



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 3017

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

This request is to support the replacement of one of Leon County Sheriff's Office (LCSO) helicopters due to its age with the purchase of a Bell 505 Ranger Jet X Helicopter and related accessories and services. Since 1974, LCSO has operated helicopters in support of law enforcement and public safety efforts including direct operations support for LCSO Tallahassee Police Department (TPD), Tallahassee Electric Department, and County Mosquito Control. LCSO's Aviation Unit is the primary aviation unit for the region. Purchase of the helicopter will ensure LCSO's continued support in critical law enforcement services such as response to criminal incidents, lost person searches, law enforcement vehicle pursuits, and the recovery of stolen vehicles.

5. State Agency to receive requested funds

State Agency contacted? Yes

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

Type of Funding	Amount
Operating	1,400,000
Fixed Capital Outlay	0
Total State Funds Requested	1,400,000

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)	1,400,000	50%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	1,400,000	50%
Other	0	0%
Total Project Costs for Fiscal Year 2025-2026	2,800,000	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.



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LFIR # 3017

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?

d. What is the estimated completion date of construction?

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

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.

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	This request is to support the replacement of one of Leon County Sheriff's Office (LCSO) helicopters due to its age with the purchase of a Bell 505 Ranger Jet X Helicopter and related accessories and services.	1,400,000
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		0
Total State Funds Requested (must equal total from question #6)		1,400,000

13. Program Performance

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

This request is to support the replacement of one of Leon County Sheriff's Office (LCSO) helicopters due to its age with the purchase of a Bell 505 Ranger Jet X Helicopter and related accessories and services.

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



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Purchase of the helicopter will ensure LCSO's continued support in critical law enforcement services such as response to criminal incidents, lost person searches, law enforcement vehicle pursuits, and the recovery of stolen vehicles. LCSO's Aviation Unit has provided active support to the unified command of the LCSO and TPD during gubernatorial inaugurations. In addition, other flight missions led by LCSO include conducting damage assessments following natural disasters, criminal responses in neighboring counties, and providing support to the City Electric Department and Leon County Mosquito Control Department.

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

Missions performed by LCSO's Aviation Unit include Assist uniform patrol and other specialized units; Searches for fleeing suspects; Searches for lost or missing persons; Searches for missing or overdue aircraft or boaters; SWAT team deployment; VIP security / escort; Flood / storm damage assessment; Aerial larvicide (mosquito) spraying; Power line / electric facility thermal inspection; Radiation / nuclear detection.

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

Residents of Leon County and surrounding communities as LCSO's Aviation Unit is the primary aviation unit for the region.

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

Continued support of law enforcement and public safety efforts as demonstrated by air support metrics such as support of calls for service from ground law enforcement responding to criminal incidents and other other flight missions for public safety throughout Leon County and the region.

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?

Deobligation of funds.

14. Is this project related to mitigation, response, or recovery from a natural disaster? No Yes

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):

May 10th Tornado Outbreak, and other natural disasters requiring damage assessments

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:



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Fiscal Year 2025-2026

LFIR # 3017

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)

d. First Name **Last Name**

e. E-mail Address

f. Phone Number **Ext.**

19. Lobbyist Contact Information

a. Name



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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.