

LFIR # 1991

1. Project Title	Hurricane Micha	Hurricane Michael Local Match - Marianna						
2. Senate Sponsor	George Gainer							
3. Date of Request	01/26/2021							
4. Project/Program D	escription							
area of opportunity	(RAO), previously k r 2018 and has req	nown as rural are uired the city to e	ea of critica xpend ove	l economic co \$9 million, in	oncern. Hurricane N the form of reserve	es and a federal loan, to		
5. State Agency to re	ceive requested fu	ınds Division	n of Emerg	ency Manage	ment			
State Agency conta	acted? No							
6. Amount of the Non	recurring Request	for Fiscal Year	2021-2022					
Type of Funding				Amount				
Operations					468,666			
Fixed Capital Outlay	/				0			
Total State Funds	Requested			468,666				
7. Total Project Cost f	or Fiscal Year 202	21-2022 (includir	ng matchin	g funds avai	lable for this proj	ect)		
Type of Funding			Amo	ount	Percentage			
	Total State Funds Requested (from question #6)		468,666		100%			
Matching Funds								
	Federal			0	0% 0%			
State (excluding the	amount of this req	uest)						
Local Other				0	0% 0%			
Total Project Costs	s for Fiscal Year 2	021-2022		468,666	100%	I		
8. Has this project pro	eviously received	state funding?	No					
Fiscal Year	Am	ount	S	pecific	Vetoed			
(уууу-уу)	Recurring	Nonrecurring	Appro	priation #				
9. Is future funding lil	kely to be request	ed?	No					
a. If yes, indicate nonrecurring amount per year.								
b. Describe the so	_		n liqu of st	ate funding				
D. Describe the 500	uroe or runumy th	at call be used I	ii iieu oi si	ate fulluling.		1		
10. Has the entity req	uesting this proje	ct received any	federal as	sistance rela	ted to the COVID-	19 pandemic?		
Yes	5 - 1 - 7			- 12	·	•		
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If yes, indicate the amount of funds received and what the funds were used for.



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Approximately \$1,800,000 which has been used to:

- 1. Operate and maintain a city-owned 180 bed long term care facility
- 2. Improve and enhance fire, EMS, and police services as a result of pandemic

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	Replaces funds the city has already spent on capital improvements associated with damages caused by Hurricane Michael.	468,666		
Consultants/Contracted Services/Study		0		
Fixed Capital Construction/Majo	r Renovation:			
Construction/Renovation/Land/ Planning Engineering		0		
Total State Funds Requested (must equal total from question #6) 468,666				

12. Program Performance

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

The City of Marianna is located in Jackson County, a fiscally constrained county. Additionally, Marianna is part of a rural area of opportunity (RAO). Hurricane Michael directly hit Marianna in October 2018 and has required the city to expend over \$9 million in the form of reserves and a federal loan, to date, to help with recovery from Hurricane Michael. The funds will be used to cover the local match required by FEMA, in which funds were used to make capital improvements.

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

The activities and services provided will be that the city can use the reimbursement for improvements to roads, water, and waste water projects.

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

The reimbursement will allow the city to use the funds for road, water, and wastewater improvements.

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

The population that would benefit from the reimbursement to make capital improvements will be the citizens of Marianna - 6,200; citizens of Jackson County 48,000; and all that visit the community.

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

The benefits of the project should the city receive funding would be to improve city streets, water and wastewater systems.

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?



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Repayment of	of the funds.
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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.

The City of Marianna is the owner of all water, wastewater, and roadways within the city excluding state highways.



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14	. Requestor Contact	Information						
	a. First Name	Jim		Last Name	Dean			
	b. Organization	City of Marianna						
	c. E-mail Address	jdean@mariannafl.city						
	d. Phone Number	(850)718-1000 Ext.						
15	15. Recipient Contact Information							
	a. Organization	Jim Dean						
	b. Municipality and County Jackson							
	c. Organization Type							
	□For Profit Entity	<i>I</i>						
	□Non Profit 501(c	(c)(3)						
	□Non Profit 501(c	501(c)(4)						
	☑Local Entity	у						
	□University or College							
	□Other (please specify)							
	d. First Name	Jim		Last Name	Dean			
	e. E-mail Address	jdean@mariannafl.city						
	f. Phone Number	(850)482-4353						
16	16. Lobbyist Contact Information							
	a. Name	Patrick Bell						
	b. Firm Name	Capitol Solutions						
	c. E-mail Address	pbell@capitolsolutions.biz						
	d. Phone Number	(850)544-0784						