



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2025-2026

LFIR # 1084

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

**4. Project/Program Description**

St. Lucie County was devastated by six confirmed tornadoes spawned by Hurricane Milton. This led to widespread destruction across the County and resulted in six tornado related fatalities and one storm related fatality. Due to storm impacts, cellular service in the County was compromised. Having multiple Cellular on Wheels will provide cellular service during emergencies or events when existing infrastructure is damaged and ensures that emergency responders and the public can stay connected.

5. State Agency to receive requested funds

State Agency contacted?  Yes

**6. Amount of the Nonrecurring Request for Fiscal Year 2025-2026**

Type of Funding	Amount
Operating	155,990
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>155,990</b>

**7. Total Project Cost for Fiscal Year 2025-2026 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	155,990	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 2025-2026</b>	<b>155,990</b>	<b>100%</b>

8. Has this project previously received state funding?  No

If yes, provide the most recent instance:

Fiscal Year (YYYY-YY)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. Is future-year 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.

**Complete questions 10 and 11 for Fixed Capital Outlay Projects**



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**10. Status of Construction**

a. What is the current phase of the project?

- Planning    
  Design    
  Construction    
  N/A

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?

e. What funding stream will be used for ongoing operations and maintenance of the project?

**11. 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.**

**12. 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</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other	Purchase two Cellular on Wheels (\$77,995.00 each) which is a vital asset during emergencies, ensuring continuous communication and connectivity when traditional infrastructure is compromised. Its ability to restore cellular service quickly and effectively makes it an indispensable tool for protecting public safety and coordinating disaster response and recovery efforts.	155,990
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering		0
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>155,990</b>

**13. Program Performance**

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

Cellular on Wheels (COWs) restore, enhance, or expand cellular network coverage and capacity in areas where traditional communication infrastructure has been compromised. This ensures uninterrupted communication for emergency response, public safety and affected communities.

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



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Cellular on Wheels (COW) provide temporary cellular network coverage where existing cell towers are damaged, overloaded, or where no service exists. During emergency response, disaster management, and large-scale events, a COW offers temporary mobile phone services where needed most by deploying a portable cell tower on a vehicle or trailer that can be quickly transported.

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

Mitigates risks to public health and safety by ensuring residents are able to contact loved ones, emergency services, or insurance providers.

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

>800

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

1. Restore communication after infrastructure damage - COWs can be rapidly transported and set up in areas where cell towers have been destroyed or damaged by hurricanes, tornadoes or other disasters. Provides immediate cellular and data service for affected communities.
2. Support emergency response teams - Ensures emergency personnel can coordinate their efforts efficiently and facilitates real-time data sharing.
3. Relieves network congestion - Adds bandwidth to prevent overloading existing cellular networks.

**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 in the contract?**

Noncompliance with granting agencies would jeopardize the county's standing and the ability to leverage funds.

**14. Is this project related to mitigation, response, or recovery from a natural disaster?**  No  Yes

**a. If Yes, what phase best describes the project?**

- Mitigation (reducing or eliminating potential loss of life or property)
- Response (addressing the immediate and short-term effects of a natural disaster)
- Recovery (assisting communities return to normal operations, including rebuilding damaged infrastructure)

**b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):**

Hurricane Milton

**15. Has the entity applied for or received federal assistance for this project?**

- Yes, Applied
- Yes, Received
- No
- No, but intends to apply

**a. If yes, provide the FEMA project worksheet ID#:**

**b. Provide the total project cost listed on the FEMA project worksheet:**



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**16. Has the entity applied for or received state assistance for this project (other than this request)?**

- Yes, Applied
- Yes, Received
- No
- No, but intends to apply

**a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):**

**17. Requester Contact Information**

**a. First Name**  **Last Name**

**b. Organization**

**c. E-mail Address**

**d. Phone Number**  **Ext.**

**18. 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**  **Ext.**

**19. Lobbyist Contact Information**

**a. Name**

**b. Firm Name**

**c. E-mail Address**



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d. Phone Number

*The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.*