



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** Blountstown Fire Station and Training Center

2. **Senate Sponsor:** Bill Montford

3. **Date of Submission:** 01/22/2018

4. **Project/Program Description:**

Construction of a new fire station for the City of Blountstown Fire Department.

5. **State Agency Contacted?** Yes

a. If yes, which state agency? Department of Economic Opportunity

b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested?

6. **Amount of Non-recurring Requested for fiscal year 2018-19:**

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
	250,000	250,000

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

Type	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):** 250,000

9. **Previous Year Funding Details:**

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

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

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?

Construction of a new fire station and training facility in Blountstown, Florida

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

Housing for Fire Suppression apparatus, equipment and personnel. Areas for training and administration.

c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
<input type="checkbox"/> Executive Director/Project Head Salary and Benefits		
<input type="checkbox"/> Other Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		
Operational Costs		
<input type="checkbox"/> Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input checked="" type="checkbox"/> Consultants/Contracted Services/Study	Plans design, architectural services, etc.	15,000



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Fixed Capital Construction/Major Renovation		
<input checked="" type="checkbox"/> Construction/Renovation/Land/Planning Engineering	CEI, Construction and building materials	235,000
TOTAL		250,000

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

Fire Safety via a centrally located station. Faster response times, better community involvement. Better training facilities and a multipurpose room available to the community for classes.

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

3,000 City residents, over 10,000 from the outlying area as well as the 20,000+ who pass through Blountstown Daily

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

We will measure by documenting faster response times, positive results from customer surveys and positive results from our Insurance Services Office (ISO) surveys.

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?

Continue with Industry Standard

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.

City of Blountstown/Blountstown Fire Department

13. Requestor Contact Information:

- a. **Name:** Benjamin Hall
- b. **Organization:** Blountstown Fire Department
- c. **Email:** firechief@blountstownfire.org
- d. **Phone Number:** (840)643-7893

14. Recipient Contact Information:

- a. **Organization:** City of Blountstown
- b. **County:** Calhoun
- c. **Organization Type:**
 - ☐ For Profit
 - ☐ Non Profit 501(c) (3)
 - ☐ Non Profit 501(c) (4)
 - ☒ Local Entity



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☐ University or College

☐ Other (Please specify)

d. Contact Name: Traci Hall

e. E-mail Address: thall@blountstown.org

f. Phone Number: (850)674-4988

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

a. Name: Patrick Bell

b. Firm: Capitol Solutions

c. Email: pbell@capitolsolutions.biz

d. Phone Number: (850)544-0784