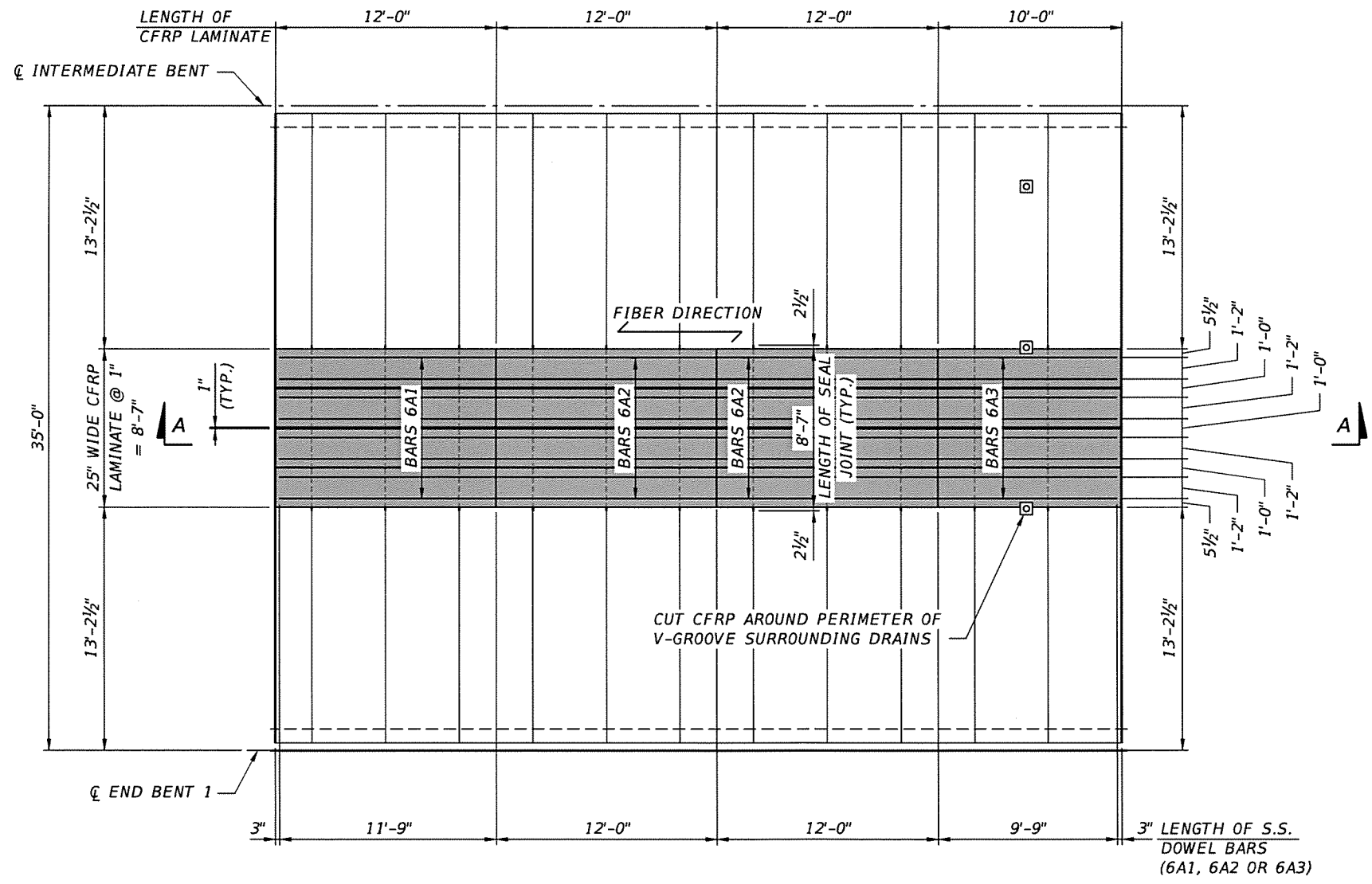
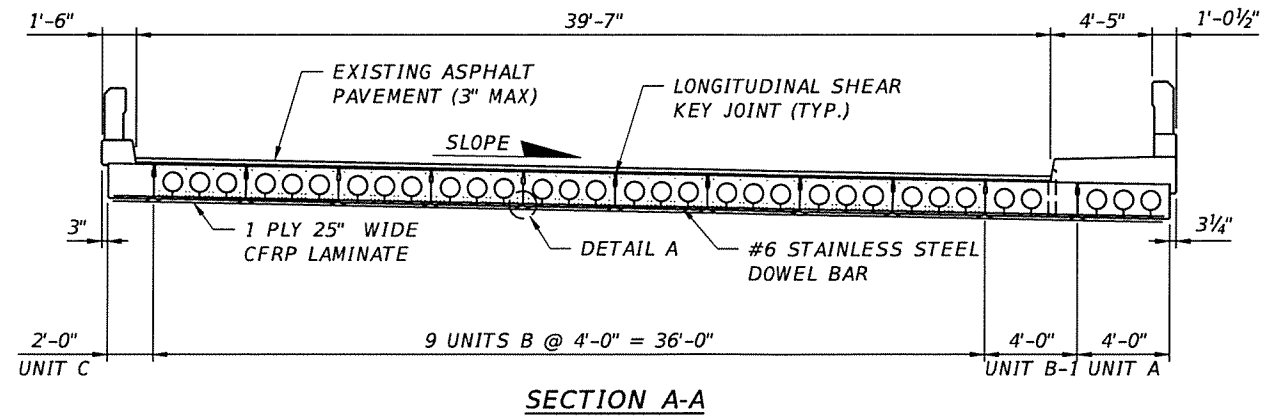
REVISIONS				
DATE	NO.	REMARKS	BY	DATE

