



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2025-2026

LFIR # 1939

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

This project funds the purchase of a high-water rescue vehicle to enhance border security and disaster response. The vehicle will support immigration interdiction by enabling patrols in flood-prone areas, preventing illegal entries in hazardous terrain along Coral Gables' coastline. It will also provide life-saving rescues during floods, ensuring rapid response in disaster zones. This investment strengthens public safety, emergency readiness, and border protection.

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	250,000
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>250,000</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)	250,000	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>250,000</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)?**

**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	The purchase of a high water rescue vehicle for the Coral Gables Police Department.	250,000
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		0
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>250,000</b>

**13. Program Performance**

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

The purpose of the project is to protect the city, state, and country from the dangers of unauthorized migrant entries along Coral Gables' coastline and to improve first responders' capabilities during flooding events.

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

The activities provided to meet the purpose of the fund will be the purchase and deployment of a high water rescue vehicle by the Coral Gables Police Department.

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



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The services provided to the citizens will be protection against the dangers of unauthorized entries into the country through monitoring, detection, and intervention of unauthorized migrant entries along the Gables' coastline; also improved response times and capabilities in flooded regions following flooding events.

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

The target population includes the city's residents, as well as the county's, state's, and the nation's as everyone is affected by the consequences of illegal immigration; regarding the effects of flooding events, the project will serve the city, county, and state's residents depending on where support is needed.

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

The benefits are listed in subsection c. After acquiring the high water rescue vehicle, the police department can provide data on increased patrolling capabilities, and the number of detections and interceptions of unauthorized landing attempts. Further, regarding emergency responses following flooding events, locations can be identified that were previously unreachable and response times can be measured.

**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?**

The contracting agency may withhold project funds for non-performance by the city.

**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



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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.*