



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 1138

**1. Project Title**

**2. Senate Sponsor**

**3. Date of Request**

**4. Project/Program Description**

\$1,000,000 of state funding will allow for the upcoming West Delray Regional Park renovations to include the addition of a Boundless Nature-based Playground; an "Inclusive Playground for Children with All Abilities." The accessible structure will be unique to the park and include branded signage and way-finding, providing children of all ages, abilities, and backgrounds to enjoy physical and mental health as well as the critical developmental benefits of outdoor play.

**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	0
Fixed Capital Outlay	1,000,000
<b>Total State Funds Requested</b>	<b>1,000,000</b>

**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)	1,000,000	100%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2023-2024</b>	<b>1,000,000</b>	<b>100%</b>

**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?**



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

Palm Beach County is the recipient of CARES US Treasury funds in the amount of \$261 million. Funding was spent entirely for emergency assistance, mortgage assistance, business grants, COVID 19 sheltering, testing, and isolation and emergency personnel. Palm Beach also received approximately \$290 million in American Rescue Plan funding for pandemic-related service and infrastructure projects.

## 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)?

No

c. What is the estimated start date of construction?

Sept. 1, 2023

d. What is the estimated completion date of construction?

December 31, 2024

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.

Palm Beach County owns the land.

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

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Purchase park equipment - purchase and installation of public amenity; purchase and installation of upgraded lighting facilities and lighting installation.	1,000,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>1,000,000</b>

### 14. Program Performance

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



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

The accessible structure will be unique to the park and provide children of all ages, abilities, and backgrounds to enjoy physical and mental health as well as the critical developmental benefits of outdoor play.

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

Provide all children with access to an inclusive place to play: a universally designed, sensory-rich environment that enables all children to develop physically, socially, and emotionally. This playground would provide children with a purpose-designed, engaging place that provides the just-right level of challenge and offers opportunities for all to succeed.

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

The goal of the project is to provide all children, no matter their abilities, with access to an inclusive place to play: a universally designed, sensory-rich environment that enables all children to develop physically, socially, and emotionally.

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

Access to green spaces and shared community play spaces, particularly purposefully designed to include those with developmental disabilities, intellectual disabilities or who may be of differing abilities, helps reduce obesity and incidence of chronic disease by providing opportunities to increase rigorous physical activity in a variety of forms. It also improves mental health and wellness. Increased visitation for the enjoyment of all citizens and park patron surveys measuring outcomes will determine the outcome of this project.

**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?**

The County would forfeit funding and return to State of Florida.

**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)



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LFIR # 1138

- 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**

**d. Phone Number**