



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 3189

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

This project seeks to upgrade and repair the existing Miami Fire-Rescue Fire Training Center to extend the usable life of the existing structure. For windows and doors, the City of Miami will use systems and components that comply with the higher design wind pressures for Essential Facilities in accordance with ASCE 7-16 and with the higher impact resistance required by the Florida Building Code. Structural and stucco repairs required to make the building envelope watertight.

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	1,661,000
<b>Total State Funds Requested</b>	<b>1,661,000</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)	1,661,000	61%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	1,079,466	39%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2023-2024</b>	<b>2,740,466</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?

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



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- \$137M ARPA funds - Funds are being used to fund variety of projects for IT, Housing, Business assistance, Community Projects, etc.  
 - \$10M to help residents in form of grocery gift cards and local business assistance

## 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)?

Yes

c. What is the estimated start date of construction?

8/1/2023

d. What is the estimated completion date of construction?

12/31/2023

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.

The facility is owned by the City of Miami, which will also be the entity receiving funds.

### 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	Upgrades and repairs to existing Fire Training Center to extend the usable life of the existing structure. For windows and doors, the City will use systems and components that comply with the higher design wind pressures for Essential Facilities in accordance with ASCE 7-16 and with the higher impact resistance required by the Florida Building Code. Structural and stucco repairs required to make the building envelope watertight.	1,661,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>1,661,000</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?**

Repair extensive stucco damage and cracks observed on all elevations; cracks are potential points of moisture intrusion. Deteriorated sealant joints are present in various areas and are a major contributor to bulk water intrusion and need repair. Evidence of water intrusion was also present around windows that need replacement.

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

Backup to the City’s PSAP (911 Public Safety Answering Points); site to conduct community outreach and disaster education; staging area during disasters, point of distribution for relief supply distribution, City’s EOC is also backed-up at this facility, and point of assembly for Florida Task Force 2 Urban Search and Rescue Team

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

The target population of the project is all of those in need of emergency services, the individuals expected to be served is in the thousands.

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

Protect the general public from harm- It will provide a safe, protected facility able to withstand hurricanes, flooding and other natural disasters to ensure the continuity of life saving services in severe emergency circumstances. The methodology for measuring this outcome is that the building will meet current building code when the project is complete.

**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?**

Revocation of funding.

**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



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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**