

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

1. Title of Project: Chattahoochee Fire Station

Senate Sponsor: Bill Montford
 Date of Submission: 01/24/2018
 Project/Program Description:

Construction of a new fire station for the City of Chattahoochee.

- 5. State Agency Contacted? Yes
  - a. If yes, which state agency? Department of Financial Services
  - 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:

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): 250,000

#### 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.

	Input Prior FY Appropriation for this project
FY:	for FY 2017-18



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	(If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
Column:	Α	В	С
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 for the city of Chattahoochee.

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

Housing for fire apparatus, equipment and personnel. Areas for training and administration.

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		
☐Consultants/Contracted Services/Study		



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Fixed Capital Construction/Major Renovation		
☑Construction/Renovation/Land/Planning Engineering	Construction, CEI, Design and building supplies & labor	250,000
TOTAL		250,000

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

Improved Fire Safety, training for our firefighters, better facilities for our apparatus.

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

3,152 residents

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

To better serve the citizens of our town through active fire suppression activities and faster response times.

- 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.
  N/A
- 13. Requestor Contact Information:

a. Name: Lee Garner

b. Organization: City of Chattahoochee

c. Email: citymgr@fairpoint.net

d. Phone Number: (850)663-4046

14. Recipient Contact Information:

a. Organization: City of Chattahoochee

**b.** County: Gadsden

- c. Organization Type:
  - O For Profit

O Non Profit 501(c) (3)

O Non Profit 501(c) (4)

Local Entity

O University or College

O Other (Please specify)

d. Contact Name: Lee Garner



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e. E-mail Address: <a href="mailto:citymgr@fairpoint.net">citymgr@fairpoint.net</a>

f. Phone Number: (850)663-4046

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

a. Name: <u>Patrick Bell</u>b. Firm: <u>Capitol Solutions</u>

c. Email: <a href="mailto:pbell@capitolsolutions.biz">pbell@capitolsolutions.biz</a>d. Phone Number: <a href="mailto:(850)544-0784">(850)544-0784</a>