



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 2651

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

4. **Project/Program Description**

The purpose of this appropriation request is to secure funding for the construction of a fire station to serve the Air Force Enlisted Village, a residential and medical care facility dedicated to veterans, their families, and wounded warriors. This station will enhance emergency response capabilities, improve fire protection services, and ensure the safety and well-being of this vulnerable population and the surrounding community.

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	6,000,000
Total State Funds Requested	6,000,000

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)	6,000,000	100%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
Total Project Costs for Fiscal Year 2025-2026	6,000,000	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? 05/15/2026

d. What is the estimated completion date of construction? 05/14/2027

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

Ongoing maintenance and operation of the fire station will be supported through local funding sources. These funds will cover personnel salaries, equipment maintenance, facility upkeep, and operational costs, ensuring the station remains fully functional, staffed, and equipped to provide continuous emergency services.

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.

Ocean City Wright Fire Control District

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	All requested funds will be allocated exclusively to the construction of the fire station, covering costs such as design, site preparation, building materials, labor, and essential infrastructure. This investment will create a fully operational facility designed to support emergency response services. By funding construction, the project directly enhances community safety, enabling faster response times, improved fire protection, and critical emergency medical services for the Air Force Enlisted	6,000,000
Total State Funds Requested (must equal total from question #6)		6,000,000

13. Program Performance

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



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The purpose of constructing this fire station is to enhance the safety, emergency response capabilities, and quality of life for the residents of the Air Force Enlisted Village and surrounding areas, including veterans, their families, and wounded warriors. This facility will provide rapid fire suppression, emergency medical services, and disaster response, ensuring comprehensive protection for this honored community.

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

The funds will support the construction of a fully equipped fire station, providing fire suppression, emergency medical services, and disaster response. The station will house trained personnel, firefighting apparatus, and lifesaving equipment to ensure rapid response times, enhance public safety, and deliver critical emergency services to the Air Force Enlisted Village.

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

The funding will provide direct services including fire suppression, emergency medical response, rescue operations, and disaster preparedness. Citizens will benefit from faster response times, improved life safety measures, and enhanced protection of property. The station will also support fire prevention education, community risk reduction programs, and emergency support for the community.

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

The target population for this project includes the senior and elderly residents of the Air Force Enlisted Village, specifically veterans, their families, and wounded warriors who require specialized residential and medical care. Additionally, the project will serve the surrounding community, enhancing emergency response capabilities for nearby neighborhoods, businesses, and public facilities, ensuring the safety and well-being of all citizens in the coverage area.

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

The specific measure of benefit will be a projected reduction in emergency response times by up to 50% for the Air Force Enlisted Village and surrounding areas. This improvement will enhance life safety outcomes, decrease property loss during fires, and increase survival rates in medical emergencies. Additional metrics include the number of incidents responded to annually.

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 Fire District may, at any time, without cause, order Bidder in writing to suspend, delay or interrupt the work in whole or in part for such period of time as the Fire District may determine, or to terminate all or a portion of the Contract for the Fire District's convenience. Upon such termination, the Contract Price earned to the date of termination shall be paid to Bidder, but Bidder waives any claim for damages, including loss of profits arising out of or related to the early termination.

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 infrastructure)

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



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- 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

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)



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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

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