



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2024-2025

LFIR # 1830

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

4. Project/Program Description

The Town of Ponce Inlet (Town) is requesting funding for a replacement generator and transfer switch to provide standby power for the Town's fire station. The fire station is a 6,500 sq. ft. critical facility that houses the Town's only fire suppression and EMS response elements. The current generator is in excess of 20 years old, and repairs are becoming more frequent. Additionally, the future reliability of the unit is in question due to the age of the unit and its location on the barrier island, exposing it to salt air and extreme weather conditions.

A replacement unit will provide reliable back-up power when needed to assure fire and rescue services can be provide the community.

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

6. Amount of the Nonrecurring Request for Fiscal Year 2024-2025

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	35,000
Total State Funds Requested	35,000

7. Total Project Cost for Fiscal Year 2024-2025 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	35,000	50%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	35,000	50%
Other	0	0%
Total Project Costs for Fiscal Year 2024-2025	70,000	100%

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

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. **Is future funding likely to be requested?** No
- a. **If yes, indicate nonrecurring amount per year.**

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

NA

10. **Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?**



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

Yes, funds were used for the purchase of PPE, disinfectant materials and public safety payroll.
Total amount of funds - \$1,662,995

Complete questions 11 and 12 for Fixed Capital Outlay Projects

11. Status of Construction

a. What is the current phase of the project?

- Planning
 Design
 Construction
 N/A

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

12. List the owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

The Town of Ponce Inlet owns the fire station facility and area for installation of the new backup generator.

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	Purchase of equipment and installation.	35,000
Total State Funds Requested (must equal total from question #6)		35,000

14. Program Performance

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

Replacement of current 20-year-old backup generator and transfer switch.

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



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Purchase and installation of backup generator and associated transfer switch.

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

Replacement backup generator will assure fire department operations can continue in no-power situations. Power is critical to maintaining emergency fire suppression and EMS operations.

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

Residents of Ponce Inlet, approximately, 3,500 to 5,000, including commercial and mercantile property.

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

To place a reliable, modern back-up generator at the fire station. Percentage of time generator is used vs failure. Minimum of 98% reliability.

f. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for the contract?

Percentage reduction in final payment for specified work not completed after contracted date.

15. Requester Contact Information

a. First Name **Last Name**

b. Organization

c. E-mail Address

d. Phone Number **Ext.**

16. Recipient Contact Information

a. Organization

b. Municipality and County

c. Organization Type

- For Profit Entity
- Non Profit 501(c)(3)
- Non Profit 501(c)(4)
- Local Entity
- University or College
- Other (please specify)

d. First Name **Last Name**

e. E-mail Address

f. Phone Number

17. Lobbyist Contact Information



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a. Name	<input type="text" value="Andrew T. Ketchel"/>
b. Firm Name	<input type="text" value="Capital City Consulting LLC"/>
c. E-mail Address	<input type="text" value="andrew@cccfla.com"/>
d. Phone Number	<input type="text" value="(850)222-9075"/>