



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2023-2024

LFIR # 3170

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2023-2024

| Type of Funding | Amount |
|------------------------------------|---------------|
| Operations | 96,603 |
| Fixed Capital Outlay | 0 |
| Total State Funds Requested | 96,603 |

7. Total Project Cost for Fiscal Year 2023-2024 (including matching funds available for this project)

| Type of Funding | Amount | Percentage |
|--|---------------|-------------|
| Total State Funds Requested (from question #6) | 96,603 | 100% |
| Matching Funds | | |
| Federal | 0 | 0% |
| State (excluding the amount of this request) | 0 | 0% |
| Local | 0 | 0% |
| Other | 0 | 0% |
| Total Project Costs for Fiscal Year 2023-2024 | 96,603 | 100% |

8. Has this project previously received state funding?

| Fiscal Year (YYYY-YY) | Amount | | Specific Appropriation # | Vetoed |
|--------------------------|-----------|--------------|-----------------------------|--------|
| | Recurring | Nonrecurring | | |
| | | | | |

9. Is future funding likely to be requested?

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

If yes, indicate the amount of funds received and what the funds were used for.



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Complete questions 11 and 12 for Fixed Capital Outlay Projects

11. Status of Construction

a. What is the current phase of the project?

- Planning
 Design
 Construction

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

12. List the owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

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

| Spending Category | Description | Amount |
|--|--------------|---------------|
| Administrative Costs: | | |
| Executive Director/Project Head Salary and Benefits | | 0 |
| Other Salary and Benefits | | 0 |
| Expense/Equipment/Travel/Supplies/Other | | 0 |
| Consultants/Contracted Services/Study | | 0 |
| Operational Costs: Other | | |
| Salary and Benefits | | 0 |
| Expense/Equipment/Travel/Supplies/Other | A Dump Truck | 96,603 |
| Consultants/Contracted Services/Study | | 0 |
| Fixed Capital Construction/Major Renovation: | | |
| Construction/Renovation/Land/Planning Engineering | | 0 |
| Total State Funds Requested (must equal total from question #6) | | 96,603 |

14. Program Performance

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

Chapter 2021-36, Laws of Florida, appropriated \$120,000 to the City of Lawtey to replace an aging dump truck. See: Specific Appropriation 2230A Grants and Aids - Housing and Community Development Projects Lawtey - Dump Truck Replacement (Senate Form 1748 / HB 3691) \$120,000 General Revenue Due to manufacturing delays, the city did not receive the dump truck in a timely manner and the appropriation reverted. \$96,603 in funding is needed to reimburse the City for their actual costs.

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

The new dump truck will provide assistance with maintenance of streets and general upkeep of the city.

c. What direct services will be provided to citizens by the appropriation project?



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Collection of household garbage and yard trash. Clean city streets and haul road materials.

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

The people of Lawtey.

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

The maintenance department of Lawtey will have a safe and reliable form of transportation to conduct everyday duties.

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 the contract?

Standard contract language is sufficient.

15. Requester Contact Information

- a. **First Name** **Last Name**
- b. **Organization**
- c. **E-mail Address**
- d. **Phone Number** **Ext.**

16. Recipient Contact Information

- a. **Organization**
- b. **Municipality and County**

c. Organization Type

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

- d. **First Name** **Last Name**
- e. **E-mail Address**
- f. **Phone Number**

17. Lobbyist Contact Information

- a. **Name**
- b. **Firm Name**
- c. **E-mail Address**



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d. Phone Number