

# The Florida Senate Local Funding Initiative Request Fiscal Year 2021-2022

LFIR # 1733

. Project Title	Hamilton School Entrance Signal Enhancement							
. Senate Sponsor	Loranne Ausley							
. Date of Request	02/05/2021							
. Project/Program De	escription							
Improve traffic signa	als at Hamilton Sch	ool complex.						
State Agency to red	ceive requested fu	<b>nds</b> Depart	ment of Transportation					
State Agency conta	•							
State Agency conta	icled? Tes							
Amount of the Nonr	recurring Request	for Fiscal Year	2021-2022					
Type of Funding			Am	ount				
Operations				0				
Fixed Capital Outlay	1			200,000				
<b>Total State Funds F</b>	Requested			200,000				
Total Project Cost f	or Fiscal Year 202	1-2022 (includi	ng matching funds av	ailable for this proj	ect)			
Type of Funding			Amount	Percentage				
Total State Funds R	equested (from que	estion #6)	200,000	100%				
Matching Funds				T				
Federal			0					
State (excluding the	amount of this requ	uest)	0					
Local			0					
	Other			0%				
Other	Total Project Costs for Fiscal Year 2021-2022			100%				
	for Fiscal Year 20	)21-2022	200,000	<u> </u>				
Total Project Costs  Has this project pre	eviously received	state funding?	No					
Total Project Costs	eviously received :	state funding?	No Specific	Vetoed				
Total Project Costs  Has this project pre	eviously received	state funding?	No Specific					
Total Project Costs  Has this project pre  Fiscal Year (уууу-уу)	eviously received s  Amo  Recurring	state funding? ount Nonrecurrin	Specific Appropriation #					
Total Project Costs  Has this project pre  Fiscal Year (уууу-уу)	eviously received s  Amo  Recurring	state funding? ount Nonrecurrin	No Specific					
Total Project Costs  Has this project pre  Fiscal Year (уууу-уу)	Amo Recurring	state funding?  ount  Nonrecurringed?	Specific Appropriation #					
Total Project Costs  Has this project pre  Fiscal Year (уууу-уу)  Is future funding like a. If yes, indicate ne	Amo Recurring Kely to be requested	state funding?  ount  Nonrecurrin  ed?  nt per year.	No Specific Appropriation #	Vetoed				
Total Project Costs  Has this project pre Fiscal Year (yyyy-yy)  Is future funding like	Amo Recurring Kely to be requested	state funding?  ount  Nonrecurrin  ed?  nt per year.	Specific Appropriation #	Vetoed				
Total Project Costs  Has this project pre Fiscal Year (уууу-уу)  Is future funding like	Amo Recurring Kely to be requested	state funding?  ount  Nonrecurrin  ed?  nt per year.	No Specific Appropriation #	Vetoed				
Total Project Costs  Has this project pre Fiscal Year (yyyy-yy)  Is future funding like a. If yes, indicate new	Amo Recurring Kely to be requested onrecurring amou	state funding?  ount  Nonrecurrin  ed?  nt per year.  at can be used	No Specific Appropriation #	Vetoed	19 pandemic?			
Total Project Costs  Has this project pre Fiscal Year (уууу-уу)  Is future funding like a. If yes, indicate new b. Describe the sou	Amo Recurring Kely to be requested onrecurring amou	state funding?  ount  Nonrecurrin  ed?  nt per year.  at can be used	No Specific Appropriation # No No in lieu of state funding	Vetoed	19 pandemic?			
Total Project Costs  Has this project pre  Fiscal Year (уууу-уу)  Is future funding lik a. If yes, indicate no b. Describe the sou  O. Has the entity required.	Amo Recurring Kely to be requested onrecurring amou urce of funding that	state funding?  Dunt  Nonrecurring  ed?  nt per year.  at can be used  ct received any	No Specific Appropriation # No No in lieu of state funding	Vetoed  J. J	19 pandemic?			



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### 11. Details on how the requested state funds will be expended

Spending Category	Description	Amount				
Administrative Costs:						
Executive Director/Project Head Salary and Benefits		0				
Other Salary and Benefits		0				
Expense/Equipment/Travel/Supplies/ Other		0				
Consultants/Contracted Services/Study		0				
Operational Costs: Other						
Salary and Benefits		0				
Expense/Equipment/Travel/Supplies/ Other		0				
Consultants/Contracted Services/Study		0				
Fixed Capital Construction/Major Renovation:						
Construction/Renovation/Land/ Planning Engineering	Design and installation of revived signaling program for Hamilton Education Complex.	200,000				
Total State Funds Requested (must equal total from question #6)						

### 12. Program Performance

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

Hamilton schools have been combined into a single county complex increasing traffic for all activities into a single complex. Traffic patterns have been altered and not reflected completely and safely to current situations on state maintained highways.

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

Signals and speed zone adjustments.

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

Traffic control, better traffic flow, and an increase in safety measures.

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

All student and faculty traffic.

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

Safe entrance into and out of complex during all school activities.

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 the contract?

Deobligation of funds.

13. 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.

FDOT and county owns right of way and the Hamilton School District owns the complex.



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14	. Requestor Contact	t Informat	ion							
	a. First Name	Louie		Last Name	Goodin					
	b. Organization	Hamilton County Board of Commissioners								
	c. E-mail Address	hamiltoncounty@windstream.net								
	d. Phone Number	(386)792-6639 Ext.								
15. Recipient Contact Information										
	a. Organization	Hamilton County Board of Commissioners								
	b. Municipality and County Hamilton									
	c. Organization Type									
	□For Profit Entity	1								
	□Non Profit 501(d	1(c)(3)								
	□Non Profit 501(c	□Non Profit 501(c)(4)								
	☑Local Entity	☑Local Entity								
	□University or College									
	□Other (please specify)									
	d. First Name	Louie		Last Name	Goodin					
	e. E-mail Address	hamiltoncounty@windstream.net								
	f. Phone Number	(386)792-6639								
16. Lobbyist Contact Information										
	a. Name	None								
	b. Firm Name	None								
	c. E-mail Address									
	d. Phone Number									