

LFIR # 1069

1. Project Title	St. Lucie County Housing New Housing Plan	eds Assessment and Comp	orehensive			
2. Senate Sponsor	Gayle Harrell					
3. Date of Request	10/12/2021					
4. Project/Program De	escription					
Housing Plan to ider alleviate the county's and the economic counter COVID-19 pands housing – to recognibeing of its residents	consist of undertaking a county-ventify the housing needs in St. Luces critical affordable housing need ontexts underpinning affordable lemic. As such, a Housing Needs ze that affordable housing is critics. A comprehensive and impactfuctome current and persistent level	cie and develop a plan to and sevelop a plan to and sevelop and the requires a full understanding Assessment is imperative ical to St. Lucie County's early affordable housing develop	ddress those needs ding of the dynamic g and perspective he to help expand the conomic resilience appment delivery sys	Developing policies to sof the housing market as been accentuated by importance of affordable and the health and well-tem for the long-term is		
	•	partment of Economic Opp				
State Agency conta		р				
• •		2022 2022				
	ecurring Request for Fiscal Y			1		
Type of Funding		Amo	ount			
Operations			100,000			
Fixed Capital Outlay			0			
Total State Funds F	Requested		100,000			
7. Total Project Cost f	or Fiscal Year 2022-2023 (inclu	uding matching funds ava	ailable for this proj	ect)		
7. Total Project Cost for Type of Funding	or Fiscal Year 2022-2023 (inclu	Amount	ailable for this proj	ect)		
Type of Funding	or Fiscal Year 2022-2023 (included) equested (from question #6)		Percentage]		
Type of Funding	,	Amount	Percentage]		
Type of Funding Total State Funds Re	,	Amount	Percentage			
Type of Funding Total State Funds Re Matching Funds Federal	,	Amount 100,000	Percentage 100%			
Type of Funding Total State Funds Re Matching Funds Federal	equested (from question #6)	Amount 100,000	Percentage 100%			
Type of Funding Total State Funds Ro Matching Funds Federal State (excluding the	equested (from question #6)	Amount 100,000	Percentage 100% 0% 0%			
Type of Funding Total State Funds Ro Matching Funds Federal State (excluding the Local Other	equested (from question #6)	Amount 100,000 0 0 0	Percentage 100% 0% 0% 0% 0%			
Type of Funding Total State Funds Ro Matching Funds Federal State (excluding the Local Other Total Project Costs	equested (from question #6) amount of this request)	Amount 100,000 0 0 100,000	Percentage 100% 0% 0% 0% 0%			
Type of Funding Total State Funds Ro Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre	equested (from question #6) amount of this request) for Fiscal Year 2022-2023	Amount 100,000 0 0 100,000 100,000 g? No Specific	Percentage 100% 0% 0% 0% 0%			
Type of Funding Total State Funds Ro Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre	equested (from question #6) amount of this request) for Fiscal Year 2022-2023 eviously received state funding	Amount 100,000 0 0 0 100,000 100,000 g? No Specific	Percentage 100% 0% 0% 0% 0% 100%			
Type of Funding Total State Funds Ro Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre	equested (from question #6) amount of this request) for Fiscal Year 2022-2023 eviously received state funding	Amount 100,000 0 0 0 100,000 100,000 g? No Specific	Percentage 100% 0% 0% 0% 0% 100%			
Type of Funding Total State Funds Ro Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre	equested (from question #6) amount of this request) for Fiscal Year 2022-2023 eviously received state funding Amount Recurring Nonrecur	Amount 100,000 0 0 0 100,000 100,000 g? No Specific	Percentage 100% 0% 0% 0% 0% 100%			
Type of Funding Total State Funds Ro Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre Fiscal Year (уууу-уу) 9. Is future funding like	equested (from question #6) amount of this request) for Fiscal Year 2022-2023 eviously received state funding Amount Recurring Nonrecur	Amount	Percentage 100% 0% 0% 0% 0% 100%			
Type of Funding Total State Funds Re Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre Fiscal Year (уууу-уу) 9. Is future funding like a. If yes, indicate ne	equested (from question #6) amount of this request) for Fiscal Year 2022-2023 eviously received state funding Amount Recurring Nonrecur tely to be requested? conrecurring amount per year.	Amount	Percentage 100% 0% 0% 0% 0% 100%			
Type of Funding Total State Funds Ro Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre Fiscal Year (уууу-уу) 9. Is future funding like a. If yes, indicate no	equested (from question #6) amount of this request) for Fiscal Year 2022-2023 eviously received state funding Amount Recurring Nonrecur	Amount	Percentage 100% 0% 0% 0% 0% 100%			



