

The Florida Senate Local Funding Initiative Request Fiscal Year 2023-2024

LFIR # 2165

Fiscal Year (yyyy-yy) Is future funding li a. If yes, indicate r	kely to be requested? nonrecurring amount per year. urce of funding that can be used in I	No		
Fiscal Year (yyyy-yy)	kely to be requested?	No		
Fiscal Year		<u> </u>		
Fiscal Year				
	Recurring Nonrecurring	Specific Appropriation #	Vetoed	
nas iilis projeci pi	Amount		Votand	
<u>-</u>	reviously received state funding?	No	10070	
	s for Fiscal Year 2023-2024	2,903,750	100%	
Other		1,451,675	0%	
State (excluding the Local	e amount of this request)	0 1,451,875	0% 50%	
Federal		0	0%	
Matching Funds	,			
Total State Funds F	Requested (from question #6)	1,451,875	50%	
Type of Funding	for Fiscal Year 2023-2024 (including	Amount	Percentage	
	•	matabina fire da arri	<u> </u>	
Total State Funds		1,451,875		
Operations Fixed Capital Outla			0 1,451,875	
Type of Funding		Amou	_	
Amount of the Non	recurring Request for Fiscal Year 20)23-2024		
State Agency cont				
• •	• <u> </u>	nent of Law Enforcemer	nt	
Operations Center in officers, which proving surge zone. This pr	d Beach seeks support for the relocation order to better respond during natural ide for the safety of its residents. The coject will support the design, survey, ge	al disasters and provide current police station is	state of the art facilities for within the Category 3 Hurric	
Project/Program D	escription			
Date of Request	02/22/2023			
	Tom Wright			
Senate Sponsor	Center			



11. Status of Construction

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

\$439,212.07 was received from 5 different federal sources (CESF, SVOG, ACRGP, ARPA, and General Public Assistance) and used for: equipment to safely respond Performing Arts Center; Covid-19 Closure; Airport Environmental Upgrades; Airport Operational Expenses; and Fire personnel costs and PPE.

Complete questions 11 and 12 for Fixed Capital Outlay Projects

a. What is the current phase of the project?	
OPlanning ODesign OConstruction	
b. Is the project "shovel ready" (i.e permitted)?	
c. What is the estimated start date of construction	1?
d. What is the estimated completion date of const	ruction?
12. List the owners of the facility to receive, directly relationship between the owners of the facility a	or indirectly, any fixed capital outlay funding. Include the nd the entity.

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/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering	This project will support the design, survey, geotech, and permitting.	1,451,875
Total State Funds Requested (must equal total from question #6) 1,451,8		

14. Program Performance

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

Relocation of the Ormond Beach Police Department and Emergency Operations Center in order to better respond during natural disasters and provide state of the art facilities for public safety officers, which provide for the safety of its residents. The current police station is within the Category 3 Hurricane storm surge zone. This project will support the design, survey, geotech, and permitting to facilitate a shovel ready project.



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Faster response a during natural disa		Safety officer	s responding to residents i	needs for law enforcement and
c. What direct ser	vices will be provided to	citizens by t	he appropriation project	?
Law enforcement	and emergency operations	3		
d. Who is the targ	et population served by	this project?	How many individuals a	re expected to be served?
Ormond Beach re	sidents and visitors.			
e. What is the exp be measured?	ected benefit or outcome	e of this proj	ect? What is the methodo	ology by which this outcome will
enhanced ability t	o protect and respond			
	ggested penalties that the deliverables or performation			n addition to its standard penalties ract?
\$1,450 per day liq	uidated damages			
5. Requester Contac	t Information			
a. First Name	Brian	Last Name	Rademacher	
b. Organization	City of Ormond Beach			
c. E-mail Address	Brian.Rademacher@orm	ondbeach.org]	
d. Phone Number	(386)676-3266	Ext.		
6. Recipient Contact	Information			
a. Organization	City of Ormond Beach			
b. Municipality and	d County Volusia			
c. Organization Ty	ре			
□For Profit Entity				
□Non Profit 501(d	c)(3)			
□Non Profit 501(d	c)(4)			
☑Local Entity				
□University or Co	ollege			
□Other (please s	pecify)			
d. First Name	Shawn	Last Name	Finley	
e. E-mail Address	shawn.finley@ormondbe	ach.org		
f. Phone Number	(386)676-3292			

17. Lobbyist Contact Information



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b. Firm Name	Metz Husband & Daughton PA
c. E-mail Address	doug.bell@mhdfirm.com
d. Phone Number	(850)205-9000