



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2019-2020

LFIR#: 1881

1. Title of Project: Aerial Photography (Baker County)

2. Senate Sponsor: Rob Bradley

3. Date of Submission: 02/18/2019

4. Project/Program Description:

Aerial photography provided to the Baker County property appraiser for better accuracy and equity in property assessments. Every 3 years, the Department of Revenue is required to provide aerial photography to counties with a population of 25,000 or less. Baker County would have been the only county included in the 2020 flight schedule until recent population data was released increasing the county population to 25,277.

5. State Agency to receive requested funds : Department of Revenue

State Agency Contacted? Yes

6. Amount of the Nonrecurring Request for Fiscal Year 2019-2020

Type of Funding	Amount
Operations	59,000
Fixed Capital Outlay	
Total State Funds Requested	59,000

7. Total Project Cost for Fiscal Year 2019-2020 (including matching funds available for this project)

Type of Funding	Amount	Percent
Total State Funds Requested (from question #6)	59,000	100.00%
Federal		0.00%
State (excluding the amount of this request)	0	0.00%
Local		0.00%
Other		0.00%
Total Project Costs for Fiscal Year 2019-2020	59,000	100.0%

8. Has this project previously received state funding? No

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	NonRecurring		

9. Is future-year funding likely to be requested? No

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		



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Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study	Aerial photography services	59,000
Operational Costs:		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning		
Engineering		
Total State Funds Requested (must equal total from question #6)		59,000

11. Program Performance:

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

To prescribe and furnish the Baker County property appraiser with aerial photography for assessment purposes.

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

The Department of Revenue in conjunction with the Baker County Property Appraiser will be able to obtain aerial photography.

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

Greater accuracy and equity in assessments in Baker County.

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

Baker County, 25,277

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

Level of benefit would be reflected in 911 programs, emergency management, planning and zoning, and building departments.

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 in the contract?

N/A

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.

None

13. Requestor Contact Information:

a. Name: Kennie Downing

b. Organization: Baker County Manager



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c. **E-mail Address:** Kennie.downing@bakercountyfl.org

d. **Phone Number:** (904)259-5123

14. Recipient Contact Information:

a. **Organization:** Baker County

b. **County:** Baker

c. **Organization Type:**

For Profit

Non Profit 501(c) (3)

Non Profit 501(c) (4)

Local Entity

University or College

Other (Please specify)

d. **Contact Name:** Kennie Downing

e. **E-mail Address:** Kennie.downing@bakercountyfl.org

f. **Phone Number:** (904)259-5123

15. Lobbyist Contact Information

a. **Name:** None

b. **Firm Name:** None

c. **E-mail Address:**

d. **Phone Number:**