



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2025-2026

LFIR # 1864

**1. Project Title**

**2. Senate Sponsor**

**3. Date of Request**

**4. Project/Program Description**

Create a flexible classroom, meeting, and student space to be used by residents attending classes, workshops, and programs. The building plan includes three 900 square foot classrooms (with room dividers), a laboratory, staff areas, student lounge/study area, restrooms, and an 800 square foot community meeting room. The college and technical school will offer college courses, GED classes, workforce development, hospitality/tourism, and medical technician courses.

**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	750,000
<b>Total State Funds Requested</b>	<b>750,000</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)	750,000	27%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	2,000,000	73%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2025-2026</b>	<b>2,750,000</b>	<b>100%</b>

**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.

**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)?** No

**c. What is the estimated start date of construction?** 10/01/2025

**d. What is the estimated completion date of construction?** 09/01/2026

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

Lake County funding for utilities and maintenance, Lake Sumter State College, and Lake Technical College for personal services and operations.

**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.**

Lake County Board of County Commissioners

**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		0
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Phase I Design and Construction	750,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>750,000</b>

**13. Program Performance**

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

Create a flexible classroom, meeting, and student space to be used by residents attending classes, workshops, and programs. The building plan includes three 900 square foot classrooms (with room dividers), a laboratory, staff areas, student lounge/study area, restrooms, and an 800 square foot community meeting room.

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

Lake County, in partnership with Lake-Sumter State College and Lake Tech, will create a flexible classroom, meeting, and student space to be used by residents attending classes, workshops, and programs.



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

The college and technical school will offer college courses, GED classes, workforce development, hospitality/tourism, and medical technician courses.

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

The target population are residents and students

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

The expected benefit or outcome of this project is to enrich cultural experiences, improve quality of education, and help enhance economic self-sufficiency of individuals.

**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?**

A pro rata return of state dollars would be appropriate if the project does not perform as expected.

**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 infrastructure)

**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
- 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



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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**

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