



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2023-2024

LFIR # 1880

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The recently completed Parks and Recreation Master Plan identified the need to provide recreational space and programming to residents on the west side of the City to provide equitable access to indoor and outdoor recreation amenities and programs for residents of western Ormond Beach. This project will provide the necessary steps for a shovel ready project for a new West Ormond Recreational Center.

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	522,639
Fixed Capital Outlay	0
Total State Funds Requested	522,639

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)	522,639	50%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	522,639	50%
Other	0	0%
Total Project Costs for Fiscal Year 2023-2024	1,045,278	100%

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.



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\$439,212.07 was received from 5 different federal sources (CESF, SVOG, ACRGP, ARPA, and General Public Assistance) and used for: equipment to safely respond Performing Arts Center; Covid-19 Closure; Airport Environmental Upgrades; Airport Operational Expenses; and Fire personnel costs and PPE.

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)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

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.

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/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	Planning and design	522,639
Total State Funds Requested (must equal total from question #6)		522,639

14. Program Performance

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

The recently completed Parks and Recreation Master Plan identified the need to provide recreational space and programming to residents on the west side of the City to provide equitable access to indoor and outdoor recreation amenities and programs for residents of western Ormond Beach. This project will provide the necessary steps for a shovel ready project for a new West Ormond Recreational Center. Recreation Center and park, as discussed above.

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



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The recreational facility will provide programming and activity for residents to remain healthy and in shape.

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

none

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

regional residents - seniors, children, others.

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

increased recreational activities

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?

\$500 per day liquidated damages

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**



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b. Firm Name	<input type="text" value="Metz Husband & Daughton PA"/>
c. E-mail Address	<input type="text" value="doug.bell@mhdfirm.com"/>
d. Phone Number	<input type="text" value="(850)205-9000"/>