BROWARD COUNTY HIGHWAY AND
BRIDGE MAINTENANCE DIVISION
1600 BLOUNT ROAD
POMPANO BEACH, FL 33069



BRIDGE REPAIRS	
ROAD	HBMD PROJ. NO.
CORAL SPRINGS DR.	2022-1-119

CORAL SPRINGS DR. OVER W. OUTFALL CANAL	SHEET NO.
TOP OF DECK STRENGTHENING PROCEDURE	B2-5



- NOTES:**
1. FOR DETAIL A SEE UNDERDECK STRENGTHENING PROCEDURE (2 OF 2) SHEET.
 2. FOR ADDITIONAL NOTES SEE UNDERDECK STRENGTHENING PROCEDURE (2 OF 2) SHEET.
 3. CFRP LAMINATE WIDTH VARIES BASED ON MANUFACTURER. CONTRACTOR TO NOTIFY ENGINEER OF FINAL CFRP MANUFACTURER SELECTION SO 25" WIDTH MAY BE ADJUSTED ACCORDINGLY.

UNDERDECK PLAN
(SPAN 1 SHOWN, SPAN 2 SIMILAR)

Bridge No. 864006

REVISIONS				
DATE	NO.	REMARKS	BY	DATE

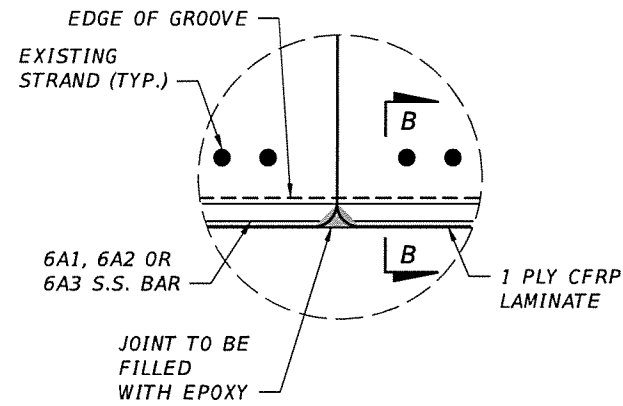
BROWARD COUNTY HIGHWAY AND
BRIDGE MAINTENANCE DIVISION
1600 BLOUNT ROAD
POMPANO BEACH, FL 33069



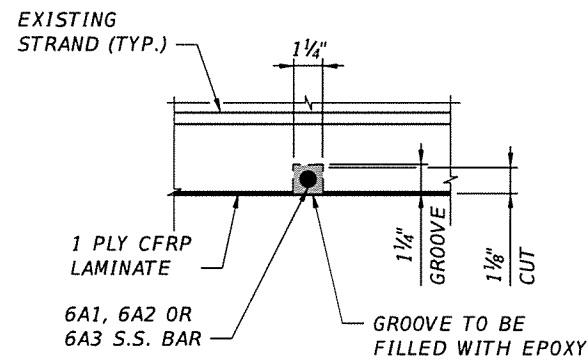
BRIDGE REPAIRS	
ROAD	HBMD PROJ. NO.
CORAL SPRINGS DR.	2022-1-119

CORAL SPRINGS DR. OVER W. OUTFALL CANAL	
UNDERDECK STRENGTHENING PROCEDURE (1 OF 2)	

SHEET NO.
B2-6



DETAIL A



SECTION B-B

NOTES:

1. CONTRACTOR TO NOTIFY ENGINEER AFTER THE LOCATION OF GROOVES HAS BEEN STRING LINED FOR APPROVAL BY THE ENGINEER.
2. NO CUTTING IS ALLOWED UNTIL CONCRETE COVER TO EXISTING STRANDS HAS BEEN FIELD VERIFIED BY THE ENGINEER.
3. THE 1/8" DEEP CUT AS SHOWN ON THIS SHEET MAY BE ADJUSTED BY THE ENGINEER BASED ON FIELD COVER MEASUREMENTS.

PROCEDURE:

1. SAWCUT (8) TRANSVERSE 1/4"x1/8" GROOVES BY WAY OF 2 ADJACENT SAWCUTS AND CHIP OUT INTERSTITIAL CONCRETE BETWEEN SAWCUTS TO ACHIEVE A FINAL 1/4" DEPTH. CIRCULAR SAW TO BE MOUNTED ON STEEL TRACKS ALONG THE GROOVE PATH.
2. CLEAN GROOVES THOROUGHLY OF DIRT AND DUST WITH HIGH PRESSURE AIR COMPRESSOR.
3. PLACE #6 STAINLESS STEEL DOWEL BARS (6A1, 6A2 or 6A3) CENTERED WITHIN THE GROOVES. USE STAINLESS STEEL SELF DRILLING SCREWS TO SECURE THE BARS.
4. DOWEL BARS SHALL NOT BUTT UP AGAINST STRANDS. IN CASES WHERE DOWEL BARS MUST BUTT UP AGAINST STRANDS, SEPERATE DOWEL BARS FROM STRANDS WITH DIELECTRIC TAPE.
5. INSERT EPOXY TO FILL ALL EMPTY SPACE WITHIN THE GROOVES, ALL AROUND THE STAINLESS STEEL DOWELS.
6. FILL LONGITUDINAL JOINTS BETWEEN SLAB UNITS WITH EPOXY TO THE LIMITS SHOWN IN THESE PLANS.
7. CLEAN AND PATCH ALL EXPOSED SPALLS AND DELAMINATIONS. SEE SPALL AND CRACK REPAIR DETAILS SHEET.
8. PREPARE CONCRETE SURFACE TO RECEIVE CFRP LAMINATES PER TSP T100.
9. APPLY CFRP LAMINATES PER TSP T100.
10. APPLY UV PROTECTIVE COATING.

