

HOUSE of REPRESENTATIVES

STATE OF MICHIGAN

Appropriations Requests for Legislatively Directed Spending Items

- 1. The sponsoring representative's first name: Rylee
- 2. The sponsoring representative's last name: Linting
- 3. The cosponsoring representatives' names. All cosponsors must be listed. If none, please type 'n/a.' A signed letter from the sponsor approving the co-sponsorship and a signed letter from the member wishing to co-sponsor are required. Attach letters at question #9 below.

N/A

- 4. Name of the entity that the spending item is intended for: The City of Southgate
- 5. Physical address of the entity that the spending item is intended for: 14400 Dix Toledo Rd, Southgate, MI 48195
- 6. If there is not a specific recipient, the intended location of the project or activity: N/A
- 7. Name of the representative and the district number where the legislatively directed spending item is located:

Rylee Linting, District 27

8. Purpose of the legislatively directed spending item. Please include how it provides a public benefit and why it is an appropriate use of taxpayer funding. Please also demonstrate that the item does not violate Article IV, S 30 of the Michigan Constitution. The city of Southgate is seeking funds to repair water lines using a cured-in-place pipelining method which limits costs by limiting ground disturbance. The City of Southgate has over 80 miles of water mains, some of which are over 70 years old. This project will strengthen the city's freshwater delivery system to ensure the steady flow of clean water to residents for generations to come. Over 12,640 linear feet of weak lines have been identified for priority repairs. This is a highly scalable project that will have an important impact on the health, safety, and quality of life for residents of Southgate.

9. Attach documents here if needed:

Attachments added to the end of this file.

10. The amount of state funding requested for the legislatively directed spending item. 5305000

11. Has the legislatively directed spending item previously received any of the following types of funding? Check all that apply.

["Local"]

12. Please select one of the following groups that describes the entity requesting the legislatively directed spending item:

Local unit government

13. For a non-profit organization, has the organization been operating within Michigan for the preceding 36 months?

Not applicable

14. For a non-profit organization, has the entity had a physical office within Michigan for the preceding 12 months?

Not applicable

15. For a non-profit organization, does the organization have a board of directors? Not applicable

16. For a non-profit organization, list all the active members on the organization's board of directors and any other officers. If this question is not applicable, please type 'n/a.'
N/A

17. "I certify that neither the sponsoring representative nor the sponsoring representative's staff or immediate family has a direct or indirect pecuniary interest in the legislatively directed spending item."

Yes, this is correct

18. Anticipated start and end dates for the legislatively directed spending item:

10/1/2025-9/30/2028

19. "I hereby certify that all information provided in this request is true and accurate."