

1. Project Title

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

South Trail High Water Rescue Vehicle

LFIR # 2316

-					
2. Senate Sponsor	Jonathan Martin				
3. Date of Request	3/4/2025				
4. Project/Program D	escription				
flood prone areas e water rescues and e	st is for a high water rescunhancing the South Trail I evacuations, transport emelicle supports state and elated disaster.	Fire Protection ergency person	n and Rescue Service onnel, and deliver criti	District's (District) a cal supplies in high	bility to conduct high water conditions. The
5. State Agency to re	ceive requested funds	Departm	ent of Financial Service	ces	
State Agency conta	acted? No	<u> </u>			
6. Amount of the Non	recurring Request for F	scal Year 20	25-2026		
Type of Funding			Amo		
Operating				370,000	
Fixed Capital Outlay				0	
Total State Funds	Requested			370,000	
7. Total Project Cost	for Fiscal Year 2025-202	6 (including	matching funds avai	lable for this proje	ct)
Type of Funding			Amount	Percentage	
	Requested (from question	#6)	370,000	100%	
Matching Funds					
Federal			0	0%	
	e amount of this request)		0	0%	
Local			0	0%	
Other			0	0%	
Total Project Costs	s for Fiscal Year 2025-20)26	370,000	100%	
	eviously received state most recent instance:	funding?	No		
Fiscal Year	Amount		Specific 4	Vetoed	
(уууу-уу)	Recurring No	nrecurring	Appropriation #		
-	ing likely to be requeste		No		
•	nonrecurring amount pe				
b. Describe the so	urce of funding that can	be used in li	ieu of state funding.		



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a. What is the current phase of the project? O Planning O Design O Construction O N/A b. Is the project "shovel ready" (i.e permitted)?	
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?	
The cost of operating the vehicle will be through ad valorem revneues.	
11. List the owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include relationship between the owners of the facility and the entity.	the
The District will be the owner of the high water vehicle.	

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	The District would purchase the high water rescue vehicle.	370,000
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Majo	r Renovation:	·
Construction/Renovation/Land/ Planning Engineering		0
Total State Funds Requested (m	ust equal total from question #6)	370,000

13. Program Performance

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

The funding request is for a high water rescue vehicle to support emergency response operations in hurricane affected and flood prone areas enhancing the South Trail Fire Protection and Rescue Service District's (District) ability to conduct high water rescues and evacuations, transport emergency personnel, and deliver critical supplies in high water conditions. The high water rescue vehicle supports state and local disaster response efforts by improving mobility impacted areas during and after weather related disaster.

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



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Swift water rescues that become needed due to storm related natural disasters, transport emergency personnel, and deliver critical supplies in high water conditions. This vehicle also supports state and local disaster response efforts by improving mobility in areas with extreme flooding. During blue sky, the vehicle can be used to suppress fires, deliver supplies, and personnel in challenging areas.

	supplies, and personnel in challenging areas.
C.	. What direct services will be provided to citizens by the appropriation project?
s ir	This funding will result in lives being saved. Enhanced emergency medical and fire response in areas inaccessible by standard vehicles. Timely and safer evacuation of impacted residents/communities speeds the process and completion of nitial damage assessments thereby allowing state resources to be deployed in a more timely fashion where they are nost needed.
d	. Who is the target population served by this project? How many individuals are expected to be served?
-	The high water rescue vehicle will benefit the District's residents and visitors.
	. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will e measured?
-	The vehicle will save lives.
	What are the suggested penalties that the contracting agency may consider in addition to its standard penalties or failing to meet deliverables or performance measures provided for in the contract?
I	If the District does not purchase the high water vehicle, the District will return the funds.
14. Is	this project related to mitigation, response, or recovery from a natural disaster? No
a. I	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):
b.	Name of the natural disaster (or Executive Order # for events not under a federal declaration):
	as the entity applied for or received federal assistance for this project?
15. H	
15. H	as the entity applied for or received federal assistance for this project?
15. H	as the entity applied for or received federal assistance for this project? Yes, Applied
15. H	as the entity applied for or received federal assistance for this project? Yes, Applied Yes, Received
15. H	as the entity applied for or received federal assistance for this project? Yes, Applied Yes, Received No
15. H	as the entity applied for or received federal assistance for this project? I Yes, Applied I Yes, Received I No I No, but intends to apply

16. Has the entity applied for or received state assistance for this project (other than this request)?



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☐ Yes, Applied					
☐ Yes, Received					
□ No					
☐ No, but intends to	o apply				
a. If yes, specify the	e progran	n and state ager	ncy (ex. Loca	ıl Governmen	t Emergenc
Commerce):					
17. Requester Contact	Informat	ion			
a. First Name	Gene		Last Name	Rogers	
b. Organization	South Tra	ail Fire Protection	n and Rescue	Service Distri	ct
c. E-mail Address	GRogers	@southtrailfirefl.	gov		
d. Phone Number	(239)433	-0080	Ext.		
a. Organizationb. Municipality andc. Organization Ty□For Profit Entity	Service D	ail Fire Protection istrict Statewide			
□Non Profit 501(d	:)(3)				
□Non Profit 501(d	:)(4)				
☑Local Entity					
☐University or Co	llege				
□Other (please sp	pecify)				
d. First Name	Gene		Last Name	Rogers	
e. E-mail Address	GRogers	@southtrailfirefl.	gov		
f. Phone Number	(239)433	-0080	Ext.		
19. Lobbyist Contact I	nformatio	n			
a. Name	Laura Ja	cobs Donaldson			
b. Firm Name	Manson	Bolves Donaldso	on Tanner PA		
c. E-mail Address	Idonaldson@mansonbolves.com				



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The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.