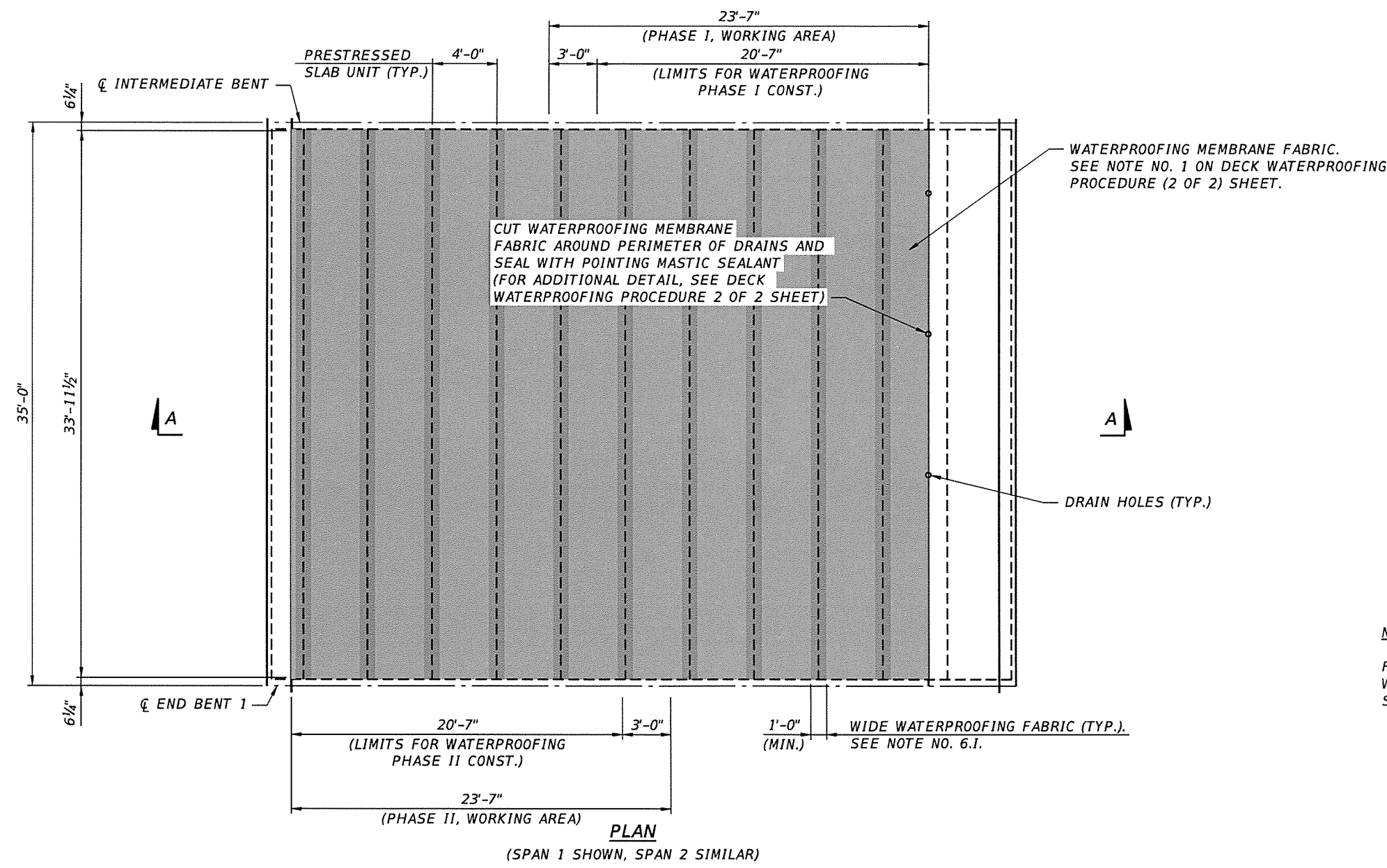
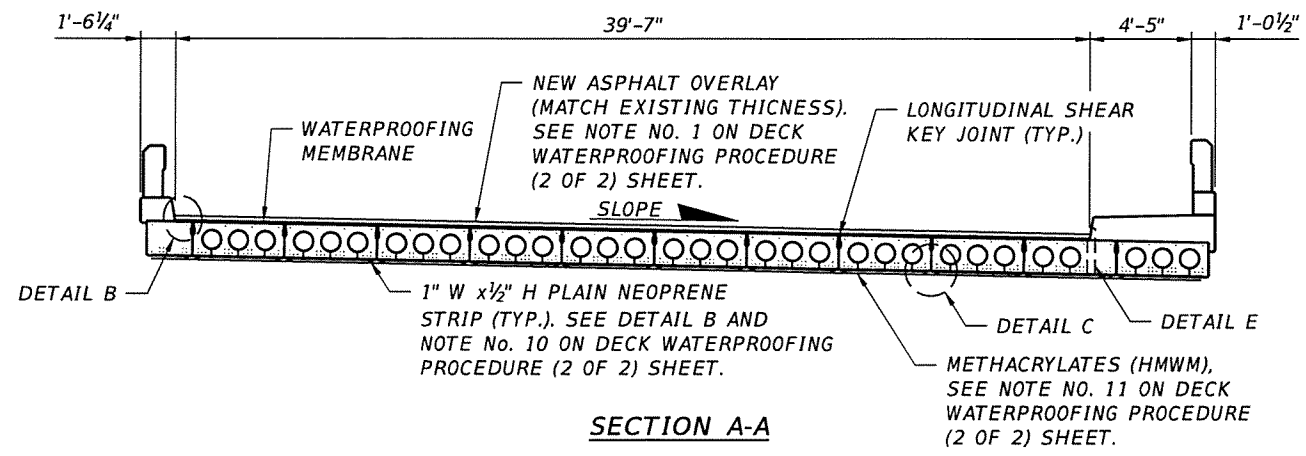
Bridge No. 864006

REVISIONS				
DATE	NO.	REMARKS	BY	DATE

BROWARD COUNTY HIGHWAY AND
BRIDGE MAINTENANCE DIVISION
1600 BLOUNT ROAD
POMPANO BEACH, FL 33069



BRIDGE REPAIRS		CORAL SPRINGS DR. OVER W. OUTFALL CANAL	SHEET NO.
ROAD	HBMD PROJ. NO.	UNDERDECK STRENGTHENING PROCEDURE (2 OF 2)	B2-7
CORAL SPRINGS DR.	2022-1-119		



NOTE:
FOR DETAILS AND NOTES, SEE DECK WATERPROOFING PROCEDURE (3 OF 3) SHEET.

