

The Florida Senate Local Funding Initiative Request Fiscal Year 2020-2021

LFIR # 2020

1. **Project Title** Coral Springs Public Safety/Public Works Building Hardening Project

2. Senate Sponsor Kevin Rader

3. Date of Request 12/12/2019

4. Project/Program Description

The Coral Springs Westside Maintenance Complex hardening project will harden the main building to prevent damage from occurring due to high winds of major storms. The complex houses the Streets, Fleet, and Central Stores staff during the event of a hurricane event. Tools and equipment to support the repair of the city reside within this facility. Currently, it is not up to today's building code. If the destruction and collapse of the Westside Complex were to occur, Streets would lose its ability to clear roadways, providing passage for emergency and utility vehicles; Fleet would be unable to repair damaged and broken-down service vehicles such as firetrucks, ambulances, utility trucks, police cars, or heavy equipment. Central Stores would not be able to provide supplies to all the above-mentioned service departments, which include a vast array of supplies: first aid, PPE, gasoline, tools, ammunition, water, food, etc.

5. State Agency to receive requested funds

Executive Office of the Governor

State Agency contacted? O Yes

No

6. Amount of the Nonrecurring Request for Fiscal Year 2020-2021

| Type of Funding | Amount | |
|-----------------------------|-----------|--|
| Operations | 000 | |
| Fixed Capital Outlay | 2,500,000 | |
| Total State Funds Requested | 2,500,000 | |

7. Total Project Cost for Fiscal Year 2020-2021 (including matching funds available for this project)

| Type of Funding | Amount | Percentage | |
|--|------------|------------|--|
| Total State Funds Requested (from question #6) | 2500000 | 11.0 % | |
| Matching Funds | | | |
| Federal | 00 | 0 % | |
| State (excluding the amount of this request) | 00 | 0 % | |
| Local | 20,750,000 | 89 % | |
| Other | 00 | 0 % | |
| Total Project Costs for Fiscal Year 2020-2021 | 23,250,000 | 100 % | |

8. Has this project previously received state funding? • Yes • No

If yes, provide the most recent instance:

| Fiscal Year | Amount | | Specific | |
|-------------|-----------|--------------|-----------------|--------|
| (уууу-уу) | Recurring | Nonrecurring | Appropriation # | Vetoed |
| 2017-18 | 00 | 750,000 | 1921A | Yes |

9. Is future-year funding likely to be requested? O Yes • No

If yes, indicate nonrecurring amount per year.



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10. Details on how the requested state funds will 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: Oth | er | | | |
| Salary and Benefits | | | | |
| Expense/Equipment/ Travel/Supplies/Other | | | | |
| Consultants/Contracted Services/Study | | | | |
| Fixed Capital Construction/Major Renovation: | | | | |
| Construction/Renovation/ Land/Planning Engineering | Major renovation to an existing building. | 2,500,000 | | |
| Total State Funds Requested (must equal total from question #6) | | | | |



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11. Program Performance

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

The West Side Complex supports multiple city departments such as Public Safety, Public Works, and Central Stores. All three units have an important role in the response and recovery following a hurricane disaster. Past standard operating procedures have called for employees to stay overnight in the event that passage to the facility, post-storm, becomes inaccessible. In the event of a collapsed building, the aftermath would be devastating to all employees housed in the building during that time. The expected benefit is to provide a safe and secure structure that will house staff, vital equipment, and supplies needed during times of emergency.

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

Renovating the building will ensure that equipment, citizens, and staff are all safe and secure in the event of a major storm or hurricane.

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

The citizens will benefit from the city's ability to clear roadways to provide for passage of emergency vehicles in the event of a hurricane or major storm.

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

The 123,000 residents of Coral Springs and region of 1.8 million residents will benefit as the fire and police departments have mutual aid agreements to provide assistance to neighboring cities in times of crisis and emergency

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

The citizens will benefit from the city's ability to clear roadways to provide for passage of emergency vehicles in the event of a hurricane or major storm. Outcome will be measured by number of streets that are cleared after a hurricane or major storm event.

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?

Failure to meet deliverables or performance measures will result in reduction or total loss of funding.



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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. 12.

| | The City of Coral Springs owns the facility. | | | | | |
|-----|--|----------------------------------|------------------------------|--|--|--|
| | | | | | | |
| 13. | Requestor Contact Information | | | | | |
| | a. | First Name | Melissa Last Name Heller | | | |
| | b. | Organization | City of Coral Springs | | | |
| | C. | E-mail Address | mheller@coralsprings.org | | | |
| | d. | Phone Number | (954)344-1087 Ext. | | | |
| 14. | Re | ecipient Contact | Information | | | |
| | | Organization | City of Coral Springs | | | |
| | b. | Municipality and | County Broward | | | |
| | c. | Organization Typ | De | | | |
| | | For-profit E | For-profit Entity | | | |
| | | Non-Profit 5 | - | | | |
| | | O Non-Profit 5 | 501(c) (4) | | | |
| | | Local Entity | / | | | |
| | | O University o | or College | | | |
| | | Other (plea | se specify) | | | |
| | d. | First Name | Melissa Last Name Heller | | | |
| | e. | E-mail Address | mheller@coralsprings.org | | | |
| | | Phone Number | | | | |
| | | | | | | |
| 15. | | obbyist Contact I | | | | |
| | a. | Name | Lauren Jackson | | | |
| | b. | Firm Name | Ericks Consultants | | | |
| | C. | E-mail Address | lauren@ericksconsultants.com | | | |

Ext.

d. Phone Number (931)2658999