



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 2508

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The City of Ormond Beach provides extensive programs, activities, and events for individuals with special needs throughout the city and county at the city owned Nova Community Center. The purpose is to add a playing field designed for adaptive versions of sports that will provide a safe and inclusive environment for children and adults with disabilities to enjoy the benefits of recreational sporting activities and significantly expands the ability of the city to serve this population.

5. State Agency to receive requested funds

State Agency contacted? No

6. Amount of the Nonrecurring Request for Fiscal Year 2025-2026

Type of Funding	Amount
Operating	0
Fixed Capital Outlay	1,250,000
Total State Funds Requested	1,250,000

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)	1,250,000	50%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	1,250,000	50%
Other	0	0%
Total Project Costs for Fiscal Year 2025-2026	2,500,000	100%

8. Has this project previously received state funding? No

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? No

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

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)? No

c. What is the estimated start date of construction? 11/01/2025

d. What is the estimated completion date of construction? 05/01/2026

e. What funding stream will be used for ongoing operations and maintenance of the project?

The Leisure Services General Administration budget will fund ongoing operations and maintenance of the field.

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.

City of Ormond Beach

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	This project will conduct the appropriate design and construction of a new all-inclusive style field.	1,250,000
Total State Funds Requested (must equal total from question #6)		1,250,000

13. Program Performance

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

The City of Ormond Beach provides extensive programs, activities, and events for individuals with special needs throughout the city and county at the city owned Nova Community Center. The purpose is to add a playing field designed for adaptive versions of sports that will provide a safe and inclusive environment for children and adults with disabilities to enjoy the benefits of recreational sporting activities and significantly expands the ability of the city to serve this population.

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

Design and construction of a Miracle Field capable of providing a diverse array of sports programming for children and adults with disability.



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

N/A

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

The target population to be served is the special needs population in the community.

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

The expected benefit of this project is greater opportunity for physical exercise to improve muscle strength, flexibility and lung function. The field will improve mental health by fostering a sense of community and belonging, positively impacting mental health. Both the physical health and mental heal benefits will be measured through assessments on progress, participants' goals are tracked through written documentation, and progress notes are updated throughout the season.

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?

The City anticipates including provisions for liquidated damages in its contract documents for this project.

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 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



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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.