



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 3030

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Address risks in the City's cyber security program via establishing a robust & repeatable disaster recovery program, enhance network access controls, improve network segmentation, introduce Mobile Device Management, establish execution-time analysis of links & attachments, implement redundant internet pathways/providers, improve data center power and cooling redundancies, replace physical access controls, and enhance intra-building cellular communications in support of public safety.

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	828,000
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>828,000</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)	828,000	50%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	828,000	50%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2023-2024</b>	<b>1,656,000</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.

The City has received \$2,563,890.00 from ARP Covid 19 funds. Per City Council, the full amount to be utilized for water and water quality projects as allowed by grant. City also received reimbursement for first responder salaries in the amount of \$1,151,739.04.

## 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
<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	On-board 1 Cyber Security FTE and 2 IT Engineers to manage overall operational environment.	210,000
Expense/Equipment/Travel/Supplies/Other	Backup & Recovery Capability, Network Access Control, SCADA Network Segmentation, Physical Access Controls, Mobile Device Management, Link & Attachment realtime analysis, redundant internet pathways/providers, data center improvements (power and cooling), Cellular Service penetration for public safety (PDHQ), Commission additional penetration testing and remediation.	618,000
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering		0
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>828,000</b>

### 14. Program Performance

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



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Address identified gaps in the City's Information Technology capabilities impacting operations from an event (cyber, meteorological, pandemic, act of terror, etc.).

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

Design, procure, configure, install, and operate the following:

- Establish a robust & repeatable disaster recovery recovery program.
- Enhance network access controls (NAC)
- Improve Network Segmentation,
- Introduce Mobile Device Management (MDM)
- Improve the ability to defend against malicious links and attachments
- Implement redundant internet pathways/providers
- Harden data center power & cooling
- Upgrade/replace physical access controls
- Enhance intra-building cellular communications for public safety locations

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

Enables more reliable City-wide digital services to all citizens by maintaining compute operations during increased times of need.

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

Serves the full citizen base of the City of Naples (~20,000), all employees (~600), visitors (~1.9M annually pre-pandemic)).

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

Increased reliability for digital access into and out of the City (business, information, emergency management). Projects will be governed by statement of work, managed via a project timeline, assigned a project manager and owner.

**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?**

In addition to standard contract penalties, the City will provide references in technology related forums.

**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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- 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**