

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

LFIR # 2630

| State (excluding the Local Other Total Project Costs 8. Has this project pre Fiscal Year (уууу-уу) 9. Is future funding lik a. If yes, indicate n | eviously received state funding? Amount Recurring Nonrecurring | No Specific Appropriation # | 0% 0% 0% 100% Vetoed | |
|---|---|--|--|---|
| State (excluding the Local Other Total Project Costs 8. Has this project pre Fiscal Year (уууу-уу) | eviously received state funding? Amount Recurring Nonrecurring | No Specific Appropriation # | 0% 0% 100% | |
| State (excluding the Local Other Total Project Costs 8. Has this project pre | eviously received state funding? Amount | 0 0 500,000 No Specific | 0% 0% 100% | |
| State (excluding the Local Other Total Project Costs 8. Has this project pre | eviously received state funding? Amount | 0 0 500,000 No Specific | 0% 0% 100% | |
| State (excluding the Local Other Total Project Costs 8. Has this project pre | s for Fiscal Year 2023-2024 eviously received state funding? | 0 0 500,000 No | 0% 0% 100% | |
| State (excluding the Local Other | | 0 | 0% 0% | |
| State (excluding the Local Other | | 0 | 0% 0% | |
| State (excluding the Local | amount of this request) | | 0% | |
| | amount of this request) | 0 | 0% | |
| reuerai | State (excluding the amount of this request) | | | |
| Federal | | 0 | 0% | |
| Matching Funds | | 200,000 | .0070 | |
| Type of Funding Total State Funds R | equested (from question #6) | Amount 500,000 | Percentage 100% | |
| • | or Fiscal Year 2023-2024 (including | - | | ct) |
| Total State Funds F | Requested | | 500,000 | |
| Fixed Capital Outlay | | | 490,000 | |
| Operations | | | 10,000 | |
| Type of Funding | | Amou | unt | |
| State Agency conta | recurring Request for Fiscal Year 2 | 2023-2024 | | |
| 5. State Agency to red | ceive requested funds Department | ment of Economic Oppo | rtunity | |
| program, which will I income families (with on using innovative, | n households will retain access to res build resilient homes for veteran famil n a preference for Veterans families) resilience-focused building technique affordable housing shortage. | lies. Further, roof repairs at risk of losing their hoi | s/replacements will mes/insurance. An e | be provided for low- emphasis will be placed |
| 4. Project/Program De | escription | | | |
| 3. Date of Request | 02/21/2023 | | | |
| | Jay Collins | | | |
| 2. Senate Sponsor | Laur Callina | | | |
| Project Title Senate Sponsor | Hillsborough Habitat for Humanity | - Resilient Homes for H | eroes | |



11. Status of Construction

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

Received a PPP loan of \$524,894.18 that was later forgiven as the guidelines were met for keeping employees in place during the pandemic. Received \$150,000 of CARES funding through Hillsborough County.

Complete questions 11 and 12 for Fixed Capital Outlay Projects

| a. What is the current phase of the project? | | | |
|---|----------------|-------------------------|----------|
| Planning | ODesign | ○ Construction | |
| b. Is the project "shovel ready" (i.e permitted)? | | Yes | |
| c. What is the | estimated star | t date of construction? | 7/1/2023 |

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.

| , | · · · · · · · · · · · · · · · · · · · |
|--|---------------------------------------|
| 2 Veteran families located in Hillsborough County. | |

10/31/2023

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

d. What is the estimated completion date of construction?

| Spending Category | Description | Amount | | |
|---|---|---------|--|--|
| Administrative Costs: | | | | |
| Executive Director/Project Head Salary and Benefits | | 0 | | |
| Other Salary and Benefits | Home Preservation Manager | 10,000 | | |
| 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 | 2 resilient homes for \$320,000 plus \$20,000 for their demolition. Replacement of at least 10 roofs for \$150,000. | 490,000 | | |
| Total State Funds Requested (m | ust equal total from question #6) | 500,000 | | |

14. Program Performance

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

At least two Veteran households will retain access to housing and roofs will be provided for low-income families at risk of losing their homeowners insurance. Working with innovative building methods will allow the organization to examine for resiliency and identify modifications to increase resiliency. The use of this product could increase the ability to produce homes at a faster rate to combat the growing affordable housing shortage.



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

The Home Preservation program will validate low-income eligibility and need for replacement or repair as well as serve as the general contractor for the projects. Two resilient homes will replace existing housing and at least 10 roofs will be restored to allow for continued homeowners insurance coverage.

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

Two home replacements and at least 10 roofs. Participants will also gain access to educational curriculum which includes financial literacy and home maintenance.

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

Households below 80% of the area median income. 25 individuals are expected to be served.

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

Completion of 2 replacement homes and at least 10 roof replacements.

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?

Return of funding 15. Requester Contact Information Last Name | Forcier a. First Name Tina b. Organization Habitat for Humanity of Hillsborough County Florida, Inc. c. E-mail Address | tforcier@habitathillsborough.org d. Phone Number (813)992-3844 Ext. 16. Recipient Contact Information a. Organization Habitat for Humanity of Hillsborough County Florida, Inc. b. Municipality and County | Hillsborough 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 Tina Last Name | Forcier

e. E-mail Address | tforcier@habitathillsborough.org



d. Phone Number (407)843-8880

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| t. Phone Number | (813)992-3844 | |
|------------------------|--------------------------------|--|
| 17. Lobbyist Contact I | nformation | |
| a. Name | Christopher T. Dawson | |
| b. Firm Name | GrayRobinson PA | |
| c. E-mail Address | chris.dawson@gray-robinson.com | |