Bridge No. 864006

REVISIONS				
DATE	NO.	REMARKS	BY	DATE

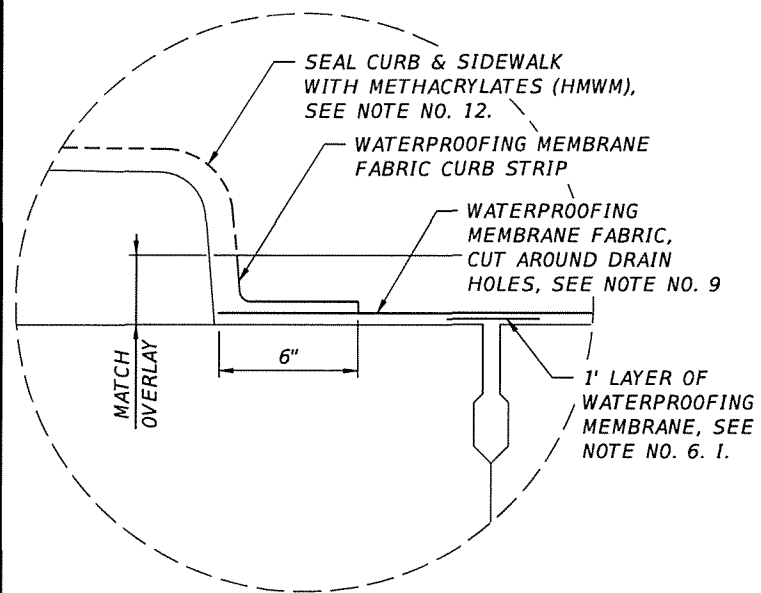
BROWARD COUNTY HIGHWAY AND
BRIDGE MAINTENANCE DIVISION
1600 BLOUNT ROAD
POMPANO BEACH, FL 33069



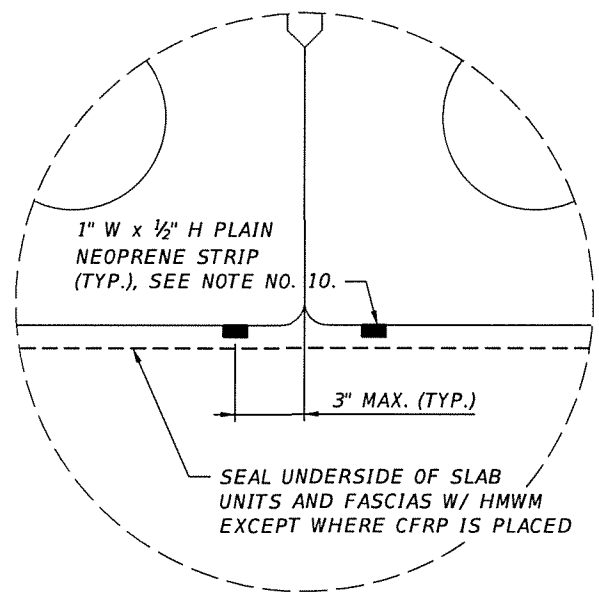
BRIDGE REPAIRS	
ROAD	HBMD PROJ. NO.
CORAL SPRINGS DR.	2022-1-119

CORAL SPRINGS DR. OVER W. OUTFALL CANAL	
DECK WATERPROOFING PROCEDURE (1 OF 2)	

