

LFIR # 2649

1. Project Title	Crestview Animal Control Region	onal Care Facility			
2 Samata Smanaar	lov Two week will	•			
2. Senate Sponsor	Jay Trumbull				
3. Date of Request	2/18/2025				
4. Project/Program D	Description				
public, non-private including domestic	reate a regional Animal Control Car animal control service. The facility v pets like dogs and cats, as well as nal populations and supporting resp	will provide shelter, care, a larger animals such as eq	and rehabilitation fo uine. It will improve	r a range of animals, public safety by	
5. State Agency to re	eceive requested funds Department	artment of Agriculture and	Consumer Service	es	
State Agency cont	acted? No				
6. Amount of the Nor	nrecurring Request for Fiscal Yea	r 2025-2026			
			umt]	
Type of Funding Operating		Amo	0		
Fixed Capital Outla	NV		700,000		
Total State Funds			700,000		
7. Total Project Cost	for Fiscal Year 2025-2026 (includ	ing matching funds ava	ilable for this proj	ect)	
				1	
Type of Funding		Amount	Percentage		
Total State Funds F	Requested (from question #6)	Amount 700,000	Percentage 23%		
Total State Funds F Matching Funds	Requested (from question #6)	700,000	23%		
Total State Funds F Matching Funds Federal		700,000	23%	1	
Total State Funds F Matching Funds Federal State (excluding the	Requested (from question #6) e amount of this request)	700,000	23% 0% 0%		
Total State Funds F Matching Funds Federal State (excluding the Local		700,000 0 2,300,000	23% 0% 0% 77%		
Total State Funds F Matching Funds Federal State (excluding the Local Other		700,000	23% 0% 0%		
Total State Funds F Matching Funds Federal State (excluding the Local Other Total Project Cost 8. Has this project product of the project project product of the project project product of the project product of the project product of the project product of the project project product of the project project product of the project	e amount of this request)	700,000 0 2,300,000 0 3,000,000	23% 0% 0% 77% 0%		
Total State Funds F Matching Funds Federal State (excluding the Local Other Total Project Cost 8. Has this project profit of the project provide the Fiscal Year	e amount of this request) ts for Fiscal Year 2025-2026 reviously received state funding?	700,000 0 2,300,000 0 3,000,000 No Specific	23% 0% 0% 77% 0%		
Total State Funds F Matching Funds Federal State (excluding the Local Other Total Project Cost 8. Has this project pull fyes, provide the	e amount of this request) ts for Fiscal Year 2025-2026 reviously received state funding?	700,000 0 2,300,000 0 3,000,000 No Specific	23% 0% 0% 77% 0% 100%		
Total State Funds F Matching Funds Federal State (excluding the Local Other Total Project Cost 8. Has this project profit of the project provide the Fiscal Year	e amount of this request) ts for Fiscal Year 2025-2026 reviously received state funding? e most recent instance: Amount	700,000 0 2,300,000 0 3,000,000 No Specific	23% 0% 0% 77% 0% 100%		
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Total State Funds F Matching Funds Federal State (excluding the Local Other Total Project Cost 8. Has this project professed from the Local Year (yyyy-yy) 9. Is future-year funds	e amount of this request) ts for Fiscal Year 2025-2026 reviously received state funding? most recent instance: Amount Recurring Nonrecurring	700,000 0 2,300,000 0 3,000,000 No Specific Appropriation #	23% 0% 0% 77% 0% 100%		
Total State Funds F Matching Funds Federal State (excluding the Local Other Total Project Cost 8. Has this project professed from the Local Year (yyyy-yy) 9. Is future-year function. If yes, indicate in the Local Year (yyyy-yy)	e amount of this request) Its for Fiscal Year 2025-2026 reviously received state funding? most recent instance: Amount Recurring Nonrecurring ding likely to be requested? monrecurring amount per year.	700,000 0 2,300,000 0 3,000,000 No Specific Appropriation #	23% 0% 0% 77% 0% 100%		
Total State Funds F Matching Funds Federal State (excluding the Local Other Total Project Cost 8. Has this project professed from the Local Year (yyyy-yy) 9. Is future-year function. If yes, indicate in the Local Year (yyyy-yy)	e amount of this request) ts for Fiscal Year 2025-2026 reviously received state funding? most recent instance: Amount Recurring Nonrecurring ding likely to be requested?	700,000 0 2,300,000 0 3,000,000 No Specific Appropriation #	23% 0% 0% 77% 0% 100%		



