



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 2717

1. **Project Title**
2. **Senate Sponsor**
3. **Date of Request**

4. Project/Program Description

It is vital for the City to provide reliable power in an emergency power loss situation thus sustaining a proper service level to the city. Extended power failures can be a major source of financial loss, cause damage to the facility, residential homes and businesses, as well as creating a sanitary health risk to residents. The City is requesting funding for the purchase of 8 dedicated generators to provide power backup for critical facilities. These generators are essential to maintain uninterrupted power to critical city infrastructure during a disaster. Without backup power, systems such as water supply, emergency communications, wastewater treatment, public safety buildings deemed inoperable, would leave the city vulnerable and put public health and safety at risk.

5. **State Agency to receive requested funds**
- State Agency contacted?**

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

Type of Funding	Amount
Operating	0
Fixed Capital Outlay	960,000
Total State Funds Requested	960,000

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)	960,000	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	960,000	100%

8. **Has this project previously received state funding?**
- 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?**
- a. **If yes, indicate nonrecurring amount per year.**
- b. **Describe the source of funding that can be used in lieu of state funding.**
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Complete questions 10 and 11 for Fixed Capital Outlay Projects

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?

07/01/2025

d. What is the estimated completion date of construction?

12/01/2025

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

Not Applicable

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 Brooksville

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	Generators for 8 critical City facilities.	960,000
Total State Funds Requested (must equal total from question #6)		960,000

13. Program Performance

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

Purchase of 8 dedicated generators for critical City facilities. It is vital for the City to provide reliable power in an emergency power loss situation thus sustaining a proper service level to the city which is essential to maintain uninterrupted power to critical city infrastructure during a disaster. Extended power can be a major source of financial loss, cause damage to facilities, residential homes, businesses, as well as creating a sanitary and environmental health risk

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



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Procurement and installation of 8 dedicated generators eliminating power failures at critical facilities, circumventing financial loss, potential damage to facilities, residential homes and businesses and eliminating sanitary health risks to the community.

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

Systems such as water supply, emergency communications, wastewater treatment, public safety buildings will continue providing reliable power and appropriate levels of service during a power loss situation.

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

All citizens and visitors to the City of Brooksville, population estimate of 9,752.

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

These generators will maintain maintain operational efficiency and uninterrupted power to critical city infrastructure during a disaster and safeguard the environment, health and well being of the residents and visitors during a power loss. This will be measured through a reduction of extended power failures, reduction in wastewater disruption as well as mitigating failure of the entire wastewater distribution system, elimination of health and safety risks to the environment and the community.; thus reducing the risk of financial loss, damages to critical infrastructure and facilities, residential homes and businesses, as well as diminishing the sanitary health risk to residents and the environment.

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?

Withhold payment.

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)?



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- 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)

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.