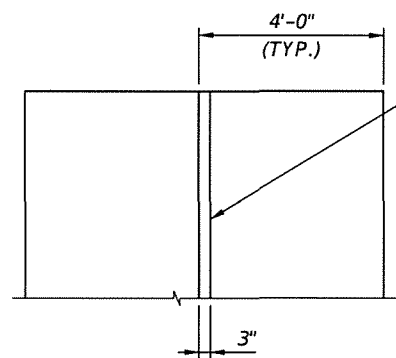
SHEET NO.
B2-8



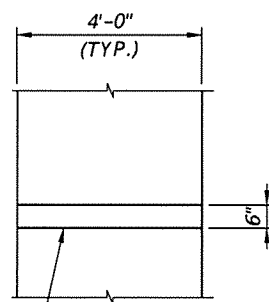
DETAIL B



DETAIL C

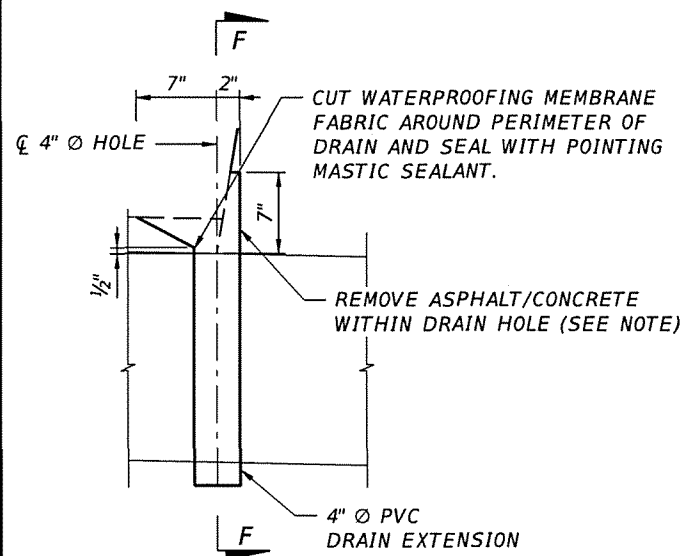


TYPICAL TRANSVERSE OVERLAP FOR WATERPROOFING MEMBRANES

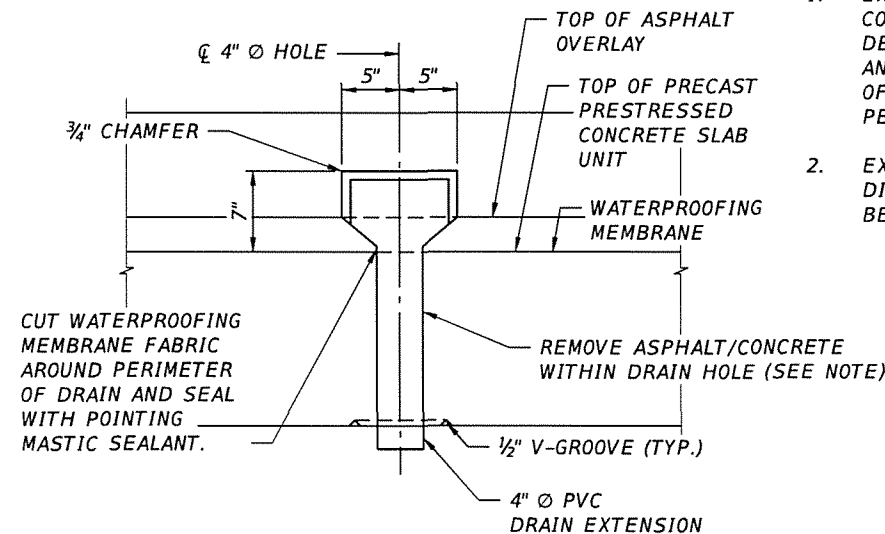


TYPICAL LONGITUDINAL OVERLAP FOR WATERPROOFING MEMBRANES

DETAIL D



DETAIL E



SECTION F-F

NOTES:

1. EXISTING CROSS SLOPE VALUE SHALL BE DETERMINED IN THE FIELD BEFORE MILLING EXISTING ASPHALT.
2. THE EXISTING ASPHALT OVERLAY THICKNESS SHALL BE FIELD VERIFIED. MILL EXISTING ASPHALT OVERLAY TO TOP OF DECK. DO NOT DAMAGE THE TOP OF THE PRECAST PRESTRESSED CONCRETE SLAB UNITS.
3. REPAIR ALL DELAMINATIONS AND SPALLS ON THE TOPS OF THE PRECAST PRESTRESSED CONCRETE SLAB UNITS, AS PER DETAILS ON SHEET NO. 10 "SPALL AND CRACK REPAIRS DETAILS".
4. APPLY WATERPROOFING MEMBRANE FABRIC AS PER FDOT STANDARD SPECIFICATIONS FOR ROAD AND BRIDGE CONSTRUCTION (2000) SECTION 518 "PAVEMENT WATERPROOFING FABRIC" AND IN ACCORDANCE WITH MANUFACTURER'S SPECIFICATION.
5. FOR WATERPROOFING CONSTRUCTION LIMITS, REFER TO DECK WATERPROOFING PROCEDURE (1 OF 2) SHEET.
6. WATERPROOFING APPLICATION SHALL FOLLOW THESE STEPS:
 - I. A MINIMUM 1 FOOT WIDE WATERPROOFING FABRIC SHALL BE PLACED CENTERED ALONG LONGITUDINAL SHEAR KEYS BETWEEN SLAB UNIT ENDS.
 - II. STARTING FROM THE LOW CROSS SLOPE POINT, WATERPROOFING FABRIC SHALL BE PLACED IN A SHINGLE PATTERN. OVERLAPS SHALL FOLLOW DETAIL D.
 - III. AT CURBS, AN ADDITIONAL WATERPROOFING STRIP SHALL BE PROVIDED EXTENDING 6IN ONTO THE HORIZONTAL AND MATCH THE ASPHALT OVERLAY THICKNESS ON THE VERTICAL FACE. SEE DETAIL B.
7. ROLL MEMBRANE FIRMLY TO ELIMINATE WRINKLES AND AIR POCKETS.
8. WATERPROOFING FABRIC SHALL BE CUT AT BENT EXPANSION JOINTS 6" FROM THE EDGES OF THE DECK TO ACCOMMODATE THE EXPANSION JOINT NOSING.
9. WATERPROOFING TERMINATIONS SHALL BE SEALED WITH POINTING MASTIC SEALANT. INCLUDING AROUND BRIDGE DRAIN HOLES.
10. PLACE PLAIN NEOPRENE STRIPS GLUED WITH EPOXY ALONG LONGITUDINAL EDGES OF SLAB UNITS, OMITTING LOCATIONS WHERE CFRP LAMINATES ARE PROVIDED, SEE DETAIL C. THE NEOPRENE STRIPS SHALL BE PLACED PRIOR TO THE APPLICATION OF METHACRYLATES (HMWM).
11. APPLY METHACRYLATES (HMWM) PER FDOT SPECIFICATION SECTION 413 AS SHOWN. OMIT APPLICATION OF SAND DURING METHACRYLATES (HMWM) APPLICATION. DO NOT APPLY METHACRYLATES (HMWM) OVER AREAS TO RECEIVE CFRP LAMINATES.
12. CLEAN AND SEAL ALL EXPOSED CONCRETE SURFACES INCLUDING UNDERSIDE OF SLAB UNITS, SIDEWALK, CURB, OVERHANG, EXCEPT WHERE CFRP LAMINATE IS PLACED.

