



**STATE OF IOWA
FLOOD MITIGATION PROGRAM
PROGRESS REPORT**

PERIOD COVERED BY THIS REPORT: 5/1/2021 to 10/31/2021
 LOCAL CONTACT NAME: Ellen Habel, Asst. City Administrator
 GOVERNMENTAL ENTITY: City of Coralville, IA
 ADDRESS: 1512 7th Street
 Coralville, IA 52241
 TELEPHONE NUMBER: 319-248-1700
 PROJECT TITLE: City of Coralville Flood Mitigation Program Project
 AGREEMENT NUMBER: 2013-0
 ACTIVITY COMPLETION TIMEFRAME: 12/4/2013 to 12/31/2017

| | FEDERAL | LOCAL | STATE (STIF only) | TOTAL |
|--|--------------|--------------|----------------------|----------------------|
| TOTAL FUNDS APPROVED: | \$ 8,546,161 | \$ 5,204,498 | \$ 9,769,000 | \$ 23,519,659 |
| TOTAL FUNDS EXPENDED TO DATE: | \$ 8,546,161 | \$ 6,862,645 | \$ 9,769,000 | \$ 25,177,806 |
| PROJECT OVERRUN/ (UNDERRUN): | \$ - | \$ 1,658,147 | \$ - | \$ 1,658,147 |
| The percentage of actual work that has been completed at the end of the reporting period (not a % of funds expended) | | | | 100% |
| The estimated cost of the project at completion (which may even exceed the awarded amount) | | | | \$ 25,177,806 |

| Type of Expense & Funding Source | Budget (from Application) | Federal/ Local/ State (STIF only) | Total Expended to Date | Remaining Balance |
|---|------------------------------|---|---------------------------|----------------------|
| Engineering/Contractual Services: | \$ 2,099,482 | | | |
| 5th Street Elevation Design - STIF | | State | \$ 338,719 | |
| Clear Creek Flood Wall Design - STIF | | State | \$ 543,085 | |
| Design & Construction Admin: Storm Water Pump Stations, Storm Sewers, Sanitary Sewer | | Local/Federal | \$ 1,499,482 | |
| Lift Station Flood Protection - CDBG | | | \$ - | |
| TOTAL | | | \$ 2,331,286 | \$ (231,804) |
| Property Acquisition & Easement: | \$ 4,018,183 | | | |
| Acquisitions & Easements for Pump Stations Storm sewers, Lift Station - CDBG | | Local/Federal | \$ 488,700 | |
| Acquisitions & Easements, 5th St. Elevation- STIF | | State | \$ 110,010 | |
| Acquisitions & Easements, Clear Creek Walls- STIF | | State | \$ 3,259,117 | |
| Acquisitions & Easements for Berms - local | | Local | \$ 1,332,483 | |
| TOTAL | | | \$ 5,190,310 | \$ (1,172,127) |
| Construction: | \$ 17,033,015 | | | |
| Pump Stations, Storm Sewers, Sanitary Lift Station Flood Protection - CDBG | | Local/Federal | \$ 6,573,925 | |
| Berms, Clear & Biscuit Creek - local | | Local | \$ 200,000 | |
| Clear Creek Flood Wall -STIF | | State | \$ 4,327,795 | |
| 5th St. Elevation- STIF | | State | \$ 2,144,522 | |
| Berms, & Flood Walls, Clear & Biscuit Creek-IJOBSII | | Local | \$ 3,657,090 | |

