

LFIR # 1429

1. Project Title	Northeast Florida Builders Association Builders Care
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2. Senate Sponsor Clay Yarborough

3. Date of Request 2/12/2025

#### 4. Project/Program Description

Builders Care will be reroofing homes for low-income, elderly, veterans, and disabled individuals who are otherwise unable to afford repairs and eventually have to leave their homes due to condemnation. We will also be building home-access ramps for low-income, elderly, veterans, and disabled individuals who are otherwise isolated and unable to leave their homes. Many of Builders Care's disabled clients haven't been outside of their homes in one to two years due to their inability to safely leave their home since they have no home-access ramp. Builders Care currently has 275 people on their reroof waitlist, and the waitlist for home-access ramps has 141 people on it, which show the massive need in our community for these services.

#### 5. State Agency to receive requested funds

Department of Commerce

State Agency contacted?

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

No

Type of Funding	Amount
Operating	0
Fixed Capital Outlay	400,000
Total State Funds Requested	400,000

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)	400,000	45%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	75,000	9%
Other	400,000	46%
Total Project Costs for Fiscal Year 2025-2026	875,000	100%

# 8. Has this project previously received state funding? Yes If yes, provide the most recent instance:

Fiscal Year	Amount		Specific	Vetoed
(уууу-уу)	Recurring	Nonrecurring	Appropriation #	
2024-25	0	200,000	Line 2347A	No

#### 9. Is future-year funding likely to be requested?

No

a. If yes, indicate nonrecurring amount per year.

ear.	

## 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**

## 10. Status of Construction

## a. What is the current phase of the project?

	🔘 Planning	🔘 Design	Construction	📀 N/A
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b. Is the project "shovel ready" (i.e permitted)?	No
c. What is the estimated start date of construction?	08/01/2025
d. What is the estimated completion date of construction?	06/01/2026

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

These roughly 40 reroof and home-access ramp projects are individually owned homes, with no personal or business relationships between the property owners and Builders Care. The property owner, who proves their inability to afford this work through two months of bank statements, will become responsible for the 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.

Each of these 40 projects will be individually owned, with 40 different owners of the homeaccess ramps and reroofs. Builders Care's list of qualified individuals is constantly being updated with new applicants, so we won't know the names of these 40 individuals until we get closer to construction. These owner names could be provided once we begin the work if the state wishes. There are no personal or business relationships between the property owners and Builders Care.

## 12. 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		
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	Builders Care utilizes a preferred, certified contractor, HW Contracting, LLC, to repair roofs. Builders Care utilizes another preferred, certified contractor, Bo Duncan Drywall to build home- access ramps. Builders Care also heavily subsidizes this work through volunteers who assist with building the home-access ramps, as well as companies that donate materials, labor, and services.	400,000
Total State Funds Requested (m	ust equal total from question #6)	400,000



### 13. Program Performance

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

Reroofing homes for low-income, elderly, veterans, and disabled individuals who are otherwise unable to afford repairs and eventually have to leave their homes due to condemnation. We will also be building home-access ramps for lowincome, elderly, veterans, and disabled individuals who are otherwise isolated and unable to leave their homes.

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

Builders Care will repair/replace approximately 20 roofs for individuals in need. Builders Care will also build approximately 20 home-access ramps for those in need with these funds.

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

Citizens who have demonstrated their financial need through two months of bank statements will receive roof repairs or replacements free of charge since they'll otherwise be unable to afford the work. Home-access ramps will be provided to those who can prove their financial need and who have documentation of a permanent disability.

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

Target populations are: Elderly persons, economically disadvantaged persons, developmentally disabled, and physically disabled. 25-50 individuals will be served.

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

#### be measured?

The roof will be fully repaired (weather-tight). This will benefit residents by allowing them to stay in their homes, stopping leaks which cause mold and mildew, as well as preventing ceiling collapses. An ADA-compliant home-access ramp will be fully constructed allowing safe entry and exit of their home. This will improve physical and mental health by allowing once-isolated individuals to have independence. Also, the lifting of these massive cost burdens from these individuals will allow them to both stay in their homes longer and to be able to focus all money on their self-sufficiency. It will also allow them the option to begin working again if they want (especially for home-access ramps) and will thus be less reliant on the community and government. The methodology to measure the outcome is if roofs were repaired/replaced satisfactorily resulting in no leaks, and if home-access ramps were built satisfactorily and allow residents to easily enter and leave their homes.

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?

If deliverables aren't met, return funds to state.

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

#### 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 infastructure)

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

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

□ Yes, Applied

□ Yes, Received



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## 🗆 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:

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	Krissy	Last Name	Barkas
b. Organization	Northeast Florida Builders	s Association	Builders Care
c. E-mail Address	kbarkas@nefba.com		
d. Phone Number	(904)234-5874	Ext.	

#### **18. Recipient Contact Information**

a. Organization

Northeast Florida Builders Association Builders Care

b. Municipality and County Duval

### c. Organization Type

□For Profit Entity

☑Non Profit 501(c)(3)

□Non Profit 501(c)(4)

Local Entity

□University or College

□Other (please specify)



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d. First Name	Krissy	Last Name	Barkas	
e. E-mail Address	kbarkas@nefba.com			
f. Phone Number	(904)234-5874	Ext.		
19. Lobbyist Contact I	nformation			
a. Name	Austin Nicklas			
b. Firm Name				
c. E-mail Address	anicklas@nefba.com			
d. Phone Number	(904)725-5293			

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