BRIDGE DRAIN NOTES:

1. EXISTING DRAIN HOLES HAVE PREVIOUSLY FILLED WITH CONCRETE AND/OR COVERED WITH ASPHALT OVERLAY. CONTRACTOR TO REMOVE CONCRETE AND ASPHALT TO RESTORE BRIDGE DRAINS TO THEIR ORIGINAL CONDITION AS DETAILED ABOVE AT DRAIN LOCATIONS IDENTIFIED IN THESE PLANS (6 DRAINS). CONTRACTOR SHALL SUBMIT MEANS AND METHODS SUCH AS SAW CUTTING. CORE DRILLING (CORE DRILLING DIAMETER SHALL NOT EXCEED THE DIAMETER OF THE EXISTING DRAIN HOLES). DRILLING AND SHIPPING TO THE ENGINEER FOR REVIEW AND APPROVAL PRIOR TO PERFORMING THE WORK.
2. EXTEND EXISTING BRIDGE DRAINS BY CLEANING THE EXISTING EXPOSED PVC PIPE ENDS AND EPOXY GLUING NEW 4" DIAMETER PVC PIPE EXTENSIONS TO EXISTING PVC PIPES SO THAT THE PIPE EXTENSIONS EXTEND 2" MINIMUM BELOW BOTTOM OF SLAB UNITS.

Bridge No. 864006

REVISIONS				
DATE	NO.	REMARKS	BY	DATE

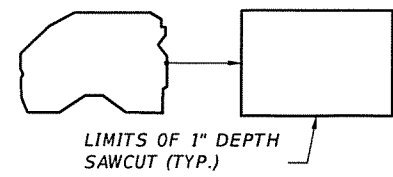
BROWARD COUNTY HIGHWAY AND BRIDGE MAINTENANCE DIVISION
1600 BLOUNT ROAD
POMPANO BEACH, FL 33069



BRIDGE REPAIRS	
ROAD	HBMD PROJ. NO.
CORAL SPRINGS DR.	2022-1-119

CORAL SPRINGS DR. OVER W. OUTFALL CANAL	
DECK WATERPROOFING PROCEDURE (2 OF 2)	

SHEET NO.
B2-9

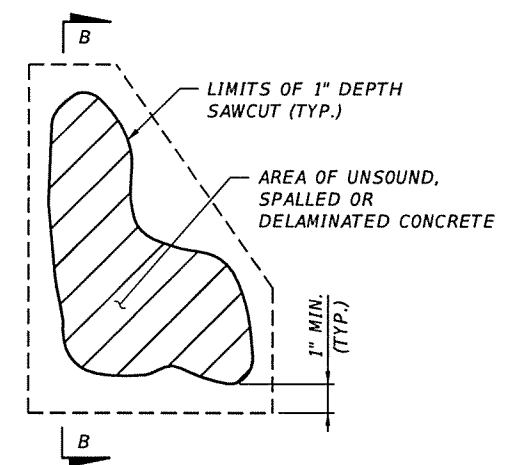


LIMITS OF 1" DEPTH SAWCUT (TYP.)

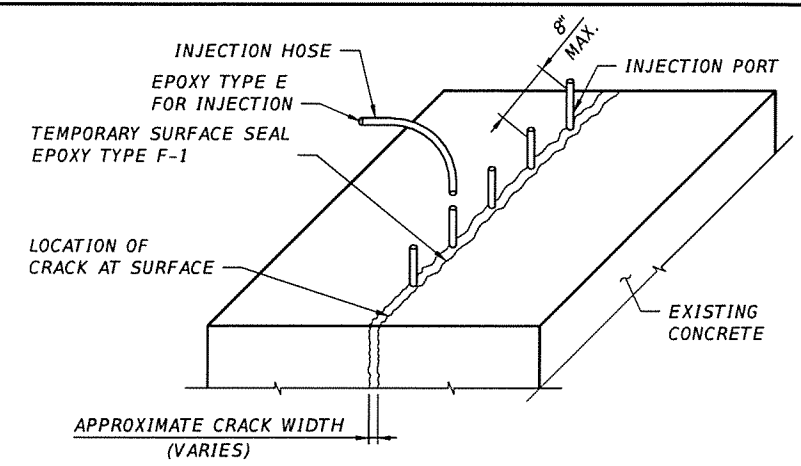
BOUNDARY OF LOOSE, SPALLED AND/OR DELAMINATED CONCRETE

