



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 2274

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

4. Project/Program Description

The City of Perry (City) seeks funding for the planning and design of a new fire station. The current Fire Station was constructed in 1910 and has not kept pace with growing demands of the residents and firefighters. The living quarters of the station is only 1,175 square feet. We are trying to improve our ISO score to help the residents with insurance rates but our current setup doesn't allow us to store and maintain the equipment we need to effectively fight fires. The current station is right next to the train tracks, so there are times we can't access half the city.

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	300,000
Total State Funds Requested	300,000

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)	300,000	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	300,000	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.

No other funding source is available to the City.

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
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 and Design of new fire station	300,000
Total State Funds Requested (must equal total from question #6)		300,000

13. Program Performance

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

Planning and design of a new fire station. The current fire station was constructed in 1910 and has not increased in size since we've gone from two to four firefighters on shift. The living quarters of the station is only 1,175 square feet. We are trying to improve our ISO score to help the residents with insurance rates but our current setup doesn't allow us to store and maintain the equipment we need to effectively fight fires. The current station is right next to the train tracks, so there are times we can't access half the city.

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

The facility will provide adequate fire protection and emergency response services to the citizens of Perry, FL and the surrounding area. The facility will also serve as a disaster recovery staging area.



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

Located within Taylor County, which is a fiscally constrained county, this project will improve public safety, response time and our ISO score to help the residents with insurance rates. The new facility will not only house Fire Rescue, but also EMS. The facility will serve as a public safety facility and disaster recovery staging area. As the facility will be constructed to hurricane rated standards, emergency services will not need to relocate during coastal weather events as they currently do.

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

General Public.

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

Improved ISO score. Also, All emergency response calls are monitored and recorded. It is anticipated with adequate facilities, emergency response times will be substantially reduced. As the facility will be constructed to hurricane rated standards, the facility will be ready to serve and respond at all times. Having adequate storage and space will extend the life of vehicles and equipment.

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?

Standard contract penalties sufficient.

14. Is this project related to mitigation, response, or recovery from a natural disaster?

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



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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.