

### Local Funding Initiative Request - Fiscal Year 2018-2019

1. Title of Project: Florida SouthWestern State College, Lee Campus West Chiller Replacement

2. Senate Sponsor: Lizbeth Benacquisto

3. Date of Submission: <u>01/19/2018</u>

1. Project/Program Description:

Lee Campus West Chiller Replacement

- 5. State Agency Contacted? No
  - a. If yes, which state agency?
  - b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? Department of Education
- 6. Amount of Non-recurring Requested for fiscal year 2018-19:

| Amount Requested for Operations | Amount Requested for<br>Fixed Capital Outlay | Total Amount of Requested State Funds |
|---------------------------------|--|---------------------------------------|
|                                 | 1,000,000                                    | 1,000,000                             |

#### 7. Type, amount and percent of matching funds available for this project for fiscal year 2018-19:

| Туре   | Amount | Percent |
|--|--------|---------|
| Federal                                      | 0      | 0.0%    |
| State (excluding the amount of this request) | 0      | 0.0%    |
| Local  | 0      | 0.0%    |
| Other  | 0      | 0.0%    |
| TOTAL  | 0      | 0.0 %   |

#### 8. Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds): 1,000,000

#### 9. Previous Year Funding Details:

- a. Has funding been provided in a previous state budget for this activity? No
- b. In the previous 5 fiscal years, how many years was funding provided? (Optional)
- c. What is the most recent fiscal year the project was funded?
- d. Were the funds provided in the most recent fiscal year subsequently vetoed?
- e. Complete the following Worksheet.



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| FY:                               | Input Prior FY Appropriation for this project  for FY 2017-18  (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.) |                                    |   |
|-----------------------------------|---|------------------------------------|---|
| Column:                           | Α   | В                                  | С   |
| Funds Description: Input Amounts: | Prior Year<br>Recurring Funds *   | Prior Year<br>Nonrecurring Funds * | Total Funds Appropriated<br>(Column A + Column B) |

#### 10. Is future-year funding likely to be requested?

No

#### 11. Program Performance:

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

The current, out-of-date, chiller no longer performs to manufacturer's specifications and has increased costs for operation & maintenance of chiller & MDP. Cost savings are estimated to be approximately \$10,000 annually

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

Replacement of 19 year old HVAC Chiller and 34 year old Main Distribution Panel (MDP)

#### c. How will the funds be expended?

| Spending Category                                    | Description | Amount |
|--|-------------|--------|
| Administrative Costs                                 |             |        |
| ☐Executive Director/Project Head Salary and Benefits |             |        |
| ☐Other Salary and Benefits                           |             |        |
| □Expense/Equipment/Travel/Supplies/Other             |             |        |
| □Consultants/Contracted Services/Study               |             |        |
| Operational Costs                                    |             |        |
| ☐Salary and Benefits                                 |             |        |
| □Expense/Equipment/Travel/Supplies/Other             |             |        |



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| □Consultants/Contracted Services/Study             |              |           |
|--|--------------|-----------|
| Fixed Capital Construction/Major Renovation        |              |           |
| ☑Construction/Renovation/Land/Planning Engineering | Construction | 1,000,000 |
| TOTAL  |              | 1,000,000 |

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

Replacement of 19 year old HVAC Chiller and 34 year old Main Distribution Panel (MDP)

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

<u>Direct benefit will be to the students attending Florida SouthWestern State College through avoiding costly repairs & interruptions to classes should the system fail.</u>

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

This project's Return on Investment (ROI) will not be a direct dollar for dollar payback, as the estimated cost savings of \$10,000 annually will not equal the investment over the 13 year expected lifecycle of the chiller. It is important to remember the current units are presenting an increased cost due to becoming less efficient and exceeding their normal life cycle. Our service provider will be able to document the decrease in cost to operate a new unit. The institution will be able to utilize the cost savings in other operational needs across the 5 counties we serve. It is also important to note the potential damage to other components should the system fail outside of a normal replacement, as well as costly interruptions to student learning should the affected buildings be shut down due to inoperative environmental systems.

- g. 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?

  None
- 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.

Florida SouthWestern State College

13. Requestor Contact Information:

a. Name: Matthew Holliday

**b.** Organization: Florida SouthWestern State College

c. Email: <a href="mholliday@fsw.edu">mholliday@fsw.edu</a>d. Phone Number: (239)826-7864

14. Recipient Contact Information:



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a. Organization: Florida SouthWestern State College

b. County: Lee

c. Organization Type:

O For Profit

O Non Profit 501(c) (3)

O Non Profit 501(c) (4)

O Local Entity

O University or College

Other (Please specify) Public College

d. Contact Name: Matthew Holliday
e. E-mail Address: mholliday@fsw.edu
f. Phone Number: (239)826-7864

15. If there is a registered lobbyist, fill out the lobbyist information below.

a. Name: Noneb. Firm: Nonec. Email:

d. Phone Number: