



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** Fire Station 61 Replacement Project

2. **Senate Sponsor:** Perry Thurston

3. **Date of Submission:** 10/26/2017

4. **Project/Program Description:**

Fire Station Replacement Project: Design and reconstruction of an existing fire station supporting rescue services in and around I-95 and Copans Road servicing portions of the NW CRA and Leisureville, a 55+ community. The design will include provisions for a +/-13,000 square feet facility with capacity for 4 fire apparatus. This facility is outdated and in need of replacement. Subject to design review and considerations, staff intends to keep the existing station open while a new building is constructed directly adjacent. Staff will consider temporary installation of a trailer, if necessary. Main design features include a 2-story facility with quarters upstairs including a Battalion Chief room and office and operations on the ground floor. In addition, this facility will house a pharmacy and fire drill/training courtyard in the rear.

5. **State Agency Contacted?** Yes

a. If yes, which state agency? Department of Financial Services

b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested?

6. **Amount of Non-recurring Requested for fiscal year 2018-19:**

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
	2,439,000	2,439,000

7. **Type, amount and percent of matching funds available for this project for fiscal year 2018-19:**

Type	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	3,000,000	55.2%
Other	0	0.0%
TOTAL	3,000,000	55.2 %

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 5,439,000

9. **Previous Year Funding Details:**



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- a. Has funding been provided in a previous state budget for this activity? No
- b. In the previous 5 fiscal years, how many years was funding provided? (Optional)
- c. What is the most recent fiscal year the project was funded?
- d. Were the funds provided in the most recent fiscal year subsequently vetoed?
- e. Complete the following Worksheet.

FY:	Input Prior FY Appropriation for this project for FY 2017-18		
	(If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
Column:	A	B	C
Funds Description:	Prior Year Recurring Funds *	Prior Year Nonrecurring Funds *	Total Funds Appropriated (Column A + Column B)
Input Amounts:			

10. Is future-year funding likely to be requested?

No

11. Program Performance:

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

Replacement of an obsolete fire station.

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

Complete design and construction. Improve emergency response.

c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
<input type="checkbox"/> Executive Director/Project Head Salary and Benefits		
<input type="checkbox"/> Other Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		
Operational Costs		



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<input type="checkbox"/> Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation		
<input checked="" type="checkbox"/> Construction/Renovation/Land/Planning Engineering	n/a	5,439,000
TOTAL		5,439,000

d. What are the direct services to be provided to citizens by the appropriations project?

Improve fire station quarters. Facility is outdated and has no provisions for female fire staff. ADA accessibility is compromised and emergency response time can be improved.

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

Over 800 (students from elementary to high school, merchants, residents of all ages)

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

The redesigned facility will provide better accommodations to firemen and enhance the department's ability to respond to emergencies.

g. 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 in the contract?

\$1,000 per day (liquidated damages)

12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.

City of Pompano Beach and its residents.

13. Requestor Contact Information:

- a. **Name:** Horacio Danovich
- b. **Organization:** City of Pompano Beach
- c. **Email:** Horacio.danovich@copbfl.com
- d. **Phone Number:** (954)786-7834

14. Recipient Contact Information:

- a. **Organization:** City of Pompano Beach
- b. **County:** Broward
- c. **Organization Type:**



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

d. Contact Name: Horacio Danovich

e. E-mail Address: Horacio.danovich@copbfl.com

f. Phone Number: (954)786-7834

15. If there is a registered lobbyist, fill out the lobbyist information below.

a. Name: Mario Bailey

b. Firm: Becker & Poliakoff

c. Email: MBailey@bplegal.com

d. Phone Number: (850)412-1115