LFIR # 2649

a. What is the cu	urrent phase of tl	he project?		
Planning	O Design	○ Construction ○ N/A	Α	
b. Is the project	"shovel ready" (i.e permitted)?	No	
c. What is the es	stimated start da	te of construction?	01/05/2026	
d. What is the es	stimated comple	tion date of construction?	12/31/2026	
e. What funding	stream will be u	sed for ongoing operations	and maintenance of	the project?
funded through a		ance for the Animal Control Fernment budget allocations a raising efforts.		
		o receive, directly or indirects of the facility and the ent		outlay funding. Include the
City of Crestvie	ew			
12. Details on how	the requested st	ate funds will be expended		

12

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	Funds will be used for the construction of the Animal Control Regional Care Facility, including site preparation, building infrastructure, utilities, and specialized spaces for animals. This includes the installation of kennels, veterinary areas, and office spaces, along with necessary mechanical and electrical systems.	700,000		
Total State Funds Requested (must equal total from question #6)				

13. Program Performance

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

The funds requested will be used to construct the Animal Control Regional Care Facility, which will provide a centralized, modern space for the care and management of animals. The goal is to improve animal welfare by offering shelter, veterinary care, and adoption services, while also addressing the region's growing need for a more efficient and sustainable animal control system.



LFIR # 2649

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

The funds will be used to build the Animal Control Regional Care Facility, which will provide shelter, veterinary care, and adoption services for animals. The facility will also offer animal intake, temporary housing, and rehabilitation services, while addressing the region's need for a centralized, efficient system for animal control and welfare. Additionally, educational programs and community outreach initiatives will be offered to promote responsible pet ownership.

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

The direct services provided to citizens by the Animal Control Regional Care Facility will include access to animal adoption services, veterinary care, and lost pet recovery. The facility will also offer public education on responsible pet ownership, provide animal sheltering and care, and help reduce the number of stray and abandoned animals in the community. Additionally, the facility will support local law enforcement in addressing animal-related issues.

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

The target population served by the Animal Control Regional Care Facility includes residents of Crestview and all of Okaloosa County.

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

The Animal Control Regional Care Facility will improve animal welfare, reduce strain on local resources, and better manage stray, abandoned, and neglected animals across Okaloosa County. It will increase adoption rates, improve animal health through veterinary care, and enhance public education on responsible pet ownership. Outcomes will be measured by tracking adoption rates, animal health recovery, community engagement in educational programs, and reductions in the stray animal population. These metrics will help assess the facility's effectiveness in achieving its goals.

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 standard penalty for failure to meet deliverables is a monetary amount applied for each day that the project has extended past its state deadline.

	extended past its state deadline.						
4.	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):						
5. I	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#:



LFIR # 2649

b. Provide the total	I project cost listed on	the FEMA proje	ect worksheet:	
6. Has the entity app	olied for or received sta	ate assistance f	or this project (othe	er than this request)?
☐ Yes, Applied				
☐ Yes, Received				
□ No				
☐ No, but intends t	to apply			
a. If yes, specify th Commerce):	e program and state a	gency (ex. Loca	I Government Eme	rgency Bridge Loan, De
7. Requester Contac				
a. First Name	Tim	Last Name	Bolduc	
b. Organization	City of Crestview	viou ora		
d. Phone Number	timbolduc@cityofcrestv (850)682-1560	Ext.		
B. Recipient Contact a. Organization	Information City of Crestview			
_	d County Okaloosa			
c. Organization Ty	-			
□For Profit Entity				
□Non Profit 501(d	c)(3)			
□Non Profit 501(
☑Local Entity	, , ,			
□University or Co	ollege			
·	_			
□Other (please s	pecity)			
d. First Name	Jayce	Last Name	Vanderford	
e. E-mail Address				
f. Phone Number	(850)797-8707	Ext.		



LFIR # 2649

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.