

LFIR # 1202

a. If yes, indicate rb. Describe the so	•		ieu of state funding.			
. Is future funding li			No			
(уууу-уу)	Recurring	Nonrecurring	Appropriation #			
Fiscal Year	Am	ount	Specific "	Vetoed		
. Has this project pr	eviously received	state funding?	No			
Total Project Cost	s for Fiscal Year 2	022-2023	150,000	100%		
Other			0	0%		
Local	•		0	0%		
State (excluding the	amount of this req	uest)	0	0%		
Federal			0	0%		
Total State Funds R Matching Funds	equestea (Irom qu	ປວແບກ #b)	150,000	100%		
Type of Funding	loguosta d'Arrana	action #C\	Amount	Percentage		
. Total Project Cost	or Fiscal Year 202	22-2023 (including	matching funds avai	lable for this proje	ct)	
Total State Funds	Requested			150,000		
Fixed Capital Outlay			150,000			
Operations				0		
Type of Funding			Amou	ınt		
. Amount of the Non	recurring Reques	t for Fiscal Year 20	022-2023			
State Agency conta	acted? Yes					
. State Agency to re	ceive requested fu	unds Departm	ent of Financial Servic	es		
well as to accommo renovations, including	date additional staf	fing needed to mair of a bunk room pro	ey and respond to evolutain level of service reviding for individual dontion of firefighting pro-	quirements. Funds rm style sleeping qu	will be used for	
This project provide	es for the renovation	n of the interior of th	ne City of Greenacres F	Fire Rescue headqu	uarters. The building	
. Date of Request . Project/Program D						
•	10/25/2021					
. Senate Sponsor	Lori Berman					
. Project Title		e Station Headquart	ers Renovation			



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

\$98,000 in CARES Funds used for PPP for Fire Rescue and COVID related preventive measures in City facilities. \$20.5 million in American Rescue Plan with the budgeted use is for expanded Youth Programs and Fire Rescue related services.

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	Construction of eight (8) individual bunkrooms.	150,000			
Total State Funds Requested (must equal total from question #6) 150,000					

12. Program Performance

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

The construction of individualized sleeping quarters to provide privacy for the many different genders and those that identify as other genders. The separate rooms also provide for reduced stress by only alerting those dorm rooms that need to respond to the alarm and not the entire shift of personnel, and provide for a quieter place to rest and recharge.

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

Individual dorm rooms with doors for private, gender-neutral sleeping quarters and provide a sense of respite, and a place to recharge. Climate controlled rooms will provide greater comfort. Additional outlets will provide power for breathing equipment and sleep aids as well a noise machines for reduced stress.

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

The fire rescue personnel will be more rested, and the spaces will accommodate all firefighters, regardless of gender. The design will be such that the firefighters can more quickly exit the dorm rooms by cutting down sprawl to decrease their response time to the emergency. Therefore the firefighters and emergency medical personnel will arrive to the victim or fire much sooner. The construction materials will be that of non-carcinogenic, Green building materials providing for a safer living environment.

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

The 54 firefighters who share the living quarters will directly be served by this project and the citizens who will benefit from the more efficient design yielding faster response times and the reduced effects of sleep deprivation on the responders.

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



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Reduced stress, increased comfort, privacy. Accommodate different genders and a more diverse staff, and provide a safer environment. This project will provide a marked reduction in the effects of sleep deprivation. The outcome will be measured by reviewing the response times to emergencies and noting the decrease after the completion of this project. Further outcomes will be measured in the reduction of injuries, sickness, and workers compensation claims related to open dorms and sleep deprivation.

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?

If the City of Greenacres fails to meet deliverables, performance measures and/or completion of the project, a penalty requiring reimbursement of appropriated funds received should be imposed.

relationship between the owners of the facility and the entity.

13. The owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the

N	A
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14.	14. Requestor Contact Information							
	a. First Name	Andrea		Last Name	McCue			
	b. Organization	City of Greenacres						
	c. E-mail Address	ammcue@greenacresfl.gov						
	d. Phone Number	(561)642-	(561)642-2017 Ext.					
15.	Recipient Contact	Informatio	on					
	a. Organization	City of Greenacres Fire Rescue						
	b. Municipality and	Municipality and County Palm Beach						
	c. Organization Type							
	□For Profit Entity	ofit Entity						
	□Non Profit 501(c	(c)(3)						
	□Non Profit 501(c	c)(4)						
	☑Local Entity							
	□University or Co	College						
	□Other (please sp	□Other (please specify)						
	d. First Name	Brian		Last Name	Fuller			
	e. E-mail Address	bfuller@greenacresfl.gov						
	f. Phone Number	(561)642-2101						
16.	16. Lobbyist Contact Information							
	a. Name	Joseph R. Salzverg						
	b. Firm Name	GrayRobinson PA						
	c. E-mail Address	joseph.salzverg@gray-robinson.com						
	d. Phone Number	(850)577-9090						