



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2024-2025

LFIR # 3667

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The construction of a multi-use facility that will include, but not be limited to: training center for Emergency Management, office space for local and state emergency management, facilities for laundry and food prep in times of emergency, and office space for FACHPA.

5. State Agency to receive requested funds

State Agency contacted?  Yes

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

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	3,000,000
<b>Total State Funds Requested</b>	<b>3,000,000</b>

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)	3,000,000	100%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2024-2025</b>	<b>3,000,000</b>	<b>100%</b>

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.

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

No

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



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2024-2025

LFIR # 3667

### 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)?

No

c. What is the estimated start date of construction?

1/1/25

d. What is the estimated completion date of construction?

1/1/26

**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 State of Florida

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

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Building of a multi-purpose building that will have the ability to be a training center, staging area, and office center for local and state emergency management.	3,000,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>3,000,000</b>

**14. Program Performance**

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

The building of a multi-use facility will continue to improve and grow the Florida Agriculture Center & Horse Park Authority. Increasing the disaster relief footprint and expanding the variety of events hosted by the park. The FACHPA has proven to be a vital site in times of disaster relief, not only as an animal-safe evacuation site, but as a staging site and a distribution site for food, water and supplies. The FACHPA was instrumental in the distribution of supplies for Hurricane Ian.

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



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2024-2025

LFIR # 3667

This multi-use facility will serve as a training center, staging area and office space for emergency management and other government agencies.

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

This multi-use facility will provide direct help to citizens in times of disaster. Through use of facility for emergency management operations.

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

All citizens impacted by emergencies.

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

Provide local and state emergency management with a training and staging areas to prepare and execute in times of disasters.

**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?**

Failure to meet deliverables would result in financial consequences including withholding of funding, or reduction in specified payments.

**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**



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2024-2025

LFIR # 3667

#### 17. Lobbyist Contact Information

a. Name	<input type="text" value="Allison Liby-Schoonover"/>
b. Firm Name	<input type="text" value="Metz Husband &amp; Daughton PA"/>
c. E-mail Address	<input type="text" value="ALS@mhdfirm.com"/>
d. Phone Number	<input type="text" value="(850)205-9000"/>