



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2020-2021

LFIR # 2294

1. **Project Title** City of Pahokee Emergency/Community Center

2. **Senate Sponsor** Gayle Harrell

3. **Date of Request** 12/23/2019

4. **Project/Program Description**

The city does not have an emergency operations center that can fully address the needs of its citizens residing in the vulnerable western portion of Palm Beach County during emergency situations. The city is requesting funding for renovations to an existing structure to accommodate all city departments, county representatives, and other emergency related representatives. Renovations will include the latest technology and communications equipment and be constructed to continue operations during and after natural or man-made disasters. The facility will serve as an emergency evacuation center for residents in the Glades area, a post-disaster distribution center, and a community center for residents and visitors. \$2.1 million in local funds have been allocated for improvements to the building that would house the emergency/community center.

5. **State Agency to receive requested funds** Executive Office of the Governor

State Agency contacted? ☐ Yes ☒ No

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

Type of Funding	Amount
Operations	000
Fixed Capital Outlay	900,000
Total State Funds Requested	900,000

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)	900000	100.0 %
Matching Funds		
Federal	00	0 %
State (excluding the amount of this request)	00	0 %
Local	00	0 %
Other	00	0 %
Total Project Costs for Fiscal Year 2020-2021	900,000	100 %

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

If yes, provide the most recent instance:

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

9. **Is future-year funding likely to be requested?** ☐ 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: Other		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	Mobilization, pre-planning, pre-bid, bidding, architectural redesign, and construction of project.	900,000
Total State Funds Requested (must equal total from question #6)		900,000



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11. Program Performance

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

The City of Pahokee has endured several decades of infrastructure challenges mostly due to the impacts of hurricanes and tropical storms destroying most of the city's amenities. With renovations the city can embrace safety measures for residents and improve public access while increasing participation in educational programs and fitness and recreational opportunities by youth, seniors, and visitors.

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

All phases of emergency management during emergency situations. Reduce vulnerability and recover from emergencies. Protect lives and property in the Glades area. Health and wellness programs; STEM (educational programs and academic tutoring); prevention programs at hours of high risk (afterschool intramural, midnight sporting events); and senior health prevention programs (exercise, senior benefits program, senior athletic league). The visitor health and wellness center will create a synergy of participation by tourists, marina dock clients, and overnight visitors participating in ecotourism activities such as bass fishing trips, brokerage boat shows, and RV campground activities.

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

Facility will serve as an emergency evacuation center for residents in the Glades and a community center for residents and visitors. With restoration of a storm damaged amenity, the City of Pahokee can concentrate its efforts on formulating a safe place during natural disasters where eco-tourism, boating, fishing, and healthy lifestyles will co-exist in the Glades region.

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

During emergency situations this facility will serve citizens in the Glades. The project is expected to serve over 300-500 citizens and visitors weekly in numerous educational programs, STEM programs, athletics, and health/wellness initiatives.

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

Emergency operations center and point of distribution post for emergency situations and natural disasters for residents and the Glades community. Improve the physical and mental health of citizens; enhance the cultural experience; and protect the public from general harm from environmental hazards. Methodology: Utilization of recreational amenities for physical and mental conditioning; utilization for educational purposes; and utilization of recreational shelter for community programming and cultural events.

- 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 without notification of good reasoning will result in financial penalties as described in contract.



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12. **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.**

City of Pahokee.

13. **Requestor Contact Information**

- a. First Name Last Name
- b. Organization
- c. E-mail Address
- d. Phone Number Ext.

14. **Recipient Contact Information**

- a. Organization
- b. Municipality and County
- c. Organization Type
- ☐ For-profit Entity
 - ☐ Non-Profit 501(c) (3)
 - ☐ Non-Profit 501(c) (4)
 - ☒ Local Entity
 - ☐ University or College
 - ☐ Other (please specify)
- d. First Name Last Name
- e. E-mail Address
- f. Phone Number

15. **Lobbyist Contact Information**

- a. Name
- b. Firm Name
- c. E-mail Address
- d. Phone Number Ext.