

The Florida Senate Local Funding Initiative Request Fiscal Year 2025-2026

LFIR # 2287

1. Project Title	Plantation - First	Responder Safet	y Barrier		
2. Senate Sponsor	Rosalind Osgood	l			
·					
3. Date of Request	3/3/2025				
4. Project/Program Des	scription				
(Turnpike) runs through the Turnpike. Securin	gh the City of Plan g the safety of our	tation and as suc first responders i	der safety barrier appar h, City Fire/Rescue per s a priority of the City. I gh traffic (and high spe	sonnel frequently re Purchase and deplo	espond to crashes on syment of this apparatus
5. State Agency to rece	eive requested fu	nds Departi	ment of Financial Servi	ces	
State Agency contact		for Fiscal Year 2	2025-2026		
Type of Funding			Amo	unt	
Operating				120,000	
Fixed Capital Outlay				0	
Total State Funds R	equested			120,000	
7. Total Project Cost fo	r Fiscal Year 202	5-2026 (includin			ect)
Type of Funding		ation #C)	Amount	Percentage	
Total State Funds Re Matching Funds	questea (irom que	Stion #6)	120,000	50%	
Federal			0	0%	
State (excluding the a	amount of this requ	iest)	0	0%	
Local	arrount of this requ	1001)	120,000	50%	
Other			0	0%	
Total Project Costs	for Fiscal Year 20	25-2026	240,000	100%	
8. Has this project prev If yes, provide the m	viously received	state funding?	No	.0070	
Fiscal Year	Amo		Specific	Vetoed	
(уууу-уу)	Recurring	Nonrecurring	Appropriation #		
9. Is future-year fundin a. If yes, indicate no			No		
b. Describe the sour	ce of funding that	nt can be used in	lieu of state funding.		



10. Status of Construction

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120,000

120,000

0

a. What is the current ph	nase of the project?			
Planning De	esign Construction	○ N/A		
	start date of construction?			
	completion date of construction will be used for ongoing ope	·	of the project?	
	facility to receive, directly or ne owners of the facility and		l outlay funding. Ind	clude the
	ested state funds will be exp			
Spending Category		Description		A 4
Administrative Costs: Executive Director/Project Ho	aad			Amount
Salary and Benefits	zau			1
				1
Other Salary and Benefits				0 0
Other Salary and Benefits Expense/Equipment/Travel/S Other				0

13. Program Performance

Planning Engineering

Services/Study

Services/Study

Other

Operational Costs
Salary and Benefits

Consultants/Contracted

Construction/Renovation/Land/

Expense/Equipment/Travel/Supplies/

Fixed Capital Construction/Major Renovation:

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

Purchase and deployment of this apparatus will provide a safe buffer for first responders working in high traffic (and high speed) roadways such as the Turnpike.

Purchase equipment (truck and scorpion)

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

Purchase and deployment of first responder safety barrier apparatus.

Total State Funds Requested (must equal total from question #6)

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



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First responders will be able to more safely respond to incidents on high traffic roadways, protection of first responder lives, protection of assets.

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

The City of Plantation has over 90,000 residents, however the project will serve many more due to the City's Fire Rescue response to calls on the Florida Turnpike.

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

Purchase and deployment of the truck and scorpion apparatus will provide protection for first responders attending to crash scenes on the Ronald Regan turnpike. Measured by: Reduction and prevention in number of injuries and related crashes

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 meet requirements for deliverables or performance measures may result in reduction of funding or forfeiture of funding.

ΤU	inding.
14. Is	this project related to mitigation, response, or recovery from a natural disaster? No
a. I	f 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 infastructure)
b. N	Name of the natural disaster (or Executive Order # for events not under a federal declaration):
 5. Ha	as the entity applied for or received federal assistance for this project?
	Yes, Applied
	Yes, Received
	No
	No, but intends to apply
a. I	f yes, provide the FEMA project worksheet ID#:
b. F	Provide the total project cost listed on the FEMA project worksheet:
16. Ha	as the entity applied for or received state assistance for this project (other than this request)?
	Yes, Applied
	Yes, Received
П	No



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☐ No, but intends to	,					
a. If yes, specify the Commerce):	e program and state ager	ncy (ex. Loca	al Government	Emergency	Bridge Loa	n, Depar
Requester Contact		7 1				
a. First Name	Carole	Last Name	Morris			
b. Organization	City of Plantation					
c. E-mail Address	cmorris@plantation.org					
d. Phone Number	(954)797-2210	Ext.				
Recipient Contact	Information					
a. Organization	City of Plantation					
a. Organization b. Municipality and						
	-					
c. Organization Ty	pe					
□For Profit Entity						
□Non Profit 501(c	:)(3)					
□Non Profit 501(c	:)(4)					
☑Local Entity						
□University or Co	llege					
□Other (please sp	pecify)					
d. First Name	Carole	Last Name	Morris			
e. E-mail Address	cmorris@plantation.org					
f. Phone Number	(954)797-2210	Ext.				
Lobbyist Contact I	nformation					
a. Name	Candice Ericks					
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.