



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2019-2020

LFIR#: 1991

1. Title of Project: Clay County Fire Rescue Station Building

2. Senate Sponsor: Travis Hutson

3. Date of Submission: 02/25/2019

4. Project/Program Description:

Funding to build a fire station capable of an all hazards response to protect the public to include fire and emergency medical service capabilities. Further, this station will house one of Clay County's two ladder trucks. This station protects the City of Green Cove Springs, all major County governmental buildings/infrastructure and the maritime port authority on the St Johns River.

5. State Agency to receive requested funds : Department of Financial Services

State Agency Contacted? No

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

Type of Funding	Amount
Operations	
Fixed Capital Outlay	750,000
Total State Funds Requested	750,000

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)	750,000	100.00%
Federal	0	0.00%
State (excluding the amount of this request)	0	0.00%
Local	0	0.00%
Other	0	0.00%
Total Project Costs for Fiscal Year 2019-2020	750,000	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		
Operational Costs:		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	Construction to build a fire station capable of an all hazards response to protect the public to include fire and emergency medical service capabilities. Further, this station will house one of Clay County's two ladder trucks. This station protects the City of Green Cove Springs, all major County governmental buildings/infrastructure and the maritime port authority on the St Johns River.	750,000
Total State Funds Requested (must equal total from question #6)		750,000

11. Program Performance:

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

Public Safety protective services to include Fire and Emergency Medical response.

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

The building will support and house firefighters that perform the services related to Public Safety including but not limited to, Fire and Emergency Medical response. Further, the building will have the resiliency to resist a CAT 5 Storm for support to the community.

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

Available medical and emergency assistance to residence in Clay County.

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

Elderly persons, persons with poor mental and physical health, developmentally and physically disabled, drug users, preschool/grade/high/college students, victims of crime, and general public.

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

Available medical and emergency assistance to residence in Clay County. Emergency calls received and response time will be tracked.

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?

Withhold Funds



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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.

No FCO

13. Requestor Contact Information:

- a. **Name:** Karen Thomas
- b. **Organization:** Clay County Board of County Commissioners
- c. **E-mail Address:** karen.thomas@claycountygov.com
- d. **Phone Number:** (904)278-3735

14. Recipient Contact Information:

- a. **Organization:** Clay County Board of County Commissioners
- b. **County:** Clay
- 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:** Karen Thomas
- e. **E-mail Address:** karen.thomas@claycountygov.com
- f. **Phone Number:** (904)278-3735

15. Lobbyist Contact Information

- a. **Name:** Joe Mobley
- b. **Firm Name:** The Fiorentino Group
- c. **E-mail Address:** jmobley@thefiorentinogroup.com
- d. **Phone Number:** (904)866-3122