



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 1761

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

4. Project/Program Description

When Hurricane Milton hit the state, our area's local preferred non-school hurricane shelter at the MLK Multi-Purpose Center off SR 24 received such a high volume of evacuees from south Florida that emergency management staff had to shut down and divert evacuees to other school shelters approximately 15-23 miles away. The level of demand encountered with this latest incident was 30% over the capacity threshold, in fact. Given what we have already experienced with capacity issues, we are seeking to expand the shelter's space in order to more adequately serve both residential and state evacuees.

5. **State Agency to receive requested funds**
- State Agency contacted?**

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

Type of Funding	Amount
Operating	0
Fixed Capital Outlay	350,000
Total State Funds Requested	350,000

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)	350,000	3%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	13,000,000	97%
Other	0	0%
Total Project Costs for Fiscal Year 2025-2026	13,350,000	100%

8. **Has this project previously received state funding?**
- 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?**
- a. **If yes, indicate nonrecurring amount per year.**
- b. **Describe the source of funding that can be used in lieu of state funding.**
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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

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

No

c. What is the estimated start date of construction?

04/1/2026

d. What is the estimated completion date of construction?

01/01/2028

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

Local revenues and partnerships

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.

City of Gainesville

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/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	Design costs to include structural, landscaping, paving/grading, and drainage plans; additional stormwater management and building permitting fees	350,000
Total State Funds Requested (must equal total from question #6)		350,000

13. Program Performance

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

The goal is to complete the design phase for a much-needed expansion of a high-demand hurricane shelter at the MLK Multi-Purpose Center off of State Road 24. The center is designated as a preferred spot by local emergency management services given it is not a school property and thus provides an alternative instead of shutting school facilities down in order to supply adequate shelter for statewide hurricane evacuees.

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



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Design costs which include structural, landscaping, paving/grading, and drainage plans, along with additional stormwater management and building permitting fees, all of which are necessary towards the next phase in construction.

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

Hurricane shelter services will be expanded at the adjacent MLK Center for all state residents impacted by severe storm events in their respective areas.

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

Different target populations include students of all ages (including at-risk), university/college students, developmentally/physically disabled, economically disadvantaged, elderly, jobless, and those in poor physical/mental health. In addition, approximately 32,000 local area residents will be directly served with space for public usage and for hurricane emergency shelter.

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

Increased number of Florida residents served in hurricane emergency shelter situations

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?

Failure to utilize the funds in the specified manner shall result in funds being returned to the State.

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:

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

- Yes, Applied



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- 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

d. Phone Number



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