| | | | | |
|---|--------------------------------------|---|--|-------------------------------|
| TOTAL | | | \$ 16,903,332 | \$ 129,683 |
| Utility Relocations | | \$ 368,979 | | |
| Pump Station, Sanitary Sewer Lift Station Flood Protection - CDBG | | Local/Federal | \$ 48,979 | |
| 5th St. Elevation- STIF | | State | \$ 456,714 | |
| Clear Creek Flood Wall - STIF | | State | \$ 247,185 | |
| TOTAL | | | \$ 752,878 | \$ (383,899) |
| | | \$ - | | |
| | | | \$ - | |
| | | | \$ - | |
| TOTAL | | | \$ - | \$ - |
| | | \$ - | | |
| | | | \$ - | |
| | | | \$ - | |
| TOTAL | | | \$ - | \$ - |
| Total Project Budget Summary | | \$ 23,519,659 | \$ 25,177,806 | \$ (1,658,147) |
| FUNDING SOURCE: | FEDERAL (from Application) | LOCAL (from Application) | STATE (STIF only) (from Application) | Total Expended to Date |
| City of Coralville | | \$ 1,547,408 | | \$ 3,205,555.00 |
| CDBG | \$ 8,546,161 | | | \$ 8,546,161.00 |
| I-Jobs II | | \$ 3,657,090 | | \$ 3,657,090.00 |
| Sales Tax Increment | | | \$ 9,769,000 | \$ 9,769,000.00 |
| | | | | \$ - |
| | | | | \$ - |
| | | | | \$ - |
| | | | | \$ - |
| | | | | \$ - |
| | | | | \$ - |
| | | | | \$ - |
| | | | | \$ - |
| | | | | \$ - |
| | | | | \$ - |
| | | | | \$ - |
| | | | | \$ - |
| | | | | \$ - |
| | | | | \$ - |
| Total Project Funding Source | \$ 8,546,161 | \$ 5,204,498 | \$ 9,769,000 | \$ 25,177,806.00 |
| Indebtedness Incurred (Bonds, etc.) | Rate of Interest | Length of Term (start & end) | Costs of Issuance | Net Proceeds |
| | 0.00% | | \$ - | \$ - |
| | 0.00% | | \$ - | \$ - |
| | 0.00% | | \$ - | \$ - |
| NON-PUBLIC INVESTMENT - Entity | | | | Total to Date |
| Kum N Go New Construction | | | | \$ 1,335,847 |
| Old Town Mixed Use Development New Construction (Watts Development) | | | | \$ 20,734,356 |
| River View Plaza Building 1 | | | | \$ 14,400,000 |
| Monica's Restaurant Remodel | | | | \$ 85,000 |
| Total Non-Public Investment | | | | \$ 36,555,203 |

| | |
|---|---|
| Project Status- entire project (Check One) | Description of significant activities this semi-annual term . Include comparison of actual accomplishments to the objectives identified in your application. Attach pictures and a narrative. Status changes or delays, please explain reason. |
| <input type="checkbox"/> On Schedule | No changes in completed status |
| <input type="checkbox"/> Delayed | |
| <input type="checkbox"/> Canceled | |
| <input checked="" type="checkbox"/> Completed | |
| <input type="checkbox"/> Suspended | |

| Application Work Schedule (Milestones) | | | Milestone Status |
|--|---------------------------|----------------------------|---------------------------------------|
| # | Description: | Submitted Completion Date: | Anticipated / Actual Completion Date: |
| Phase II, 5th Street Elevation | | | |
| 1 | Design | 5/1/2014 | 1/15/2015 |
| 2 | Acquisitions & Permitting | 7/1/2014 | 3/1/2015 |
| 3 | Bid Process | 9/1/2014 | 2/1/2015 |
| 4 | Award of Contract | 10/1/2014 | 2/28/2015 |
| 5 | Construction | 3/1/2015 | 6/10/2016 |
| Phase II, Flood Walls | | | |
| 1 | Design | 7/1/2015 | 6/17/2016 |
| 2 | Acquisitions & Permitting | 10/1/2015 | 7/15/2016 |
| 3 | Bid Process | 12/1/2015 | 8/9/2016 |
| 4 | Award of Contract | 1/1/2016 | 8/23/2016 |
| 5 | Construction | 12/31/2017 | 12/31/2017 |
| | | | |
| | | | |

Person Completing this Report:

Ellen Habel

Date:

11/15/2021

I, the undersigned, hereby certify that the above information is accurate and true, and in accordance with the approved project plan and state and federal regulations and policies governing this award.


Signature on file


Signature of Authorized Representative or Governmental Entity

Kelly Hayworth- City Administrator

Name of Authorized Representative or Governmental Entity

Instructions to complete this form

Areas shaded  are to be completed by State HSEMD Personnel.

Areas shaded  are to be completed by the governmental entity or authorized administrator.