

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

LFIR # 3190

1. Project Title	Miami Fire- Res	cue Fire Station 8	Renovation		
2. Senate Sponsor	Alexis Calatayu	t			
3. Date of Request	03/21/2023				
4. Project/Program De	scription				
making the building n	nore resistant to si quare feet and was	torm damage in th s built in 1971 pric	terior building envelope ne event a hurricane sto or to the strict revisions	renath storm impacts	s the City of Miami. Fire
5. State Agency to rec	eive requested fu	unds Depart	ment of Financial Serv	ices	
State Agency contact					
6. Amount of the Nonre	ecurring Request	t for Fiscal Year 2			1
Type of Funding			Amo	ount	
Operations Fixed Capital Outlay				<u> </u>	
Total State Funds R	eauested			570,161 570,161	
Total Otale Lands IV	cquesteu			370,101	
7. Total Project Cost fo	or Fiscal Year 202	23-2024 (includin	g matching funds ava	ailable for this proj	ect)
Type of Funding			Amount	Percentage	
Total State Funds Re	quested (from que	estion #6)	570,161	40%	
Matching Funds		T			
Federal			0	0%	
State (excluding the a	amount of this req	uest)	0	0%	
Local			870,323	60%	
Other			0	0%	
<b>Total Project Costs</b>	for Fiscal Year 2	023-2024	1,440,484	100%	
8. Has this project pre	viously received	state funding?	No		
Fiscal Year	Am	ount	Specific	Vetoed	
(уууу-уу)	Recurring	Nonrecurring	Appropriation #		
9. Is future funding like	elv to be request	ed?	No		
J	•		110		
a. If yes, indicate no	nrecurring amou	ınt per year.			
b. Describe the sou	rce of funding th	at can be used ir	lieu of state funding	-	
40 11 (1 (2)				-4-14-4-00275	40
10. Has the entity requ	esting this proje	ct received any f	ederal assistance rel	ated to the COVID-	19 pandemic?
Yes					

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



11. Status of Construction

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- \$137M ARPA funds - Funds are bing used to fund variety of projects for IT, Housing, Business assistance, Community Projects, etc.

- \$10M was used to help residents in form of grocery gift cards and local business assistance

## Complete questions 11 and 12 for Fixed Capital Outlay Projects

a. what is the current phase of the project?					
	OPlanning	ODesign	⊙ Construction		
b. Is the project "shovel ready" (i.e permitted)?			Yes	_	
	c What is the	etimated start	date of construction?	8/1/2023	_

d. What is the estimated completion date of construction?

12/31/2023

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.

The City of Miami owns the facility and will receive the funding.

## 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 existing fire station will be renovated and expanded to include living space with sleeping quarters, kitchen and restroom facilities, office space and allow this site to be more resilient to flooding and natural disasters	570,161		
Total State Funds Requested (must equal total from question #6)				

### 14. Program Performance

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

The purpose of the proposed project is to harden the exterior building envelope of Fire Station 8 making the building more resistant to storm damage in the event a Hurricane Strength storm impacts the City of Miami. Fire Station 8 is 11,700 square feet and was built in 1971 prior to the strict revisions of the building code that occurred after Hurricane Andrew devastated South Florida in 1992.



Revocation of funding

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

The anticipated outcome of this project is a Fire Station that is fully hardened and more resistant to the types of damage that result from Hurricane Force winds. All upgrades will be required to meet the standard for an "Essential Facility" and Risk Category 4 defined by the Florida Building Code.

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

Fire Station 2 is critical to the community it serves and the neighborhoods nearby. Station 8 services the Coconut Grove neighborhood. Many of the citizens served this fire station are elderly and rely heavily on the station for their medical needs. Fire Station 8 houses 4 apparatus. Those apparatus include 2 EMS firefighting rescue units, 1 engine, and 1 Quint

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

The entire service area of Fire Station 8, greater than 10,000 people.

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

Protect the general public from harm- Once completed the facility will resistant to water damaged caused by wind driven rain, structural damage caused by wind uplift and flying debris, power surge damage to the electrical and communications systems, and be able to maintain livable conditions inside the structure before, during, and after a storm. The method for measuring this outcome is that the building will meet current building code when project is complete.

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?

	- 9				
5. Requester Contact	t Information				
a. First Name	Robert	Last Name Hardy			
b. Organization	City of Miami Department	of Fire Rescue			
c. E-mail Address	firechiefoflogistics@miamigov.com				
d. Phone Number	(305)416-5408	Ext.			
6. Recipient Contact Information					
a. Organization	City of Miami				
b. Municipality and	d County Miami-Dade				
c. Organization Ty	c. Organization Type				
□For Profit Entity					
□Non Profit 501(c)(3)					
□Non Profit 501(d	c)(4)				
□Local Entity	,,,				
□University or Co	llogo				
·	G				
☑Other (please sp	pecify) Municipal Governme	ent			



17.

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d. First Name	Robert	Last Name Hardy	
e. E-mail Address	firechiefoflogistics@miam	igov.com	
f. Phone Number	(305)416-5408		
Lobbyist Contact I	nformation		
a. Name	Donny Wolfe		
b. Firm Name			
c. E-mail Address			
d. Phone Number			