



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 1843

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2023-2024

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	750,000
<b>Total State Funds Requested</b>	<b>750,000</b>

7. Total Project Cost for Fiscal Year 2023-2024 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	750,000	100%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2023-2024</b>	<b>750,000</b>	<b>100%</b>

8. Has this project previously received state funding?

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

9. Is future funding likely to be requested?

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

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

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

The County received CARES, ARPA, and COVID-19 related grant funding for a broad range of public health and economic recovery projects related to the pandemic.



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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    
  Design    
  Construction

b. Is the project "shovel ready" (i.e permitted)?

No

c. What is the estimated start date of construction?

10/1/2023

d. What is the estimated completion date of construction?

9/30/2024

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.

Clay County Board of County Commissioners will own and maintain the warehouse in partnership with Camp Blanding.

### 13. Details on how the requested state funds will be expended

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Warehouse design and construction	750,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>750,000</b>

### 14. Program Performance

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

Construct an approximately 100,000 square foot climate controlled storage warehouse to accommodate local commodities and state deployable Incident Management Team (IMT) equipment to include, but not be limited to vehicles, trailers, ATVs, side-by-sides, MREs, water, and PPE. The facility will be utilized by Clay County Emergency Management, Public Safety, and Clay County Sheriff's Office, with potential use by Camp Blanding.

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

Design and construction of warehouse facility

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

Improved public safety preparedness and response



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

This project will benefit the general population and serve citizens county-wide (218,245).

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

Resources distributed in a timely fashion to residents during disaster events. Surveys and the County's Emergency Management Division will measure usage. The warehouse will be maintained by the County and evaluated regularly by the Emergency Management Director.

**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?**

The local government is responsible for conforming with all federal and state regulations governing the program. All local governments must comply with federal regulations and certify that, if funded, they will comply with all applicable laws and requirements.

**15. Requester Contact Information**

**a. First Name**  **Last Name**   
**b. Organization**   
**c. E-mail Address**   
**d. Phone Number**  **Ext.**

**16. 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**

**17. Lobbyist Contact Information**

**a. Name**   
**b. Firm Name**



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c. E-mail Address

d. Phone Number