

**LFIR # 2516** 

1. Project Title	Daytona State Co	llege-wide Buildin	g Access Control		
2. Senate Sponsor	Thomas Leek				
3. Date of Request	2/12/2025				
4. Project/Program Do	escription				
Centralized controll office emergency re	ed access to all build sponse and lock dow	lings across sever	n campuses that serve	e 23,000 students. I	Provides Campus Safet d asset protection.
5. State Agency to rec	•		ent of Education		
State Agency conta	-				
6. Amount of the Non		or Fiscal Year 20	025-2026		
Type of Funding	<u> </u>		Amo	ount	
Operating				0	
Fixed Capital Outlay	<i>I</i>			1,400,000	
Total State Funds I				1,400,000	
7 Total Drainet Coat f	ior Figure Voca 2025	2020 (in alcedin a	matabina firmda arra	ilabla fan thia musi	( )
7. Total Project Cost f	or Fiscal Year 2025	-2026 (including	matching funds ava	iliable for this proje	ect)
Type of Funding			Amount	Percentage	
Total State Funds R	equested (from ques	stion #6)	1,400,000	93%	
Matching Funds					
Federal			0	0%	
State (excluding the	amount of this reque	est)	0	0%	
Local			100,000	7%	
Other			0	0%	
<b>Total Project Costs</b>	s for Fiscal Year 202	25-2026	1,500,000	100%	
8. Has this project pro If yes, provide the	eviously received s most recent instand	_	No		
Fiscal Year	Amo	unt	Specific	Vetoed	
(уууу-уу)	Recurring	Nonrecurring	Appropriation #		
9. Is future-year fundi	ing likely to be requ	ested?	No		
a. If yes, indicate n	onrecurring amoun	t per year.			
b. Describe the sou	urce of funding that	can be used in l	ieu of state funding.		
					1

### **Complete questions 10 and 11 for Fixed Capital Outlay Projects**

10. Status of Construction



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a. What is the current phase of the project?	
	A
b. Is the project "shovel ready" (i.e permitted)?	No
c. What is the estimated start date of construction?	12/01/2025
d. What is the estimated completion date of construction?	12/31/2026
e. What funding stream will be used for ongoing operations	and maintenance of the project?
Fund 7	
<ol> <li>List the owners of the facility to receive, directly or indirect relationship between the owners of the facility and the ent</li> </ol>	
Daytona State College owns the facilities, as a member of the	e Florida College System.

### 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/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering	Card reader system on all campus exterior doors (on seven campuses) allowing centralized lock down response in emergencies; allows control of safe evacuation routes and control over access points.	1,400,000
Total State Funds Requested (m	ust equal total from question #6)	1,400,000

### 13. Program Performance

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

Project implements safety measures that provide centralized controlled access to all buildings across seven campuses that serve 23,000 students. Provides Campus Safety office emergency response and lock down capabilities, enhancing student and employee safety and asset protection.

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

Installation of card reader system on all exterior doors on seven campuses, allowing controlled lockdown of any or all buildings.

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



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Increased safety of 23,000 DSC students, as well as employees and visitors to campus.	
d. Who is the target population served by this project? How many individuals are expected to be served	<b>1?</b>
23,000 Daytona State College students, as well as employees and daily visitors to any of the college's seven and centers.	campuses
e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome be measured?	ome will
Increased safety in cases of emergency and fewer loss of assets.	
f. What are the suggested penalties that the contracting agency may consider in addition to its standard for failing to meet deliverables or performance measures provided for in the contract?	d penalties
Reversion of funds.	
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	



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a. If yes, specify the Commerce):	e program and state	e agency (ex. Loca	I Governmen	t Emergenc	y Bridge Loa
7. Requester Contact	t Information				
a. First Name	Thomas	Last Name	LoBasso		
b. Organization	Daytona State Colle	ege			
c. E-mail Address	thomas.lobasso@da	aytonastate.edu			
d. Phone Number	(386)212-4468	Ext.			
O Basiniant Contact	Info a4: a				
8. Recipient Contact a. Organization	Daytona State Colle	200			
b. Municipality and		<del></del>			
c. Organization Ty	pe				
□For Profit Entity					
□Non Profit 501(d	c)(3)				
□Non Profit 501(d	c)(4)				
□Local Entity					
☑University or Co	llege				
□Other (please sp	pecify)				
d. First Name	Thomas	Last Name	LoBasso		
e. E-mail Address	thomas.lobasso@da	aytonastate.edu			
f. Phone Number	(386)212-4468	Ext.			
9. Lobbyist Contact I	nformation				
a. Name	David Browning				
b. Firm Name	The Southern Grou	ıp			
c. E-mail Address	browning@thesouth	nerngroup.com			
d. Phone Number	(850)671-4401				

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