

The Florida Senate Local Funding Initiative Request Fiscal Year 2023-2024

LFIR # 1656

1. Project Title	Old Seville Schoo	I Improvement P	roject		
•					
2. Senate Sponsor	Travis Hutson				
3. Date of Request	02/14/2023				
4. Project/Program D	escription				
and floor repairs. In	addition, it expands t	the parking lot ar	ouse, associated build id outdoor recreational usia and southeast pai	opportunities that w	This will include roof, a/c vill provide a safe and ty.
5. State Agency to re	ceive requested fun	ds Departr	nent of Economic Opp	ortunity	
State Agency conta	acted? No				
6. Amount of the Non	recurring Request f	or Fiscal Year 2	023-2024		
Type of Funding			Amo	unt	
Operations				0	
Fixed Capital Outlay	<u> </u>			450,000	
Total State Funds	Requested			450,000	
7. Total Project Cost f	or Fiscal Year 2023	-2024 (including	matching funds ava	ilable for this proje	ect)
Type of Funding			Amount	Percentage	
	equested (from ques	tion #6)	450,000	50%	
Matching Funds				201	
Federal	anacint of this vacuus	- c+)	0	0%	
,	amount of this reque	est)	450,000	0% 50%	
Local Other			450,000	50% 0%	
	s for Fiscal Year 202	23-2024	900,000	100%	
8. Has this project pro		•	No	10070	
. , .				Vatand	
Fiscal Year (уууу-уу)	Recurring	Nonrecurring	Specific Appropriation #	Vetoed	
(33333)	Recurring	Nomecurring			
9. Is future funding lil	kely to be requested	12	No		
J	onrecurring amoun				
-	_		lieu of state funding.		
Volusia County EC		can be used in	ned of state funding.		
Volusia County LO	rio giani				
10. Has the entity req	uesting this project	received any fe	ederal assistance rela	ted to the COVID-1	19 pandemic?
No					
If ves. indicate the	amount of funds re	eceived and wha	at the funds were use	d for.	



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Complete questions 11 and 12 for Fixed Capital Outlay Projects

- 11. Status of Construction
 - a. What is the current phase of the project?

Planning			
o. Is the project	t "shovel read	y" (i.e permitted)?	Yes
. What is the e	stimated start	date of construction?	July 1, 2023

d. What is the estimated completion date of construction?

June 1, 2024

12. List 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.

Property is owned and operated by the Seville Village Improvement Association.

13. 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/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering	The roof and ac units have exceeded their useful life. Replacement is needed. The facility parking area and playground needs expanding. Construction to expand the parking lot, rehab the gym restrooms and provide additional outside recreation opportunities are proposed. Local government permitting and engineer design for the parking area and storm water system.	450,000
Total State Funds Requested (m	ust equal total from question #6)	450,000

14. Program Performance

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

Restore major infrastructure (20-year horizon) -- Roofs; AC; Well Expand Parking lot to host bigger events, provide handicap parking and improve safety Greater outdoor recreational opportunities - including Pavilion, playground; pickle ball Lower energy demand reduce operating costs



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

The funds will be for capital improvements. The property provides a meeting space for community groups, celebrations educational activities, meeting space, cultural indoor and outdoor wellness and recreational opportunities. The facility offers a library, cultural and historical museum, day care and gym. The SVIA maintains the facilities usage.

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

The appropriation will provide a safe and inclusive location where the continuation and expansion of the community based services can be provided. The property will serve as a community center, providing social services meeting and event space, and programming space for club volunteers. It will support the arts, cultural, civic engagement, education and libraries and the health and wellness.

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

The northwest Volusia and southeast Putnam county area where the facility is located serves over 3,000 residents. Of those residents, over 22% have incomes below the poverty level. In comparison, the poverty level across the state is 12.7%.

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

Preservation of a designated historical property.
Continue to be the community center for the area.
Ensure the property is clean, functioning and meets the needs of the community.
Preserves the cultural and history of the area.
Expand use of the facility for expanded community service.

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?

Funds will be repaid if deliverable or performances are not meet. Standard contract penalties are sufficient.

. Requester Contact	Informat	ion	_			
a. First Name	Jana		Last Name	Register		
b. Organization	Seville Vi	llage Improveme	ent Association	on		
c. E-mail Address	jbregister	@yahoo.com				
d. Phone Number	(386)490	-6000	Ext.			
Recipient Contact Information						
a. Organization	Seville Vi	llage Improveme	ent Association	on		
b. Municipality and County Volusia						
c. Organization Ty	ре					
□For Profit Entity						
☑Non Profit 501(c	c)(3)					
□Non Profit 501(c	c)(4)					
□Local Entity						
□University or Co	llege					



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□Other (please specify)	□Other	(please	specify)
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d. First Name	Brad	Last Name	Purcell	
e. E-mail Address	bpurcell@ymail.com			
f. Phone Number	(386)983-7327			
17. Lobbyist Contact I	nformation			
a. Name	None			
b. Firm Name	None			
c. E-mail Address				
d. Phone Number				