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10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

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If yes, indicate the amount of funds received and what the funds were used for.

CARES Act Funding Expenditures: grand total - \$55.2 million, including: social services - \$11.2 million; public safety, public health, and constitutionals - \$39.2 million; municipalities and unincorporated St. Lucie County - \$2.7 million; economic recovery - \$192,062; and small business assistance program - \$1.8 million.

Note: St. Lucie County is in the process of reconciling CARES Act expenditures with the state. There may be adjustments to some of the categories after the final reconciliation.

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

Spending Category	Description				
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	St. Lucie County procurement of a consulting firm to conduct a Housing Needs Assessment in coordination with the cities of Port Saint Lucie and Fort Pierce. The Needs Assessment would include statistical data from newly released census data, stakeholder meetings, and various community engagement events. The data in the Housing Needs Assessment would then be used to formulate a county-wide Comprehensive Housing Plan to include strategies, recommendations, goals, and objectives to address housing.	100,000			
Fixed Capital Construction/Major Renovation:					
Construction/Renovation/Land/ Planning Engineering		0			
Total State Funds Requested (must equal total from question #6) 100,000					

12. Program Performance

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

The goal of the funding requested would be to identify the unmet housing needs in St. Lucie County and create a comprehensive county-wide strategic plan that provides short terms and long term strategies and initiatives to address the needs identified in the assessment.

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

Consulting services will be procured with the funds requested. The consultant will work with staff from the county and cities to prepare a comprehensive county-wide needs assessment and housing plan.

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

The long term goal of the project is to increase the number of affordable housing units available to St. Lucie County residents.

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



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The target population for this project includes the ALICE population. ALICE is an acronym for Asset Limited, Income Constrained, Employed — households that earn more than the Federal Poverty Level, but less than the basic cost of living for the county. The number of individuals expected to be served is unknown. In addition to the ALICE population, the senior population is also a target population.

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

Expected outcomes of this project may include, but are not limited to, the number of housing units added to the housing stock, increased access to affordable housing, increased applications to housing programs, increased neighborhood support for affordable housing, increased housing opportunities for low-income families, homeowner/tenant satisfaction, improved quality of life for residents, and increased long term housing opportunities. These outcomes would be measured utilizing organizational records, surveys, review of applications, and interviews of residents.

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?

Standard contract penalties will be sufficient.

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.

This project does not include owners of a facility or fixed capital outlay funding.



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14.	14. Requestor Contact Information						
	a. First Name	Nicole		Last Name	Fogarty		
	b. Organization	St. Lucie County Board of County Commission					
	c. E-mail Address	fogartyn@stlucieco.org					
	d. Phone Number	(772)462-6426 Ext.					
15.	Recipient Contact	nt Contact Information					
	a. Organization	St. Lucie County Board of County Commission					
	b. Municipality and	d County	Saint Lucie				
	c. Organization Type						
	□For Profit Entity						
	□Non Profit 501(c	c)(3)					
	□Non Profit 501(c	:)(4)					
	☑Local Entity						
	□University or Co	ollege					
	□Other (please specify)						
	d. First Name	Nicole		Last Name	Fogarty		
	e. E-mail Address	fogartyn@stlucieco.org					
	f. Phone Number	(772)462-6426					
16.	16. Lobbyist Contact Information						
	a. Name	Mary Kim McDougal					
	b. Firm Name	GrayRobinson PA					
	c. E-mail Address	kim.mcdougal@gray-robinson.com					
	d. Phone Number	(850)577-9090					