



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2019-2020

LFIR#: 2511

1. **Title of Project:** Hurricane Michael - City of Parker - Parks

2. **Senate Sponsor:** George Gainer

3. **Date of Submission:** 03/05/2019

4. **Project/Program Description:**

This project is to provide assistance to the City of Parker with the cost of repairs to their parks damaged by Hurricane Michael.

Hurricane Michael significantly damaged three city parks and the city's sports complex. Repairs to the facilities will cost in excess of \$355,000. The City of Parker will be responsible for at least 12.5 percent that amount. The ultimate responsibility of the city depends on FEMA reimbursements.

5. **State Agency to receive requested funds :** Department of Economic Opportunity

State Agency Contacted? No

6. **Amount of the Nonrecurring Request for Fiscal Year 2019-2020**

Type of Funding	Amount
Operations	44,375
Fixed Capital Outlay	
<b>Total State Funds Requested</b>	<b>44,375</b>

7. **Total Project Cost for Fiscal Year 2019-2020 (including matching funds available for this project)**

Type of Funding	Amount	Percent
Total State Funds Requested (from question #6)	44,375	100.00%
Federal	0	0.00%
State (excluding the amount of this request)	0	0.00%
Local	0	0.00%
Other	0	0.00%
<b>Total Project Costs for Fiscal Year 2019-2020</b>	<b>44,375</b>	<b>100.0%</b>

8. **Has this project previously received state funding?** No

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	NonRecurring		

9. **Is future-year funding likely to be requested?** No

10. **Details on how the requested state funds will be expended**

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and		



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Benefits		
Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
<b>Operational Costs:</b>		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	The City of Parker had three parks and its sports complex damaged by Hurricane Michael. Contractors will be hired to conduct the necessary repairs.	44,375
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>44,375</b>

**11. Program Performance:**

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

The purpose of the requested funds is to help offset the cost of repairing the 3 City of Parker parks and the sports complex that were damaged by Hurricane Michael.

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

The service provided will be the retention of contractors to conduct the needed repairs to the parks and sports complex.

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

The funds will assist the City of Parker's citizens by repairing the damage to the parks that contribute to their recreational and emotional well-being.

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

The City of Parker has a population of approximately 4,600 individuals

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

The expected outcome of this project is that the city parks and sports complex will be repaired and returned to usable condition. The completion of the repairs will be the methodology by which to measure the outcome.

**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 in the contract?**

The money should be used for the project intended. If not, the suggested penalty is repayment of the funds.

**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 Parker.



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#### 13. Requestor Contact Information:

- a. **Name:** Rich Musgrave
- b. **Organization:** City of Parker
- c. **E-mail Address:** richmusgrave@cityofparker.com
- d. **Phone Number:** (850)871-4104

#### 14. Recipient Contact Information:

- a. **Organization:** City of Parker
- b. **County:** Bay
- c. **Organization Type:**
  - For Profit
  - Non Profit 501(c) (3)
  - Non Profit 501(c) (4)
  - Local Entity
  - University or College
  - Other (Please specify)
- d. **Contact Name:** Rich Musgrave
- e. **E-mail Address:** richmusgrave@cityofparker.com
- f. **Phone Number:** (850)871-4104

#### 15. Lobbyist Contact Information

- a. **Name:** None
- b. **Firm Name:** None
- c. **E-mail Address:**
- d. **Phone Number:**