

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

LFIR # 2288

1. Project Title	Carrabelle Firetr	uck Procurement			
2. Senate Sponsor	Corey Simon				
3. Date of Request	3/4/2025				
4. Project/Program D	escription				
The City of Carrabothe City are over 20 ensure reliable and	years old and parts	s are no longer av	sources, including thei ailable due to their age thin the community	r fire department. Al The purchase of a	I fire trucks owned by new fire truck would
5. State Agency to re	ceive requested fu	nds Depart	ment of Financial Serv	ices	
State Agency cont	acted? No				
6. Amount of the Non	recurring Request	for Fiscal Year 2	2025-2026		
Type of Funding			Amo	ount	
Operating				500,000	
Fixed Capital Outla	V			0	
Total State Funds				500,000	
-	for Fiscal Year 202	5-2026 (including	g matching funds ava		ect)
Type of Funding			Amount	Percentage	
	Requested (from que	estion #6)	500,000	100%	
Matching Funds					
Federal			0	0%	
, ,	e amount of this requ	uest)	0	0%	
Local			0	0%	
Other			0	0%	
Total Project Cost	s for Fiscal Year 20	025-2026	500,000	100%	
8. Has this project pr If yes, provide the	eviously received most recent instar	_	Yes		
Fiscal Year (yyyy-yy)		ount	Specific Appropriation #	Vetoed	
2024-25	Recurring	Nonrecurring		No	
2024-23	0		0	No	
9. Is future-year fund	ing likely to be req	uested?	No		
a. If yes, indicate r	nonrecurring amou	nt per year.			
b. Describe the so	urce of funding tha	at can be used in	lieu of state funding	•	
]
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Complete questions 10 and 11 for Fixed Capital Outlay Projects

10. Status of Construction



Planning

a. What is the current phase of the project?

Design

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• N/A

Construction

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b. Is the project "shovel ready" (No			
c. What is the estimated start da	te of construction?	06/01/2025		
d. What is the estimated comple	tion date of construction?	06/30/2025		
e. What funding stream will be u	sed for ongoing operations	and maintenance of	f the project?	
General Fund Revenue				
List the owners of the facility to relationship between the owner	o receive, directly or indirec rs of the facility and the enti	tly, any fixed capital ty.	outlay funding.	nclude the
City of Carrabelle.				
2. Details on how the requested st	ate 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	Purchase of fire truck.			500,000
Consultants/Contracted Services/Study				0
Fixed Capital Construction/Majo	r Renovation:			
0: /5 .: /1 1/				0
Construction/Renovation/Land/ Planning Engineering				

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

General services provided by first responders.

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

ensure reliable and efficient response to emergencies within the community

Emergency services.

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

The City of Carrabelle has limited first response resources, including their fire department. All fire trucks owned by the city are over 20 years old and parts are no longer available due to their age. The purchase of a new fire truck would



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Carrabelle and the surrounding area. Approximately 3,000.
e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will
be measured?
The purchase of a new fire truck would ensure reliable and efficient response to emergencies within the community.
f. What are the suggested penalties that the contracting agency may consider in addition to its standard penalti for failing to meet deliverables or performance measures provided for in the contract?
Penalties are not applicable since this is a purchase/procurement request for a firetruck.
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 infastructure)
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
□ No, but intends to apply
a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):



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17.	17. Requester Contact Information						
	a. First Name	Sebrina	Sebrina		Brown		
	b. Organization	Mayor, City of Carrabelle					
	c. E-mail Address	SBrown@MyCarrabelle.com					
	d. Phone Number	(850)879-0598 Ext.					
18.	8. Recipient Contact Information						
	a. Organization	City of Ca	arabelle				
	b. Municipality and	d County	County Franklin				
	c. Organization Type						
	□For Profit Entity	,					
	□Non Profit 501(c	c)(3)					
	□Non Profit 501(c	2)(4)					
	☑Local Entity						
	□University or Co	ollege					
	□Other (please sp	Other (please specify)					
	d. First Name	Sebrina		Last Name	Brown		
	e. E-mail Address	SBrown@MyCarrabelle.com					
	f. Phone Number	(850)879	-0598	Ext.			
19.	19. Lobbyist Contact Information						
	a. Name	None					
	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.