RECOMMENDED LAYOUT OF AREA TO BE REPAIRED

TYPICAL SPALL/DELAMINATION REPAIR CONFIGURATIONS

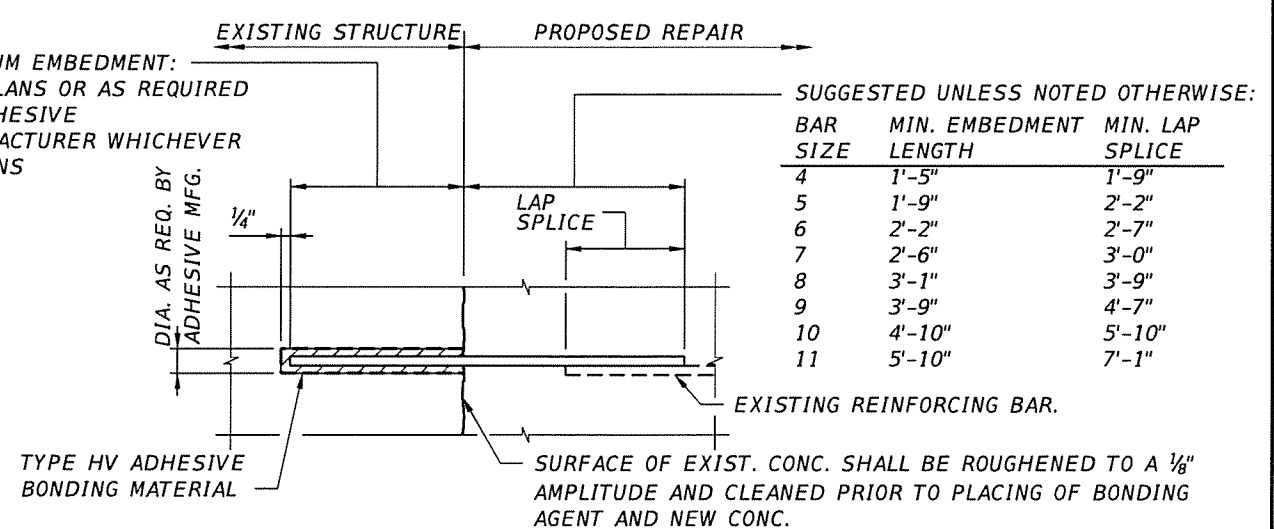


PARTIAL DEPTH REPAIR PLAN



EPOXY INJECT AND SEAL CRACK REPAIR

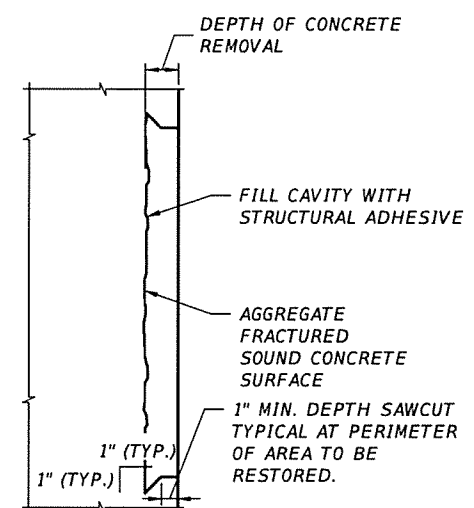
MINIMUM EMBEDMENT: PER PLANS OR AS REQUIRED BY ADHESIVE MANUFACTURER WHICHEVER GOVERNS



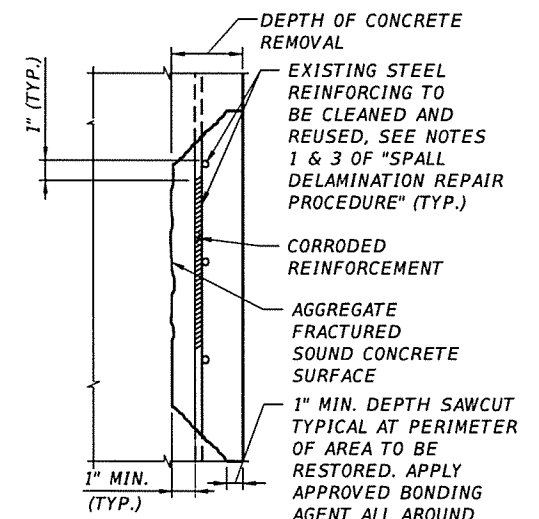
DOWEL DETAIL

SUGGESTED UNLESS NOTED OTHERWISE:

BAR SIZE	MIN. EMBEDMENT LENGTH	MIN. LAP SPLICE
4	1'-5"	1'-9"
5	1'-9"	2'-2"
6	2'-2"	2'-7"
7	2'-6"	3'-0"
8	3'-1"	3'-9"
9	3'-9"	4'-7"
10	4'-10"	5'-10"
11	5'-10"	7'-1"



SECTION B-B NO EXPOSED REINF.



SECTION B-B EXPOSED REINF.

DOWEL PROCEDURE

- HOLES FOR DOWEL BARS SHALL BE SOUND AND THOROUGHLY CLEANED AS PER MANUFACTURER'S RECOMMENDATIONS PRIOR TO PLACING EPOXY AND DOWELS.
- HOLES SHALL HAVE A MINIMUM OF 3" CLEARANCE FROM THE EDGE OF THE CONCRETE.
- LENGTH OF DOWEL EMBEDMENT SHALL BE SET IN A STRUCTURAL ADHESIVE BONDING COMPOUND DESIGNATED AS TYPE HV. SEE FDOT APPROVED PRODUCTS LIST (APL) AND FDOT STANDARD SPECIFICATIONS SECTIONS 416 AND 937 FOR DETAILS.
- WHERE REINFORCING STEEL IS ENCOUNTERED, SHIFT THE HOLE TO CLEAR AND FILL THE UNUSED DRILLED HOLE WITH EPOXY.
- THE SUGGESTED MINIMUM REQUIRED EMBEDMENT LENGTH FOR DOWEL BARS EXTENDING INTO THE PROPOSED REPAIR IS SHOWN. THIS EMBEDMENT LENGTH MAY VARY AT LOCATIONS REQUIRING LAPPING TO PROPOSED REINFORCING, ETC. AS DETAILED IN THESE PLANS.

