

LFIR # 2418

1.	Project Title	Miami-Dade Fire	Rescue (MDF	R) Fire S	uppression Tanl	ker	
2.	Senate Sponsor	Ana Maria Rodrig	uez				
3.	Date of Request	2/25/2025					
4.	Project/Program De	escription					
	Miami-Dade County, temporarily located a	, Florida City, Home at MDFR Station 16,	stead, and sur located at 25	rounding 5 NW 4th	areas without a	ccess to fire hydran ead, FL. This tanker	d better serve South its. This tanker will be will be moved to MDFR on becomes operational.
5.	State Agency to rec	ceive requested fur	nds Dep	artment o	of Financial Serv	ices	
;	State Agency conta	cted? Yes					
6. /	Amount of the Nonr	ecurring Request	or Fiscal Yea	r 2025-2	026		
	Type of Funding				Amo	ount	
	Operating					650,000	
	Fixed Capital Outlay					0	
L	Total State Funds F	Requested				650,000	
7.]	Fotal Project Cost fo	or Fiscal Year 2025	-2026 (includ	ing mate	ching funds ava	nilable for this proj	iect)
	Type of Funding				Amount	Percentage	_
- 1		otal State Funds Requested (from question #6)			650,000	50%	
- 1	Matching Funds						4
- F	Federal				0	0%	1
	State (excluding the	amount of this requ	est)		0	0%	1
- H	Local				650,000	50%	1
ı	Other				0	0%	1
	Total Project Costs	for Fiscal Year 20	25-2026		1,300,000	100%	
	Has this project pre If yes, provide the r	•	_	No			
	Fiscal Year	Amo			Specific	Vetoed	
ļ	(уууу-уу)	Recurring	Nonrecurri	ng Al	propriation #		
l							
9.	Is future-year fundi	future-year funding likely to be requested?					_
	a. If yes, indicate n	onrecurring amour	nt per year.				
	b. Describe the sou	irce of funding tha	t can be used	in lieu d	of state funding	•	_



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a. What is the c	urrent phase of t	he project?			
Planning	O Design	Construction	O N/A		
o. Is the project	"shovel ready"	(i.e permitted)?			
. What is the es	stimated start da	te of construction?			
d. What is the e	stimated comple	tion date of constru	ction?		
e. What funding	stream will be u	ised for ongoing ope	erations and mainte	enance of the project?	
		o receive, directly or		ed capital outlay funding. In	nclude tl
	twocii tiic owiic	is or the facility and	tilo officity.		

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	Purchase of a Fire Suppression Tanker for MDFR.	650,000
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)	650,000

13. Program Performance

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

This project proposes the purchase of a fire suppression tanker to improve response coverage and better serve South Miami-Dade County, Florida City, Homestead, and surrounding areas without access to fire hydrants. This tanker will be temporarily located at MDFR Station 16, located at 255 NW 4th Ave in Homestead, FL. This tanker will be moved to MDFR station 72, to be located at 1050 West Palm Drive, once its construction is complete and the location becomes operational.

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



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This project will provide the funds needed for MDFR to purchase a Fire Suppression Taker to be temporarily located at Station 16, until the completion of MDFR station 72. The tanker is an essential tool for responding to fires in South Miami-Dade, offering quick access to water and adaptability in a variety of environments, enhancing the area's firefighting capabilities.

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

Residents and visitors within the service territory will benefit from the purchase of a fire suppression tanker. This vehicle will be used for fire suppression efforts in critical state and Federal entities such as the Turkey Point Nuclear Plant, Florida Everglades National Park, and other resources in South Miami-Dade County, Florida City, Homestead, and surrounding areas.

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

This project will benefit all residents and visitors to the South Miami-Dade, Florida City, Homestead, and surrounding areas.

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

South Miami-Dade includes areas that are more rural, such as the Everglades and large parts of the Redlands agricultural area. These places may lack a dense network of fire hydrants or water infrastructure, so fire tankers can be crucial in providing immediate water supply for firefighting. The tanker will enhance service delivery to the neighboring communities and improve response to areas in need of immediate fire suppression assistance. MDFR utilizes Computer Aided Dispatch (CAD) data to track response times, unit availability, and unit reliability, which will be the key performance measures analyzed to determine that the intended outcomes are being met. Measure unit availability and response time before and after implementation of the tanker.

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?

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	Failure to meet deliverables will result in non-payment
14. Is	s 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. H	as the entity applied for or received federal assistance for this project?
	l Yes, Applied
	l Yes, Received
	l No
	No, but intends to apply
a.	If yes, provide the FEMA project worksheet ID#:



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b. Provide the total	project c	ost listed on the	e FEMA proj	ect worksheet	:		
Has the entity app	lied for o	r received state	assistance	for this projec	t (other than	n this reque	st\?
	illed for o	received state	assistance	ioi tilis projec	t (other than	i iiis reque	ot) :
☐ Yes, Applied							
☐ Yes, Received							
□ No							
□ No, but intends to	o apply						
a. If yes, specify the Commerce):	e progran	າ and state ager	ncy (ex. Loca	al Governmen	t Emergenc	y Bridge Lo	an, [
.							
Requester Contact a. First Name		ion	Last Name	ladallah			
b. Organization	Raied Miami-Dade Fire Rescue		Last Name Jadallah				
c. E-mail Address			dov				
d. Phone Number			Ext.				
a. Phone Number	(100)331	-5106	EXI.				
Recipient Contact	Informati	on					
a. Organization	Miami-Da	ade County					
b. Municipality and	d County	Miami-Dade					
c. Organization Ty	ре						
□For Profit Entity							
□Non Profit 501(c	:)(3)						
□Non Profit 501(d	:)(4)						
☑Local Entity	, , ,						
□University or Co	llege						
□Other (please sp	_						
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-	Me=:=		Loot Maria	Doves			
d. First Name	Maria Da	voo @ mio mids de	Last Name	Reyes			
-		yes@miamidade		Reyes			

Jess M. McCarty

a. Name



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b. Firm Name		
c. E-mail Address	jmm2@miamidade.gov	
d. Phone Number	(305)979-7110	

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