Local Funding Initiative Request - Fiscal Year 2018-2019

1. Title of Project: Rebuild Miami-Dade Fire Rescue Sweetwater Station 29

Senate Sponsor: Rene Garcia
 Date of Submission: 01/23/2018

Project/Program Description:

Capital funding to assist Miami-Dade Fire rebuild fire station impacted by state road widening project

- 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? Department of Financial Services
- 6. Amount of Non-recurring Requested for fiscal year 2018-19:

Amount Requested for Operations	Amount Requested for	Total Amount of
	Fixed Capital Outlay	Requested State Funds
	2,500,000	2,500,000

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	2,500,000	50.0%
Other	0	0.0%
TOTAL	2,500,000	50.0 %

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

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?

Rebuild Miami-Dade Sweetwater Fire Station - moved to trailers due to state road widening project

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

Miami-Dade will rebuild a permanent fire station to replace the current temporary trailers that were required due to state road widening project and provide fire and rescue services 24 hours/day 7 days per week

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		
☐Consultants/Contracted Services/Study		



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Fixed Capital Construction/Major Renovation		
☑Construction/Renovation/Land/Planning Engineering	Construction	2,500,000
TOTAL		2,500,000

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

<u>Fire suppression and rescue services will be provided from the rebuilt fire station. The station will be staffed 24 hours per day seven days per week with 8 uniform personnel: 3 firefighters and 1 officer on the engine, 2 firefighters and 1 officer on the rescue, and 1 Battalion Chief.</u>

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

The population served in the territory for MDFR Sweetwater station is 70,868. In 2017 MDFR Station 29 ran 11,423 calls, more than 31 per day.

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

The firefighters will provide services to the surrounding community from a permanent fire station instead of the trailers they are located in now.

- 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?

 This will be a reimbursement based grant and the state will not pay for construction until the project is completed by the Miami-Dade Fire Rescue Department
- 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.

Miami-Dade County and Miami-Dade Fire Rescue Department own the land and the facility

13. Requestor Contact Information:

a. Name: Dave Downey

b. Organization: Miami-Dade Fire Rescuec. Email: David.downey@miamidade.gov

d. Phone Number: (786)331-5118

14. Recipient Contact Information:

a. Organization: Miami-Dade Fire Rescue Department

b. County: Miami-Dadec. Organization Type:

O For Profit

O Non Profit 501(c) (3)



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O Non Profit 501(c) (4)

O Local Entity

O University or College

Other (Please specify) Miami Dade County Fire Department

d. Contact Name: <u>Scott Mendelsberg</u>e. E-mail Address: <u>swim@miamidade.gov</u>

f. Phone Number: (786)236-6123

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

a. Name: Noneb. Firm: Nonec. Email:

d. Phone Number: