



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2022-2023

LFIR # 1779

1. **Project Title**
2. **Senate Sponsor**
3. **Date of Request**

4. Project/Program Description

Funds used to seek contractual engineering/design & construction services to build a 7,156 sq. ft. fire rescue, EMS & a Sheriff Substation on Wakulla County property at Bloxom Cutoff Rd/Lonnie Raker Ln to improve response times & to provide reliable emergency services to serve the citizens, residents and business community in this area of the County. Project protects life/health/safety & property; Improve/maintain ISO rating. The facility is planned to include 2 bays for fire trucks & 1 EMS bay; kitchen & bath facilities; living quarters for emergency personnel; sheriff satellite office & a generator building. Current station is not usable. The County purchased 2.45 acres of land at a higher elevation for \$50,000 to build the new facility, which addresses the flooding problems experienced & anticipates jobs being created. Addresses the Public Safety Master Plan, Local Mitigation Strategy Plan and Adopted Infrastructure Plan. The County is designated as a Rural Area of Opportunity.

5. **State Agency to receive requested funds**
- State Agency contacted?** No

6. Amount of the Nonrecurring Request for Fiscal Year 2022-2023

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	2,020,021
Total State Funds Requested	2,020,021

7. Total Project Cost for Fiscal Year 2022-2023 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	2,020,021	100%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
Total Project Costs for Fiscal Year 2022-2023	2,020,021	100%

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

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

9. **Is future funding likely to be requested?** No
- a. **If yes, indicate nonrecurring amount per year.**
- b. **Describe the source of funding that can be used in lieu of state funding.**
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10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

Yes

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

Slated to receive a total of \$6,553,405. First distribution of ARPA funds addressing wastewater effluent management storage, community support programs, Covid 19 programs, vaccine pods.

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	Contractual engineering/design and construction of new public safety facility.	2,020,021
Total State Funds Requested (must equal total from question #6)		2,020,021

12. Program Performance

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

Goal is to seek contractual engineering/design and construction services to build a 7,156 sq. ft. public safety facility that will house fire rescue, EMS and a sheriff substation on County owned property at Bloxham/Lonnie Raker that will provide and improve emergency services to protect lives and property. Improve/maintain ISO rating.

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

Through Wakulla County's procurement process, activities include securing engineering/design services for final design, set of construction plans, bidding package, and permitting and selection of a contractor to build the facility as designed.

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

Direct services to citizens is to protect life, health and property; provide improved safety with efficient, reliable emergency services from a nearby local public safety facility that includes fire rescue, EMS and law enforcement. This new facility will allow for improved response times and provide better safety services that protects lives and property; reduced insurance premiums due to local facility in this Rural Area of Opportunity.

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

The new public safety facility will serve Wakulla County, residents, visitors and the business community. Greater than 37,000.

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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The project will provide for substantially improved fire rescue, EMS and law enforcement services with improved response times and have the ability to offer additional emergency services in the event of a disaster. Benefit is protection of life, health, safety of citizenry, visitors, business community and property in this Rural Area of Opportunity. Maintain/improve ISO rating, reduced insurance costs with nearby/local emergency services. Addresses the Public Safety Master Plan, Local Mitigation Strategy Plan and Adopted Infrastructure Plan.

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?

Non-payment of invoices until milestones achieved; implementation of corrective action plan.

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 County is the owner and the entity.



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14. Requestor Contact Information

a. First Name Last Name

b. Organization

c. E-mail Address

d. Phone Number Ext.

15. 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

16. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number