### Local Funding Initiative Request - Fiscal Year 2018-2019

1. Title of Project: City of Oviedo Modern Police Station and Public Safety Complex

Senate Sponsor: David Simmons
 Date of Submission: 12/01/2017

### 4. Project/Program Description:

Construction of new state-of-the-art Police Station and Public Safety Complex with renovation of current Public Safety complex, to include an area training center and new larger Emergency Operations Center.

### 5. State Agency Contacted? No

- a. If yes, which state agency?
- b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? Executive Office of the Governor

### 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
	5,000,000	5,000,000

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

Туре	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	6,000,000	54.5%
Other	0	0.0%
TOTAL	6,000,000	54.5 %

#### 8. Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds): 11,000,000

### 9. Previous Year Funding Details:

- 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.



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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:	Α	В	С
Funds Description: Input Amounts:	Prior Year Recurring Funds *	Prior Year Nonrecurring Funds *	Total Funds Appropriated (Column A + Column B)

### 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?

Construction of a new law enforcement complex including an area training center and larger Emergency Operations Center for the City of Oviedo.

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

<u>Local Law Enforcement for City of Oviedo</u>. <u>Training facility for local county agencies and UCF PD</u>. <u>Expanded Emergency Operations Center for City of Oviedo</u>.

### c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
☐Executive Director/Project Head Salary and Benefits		
☐Other Salary and Benefits		
□Expense/Equipment/Travel/Supplies/Other		
□Consultants/Contracted Services/Study		
Operational Costs		
☐Salary and Benefits		
□Expense/Equipment/Travel/Supplies/Other		



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☐Consultants/Contracted Services/Study  Fixed Capital Construction/Major Renovation		
☑Construction/Renovation/Land/Planning Engineering	To design and construct a new police department facility, to include a larger and improved EOC and a larger training facility capable of hosting area training and seminars.	5,000,000
TOTAL		5,000,000

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

Law Enforcement services.

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

The target population is Oviedo citizens: 37,128. It would also accommodate local LEO county and collegiate agencies in a training/seminar capacity.

- f. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?
  - Move from an out-dated building to an new improved facility, one capable of housing City departments in an EOC capacity as well as hosting training to outside agencies.
- 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?

  \_Withholding of funds.
- 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.

  <u>City of Oviedo.</u>
- 13. Requestor Contact Information:

a. Name: Bryan Cobb

b. Organization: <u>City of Oviedo</u>
c. Email: <u>bcobb@cityofoviedo.net</u>
d. Phone Number: (407)971-5506

14. Recipient Contact Information:

a. Organization: City of Oviedo

**b.** County: Seminole



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- c. Organization Type:
  - O For Profit
  - O Non Profit 501(c) (3)
  - O Non Profit 501(c) (4)
  - Local Entity
  - O University or College
  - O Other (Please specify)
- d. Contact Name: Bryan Cobb
- e. E-mail Address: bcobb@cityofoviedo.net
- f. Phone Number: (407)971-5506
- 15. If there is a registered lobbyist, fill out the lobbyist information below.
  - **a. Name:** None **b. Firm:** None
  - c. Email:
  - d. Phone Number: