



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 1889

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

4. **Project/Program Description**

New combined facility for Broward County's Medical Examiner's Office and Broward Sheriff's Office Crime Laboratory Facility. The new combined facility is anticipated to be organized as a multi-story building or series of buildings, approximately 200,000 square feet and an associated parking garage. The facility/facilities shall be designed under Leadership in Environmental and Engineering Design (LEED) guidelines, be responsive to resiliency matters and shall be built as a critical facility in accordance with the Florida Building Code.

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	2,000,000
Total State Funds Requested	2,000,000

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)	2,000,000	100%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
Total Project Costs for Fiscal Year 2025-2026	2,000,000	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		
2023-24	0	435,885	140151	No

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.**

Local capital funds



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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?

01/04/2027

d. What is the estimated completion date of construction?

07/02/2029

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

Capital funds

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.

Broward County Board of County Commissioners

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	Planning, design and construction services.	2,000,000
Total State Funds Requested (must equal total from question #6)		2,000,000

13. Program Performance

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

The design and construction of a new facility for the Broward County Office of the Medical Examiner and Trauma Services and a new crime laboratory for the Broward Sheriff's Office (BSO), as the current facilities no longer provide adequate space to manage current and future needs.

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



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The Broward County Medical Examiner's Office uniquely combines the services of the medical examiner, forensic toxicology and trauma services. The pathology and toxicology divisions work closely with law enforcement to determine causes of death, and staff provides expert testimony at criminal and civil trials. The BSO Crime Lab provides all public law enforcement agencies in Broward County with scientific forensic analysis of physical evidence.

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

The current scope of the BSO Crime Laboratory's accreditation under the ANSI National Accreditation Board (ANAB) includes the following forensic disciplines: Controlled Substances, DNA, Firearms/Tool Marks/Impression Evidence, and Latent Print Examination. The BSO Crime Laboratory's forensic scientists, supported by a dedicated and hardworking administrative and evidence intake staff, are skilled and knowledgeable subject matter experts who use their technical expertise, in the various aforementioned forensic science disciplines, to serve the needs of the criminal justice community of Broward County.

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

BSO's Crime Laboratory is the only full-service, internationally accredited laboratory in Broward County, receiving over 20,000 cases per year. BSO's Crime Laboratory and Crime Scene Unit employs just over 70 staff members, serving approximately 1.9 million residents of Broward County.

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 of this project is the building of a state-of-the-art facility that can adequately accommodate current staff and allow for growth in the future. Staffing will be maintained at optimal levels and the laboratory will have sufficient space to incorporate new technologies.

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?

Potential penalties would come from the accrediting body (ANAB), and through BSO's progressive discipline program.

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:



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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



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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.