SPALL/DELAMINATION REPAIR PROCEDURE

- CONTRACTOR SHALL USE EXTREME CAUTION NOT TO DAMAGE EXISTING REINFORCING STEEL. REINFORCING STEEL SHALL BE MEDIA BLASTED TO A SSPC SP10 CONDITION. IF ANY REINFORCING STEEL IS DAMAGED, THE CONTRACTOR SHALL NOTIFY THE ENGINEER FOR ADDITIONAL INSTRUCTIONS ON THE APPLICABLE REPAIR. ANY REINFORCING STEEL THAT IS DAMAGED BY THE CONTRACTOR IS TO BE REPAIRED AT NO COST TO THE COUNTY.
- PROVIDE AN AGGREGATE-FRACTURED SOUND CONCRETE SURFACE WITH AN APPROXIMATE SURFACE PROFILE AMPLITUDE OF 1/8" BY USE OF SCRABBLER OR OTHER APPROPRIATE MEANS AS NECESSARY.
- IF THE EXISTING REINFORCEMENT HAS LOST MORE THAN 20% OF ITS CROSS SECTION, A NEW BAR OF EQUAL SIZE (DIAMETER) SHALL BE DRILLED AND EPOXIED WITH AN EMBEDDED LENGTH AND/OR LAP SPLICE AS INDICATED IN THESE PLANS. IN NO CASE SHALL ANY REBAR BE PLACED WITH A COVER LESS THAN EXISTING COVER.
- PLACE FORM WORK. FORM WORK MAY BE SUPPORTED BY STAINLESS STEEL INSERTS WHERE REQUIRED. STAINLESS STEEL INSERTS WILL BE LOCATED IN SOUND CONCRETE AND MAY REMAIN IN PLACE. STAINLESS STEEL INSERTS LEFT IN PLACE SHALL BE RECESSED AT LEAST 1" AND PATCHED.
- THE CONTRACTOR SHALL ADHERE TO THE REQUIREMENTS OF FDOT STANDARD SPECIFICATIONS SECTION 930. PLACE THE LATEX MODIFIED PORTLAND CEMENT MORTAR/CONCRETE IN ACCORDANCE WITH MANUFACTURER'S RECOMMENDATIONS.

GENERAL CRACK REPAIR PROCEDURE:

- ALL CRACKS CALLED OUT TO BE REPAIRED IN THESE PLANS ARE NON STRUCTURAL AND SHALL BE REPAIRED IN ACCORDANCE WITH SECTIONS 400-21, 411 AND 413 OF FDOT SPECIFICATIONS.
- SOUND TEST AROUND THE CRACKS PRIOR TO INJECTING TO ASSURE THAT IT IS NOT DELAMINATED. IF CONCRETE AROUND THE CRACK IS DELAMINATED, REPAIR AS A DELAMINATION PRIOR TO REPAIRING CRACK.
- EPOXY INJECTION CONCRETE WITH CRACKS WIDTH EQUAL OR GREATER THAN 3/16".
- USE TYPE F-1 COMPOUND EPOXY FOR SEALING CRACK SURFACES IN PREPARATION FOR INJECTION. REFER TO SECTION 411 OF STANDARD SPECIFICATIONS FOR ADDITIONAL INFORMATION. GRIND OFF THE EXCESS EPOXY AND PORTS TO THE EXISTING PROFILE AFTER EPOXY INJECTION IS COMPLETED AND EPOXY HAS SET.

SPALL/DELAMINATION REPAIR DETAILS

Bridge No. 864006

REVISIONS				
DATE	NO.	REMARKS	BY	DATE

BROWARD COUNTY HIGHWAY AND BRIDGE MAINTENANCE DIVISION
1600 BLOUNT ROAD
POMPANO BEACH, FL 33069



BRIDGE REPAIRS	
ROAD	HBMD PROJ. NO.
CORAL SPRINGS DR.	2022-1-119

CORAL SPRINGS DR. OVER W. OUTFALL CANAL	
SPALL & CRACK REPAIR DETAILS	

SHEET NO.
B2-10



REPAIR MISSING PATCH. SEE SPALL/DELAMINATION REPAIR PROCEDURE.

UNIT 1-1 -SOUTH FACE



PRESSURE WASH AND APPLY CLASS 5 COATING OVER GRAFFITI

CONCRETE UNDERSIDE OF SLAB UNITS CLEANING NOTES:

1. PRESSURE WASH UNDERSIDE OF SLAB UNITS.
2. UPON COMPLETION OF PRESSURE WASHING IF GRAFFITI IS STILL VISIBLE, APPLY CLASS 5 COATING (COLOR 23717).

UNDERDECK SLAB UNITS.

Bridge No. 864006

REVISIONS					BROWARD COUNTY HIGHWAY AND BRIDGE MAINTENANCE DIVISION 1600 BLOUNT ROAD POMPANO BEACH, FL 33069		BRIDGE REPAIRS		CORAL SPRINGS DR. OVER W. OUTFALL CANAL	SHEET NO. B2-11
DATE	NO.	REMARKS	BY	DATE			ROAD	HBMD PROJ. NO.		
							CORAL SPRINGS DR.	2022-1-119	CONSTRUCTION DETAILS	

**SUNSHINE
WATER CONTROL DISTRICT**

**STAFF
REPORTS
EIII**

SUNSHINE WATER CONTROL DISTRICT		
BOARD OF SUPERVISORS FISCAL YEAR 2022/2023 MEETING SCHEDULE		
LOCATION		
<i>La Quinta Inn Coral Springs, 3701 N. University Drive, Coral Springs, Florida 33065</i>		
DATE	POTENTIAL DISCUSSION/FOCUS	TIME
October 12, 2022	Regular Meeting	6:30 PM
November 9, 2022 CANCELED WEATHER RELATED	401(a) Committee Meeting	6:00 PM
November 9, 2022 CANCELED WEATHER RELATED	Regular Meeting	6:30 PM
December 7, 2022*	Regular Meeting	6:30 PM
December 16, 2022	401(a) Committee Meeting	10:00 AM
January 11, 2023	Regular Meeting	6:30 PM
February 8, 2023	Regular Meeting	6:30 PM
March 8, 2023	Landowners' Meeting & Regular Meeting	6:30 PM
April 12, 2023	Regular Meeting	6:30 PM
May 10, 2023	Regular Meeting	6:30 PM
June 14, 2023	Regular Meeting	6:30 PM
July 12, 2023	Regular Meeting	6:30 PM
August 9, 2023	Regular Meeting	6:30 PM
September 13, 2023	Public Hearing & Regular Meeting	6:30 PM

Exception:

**December meeting is one week earlier to accommodate Coral Springs Holiday Parade*