

# The Florida Senate Local Funding Initiative Request Fiscal Year 2025-2026

**LFIR # 3058** 

1. Project Title	Chipley Police D	epartment Equipm	ent Modernization		
•					
2. Senate Sponsor	Jay Trumbull				
3. Date of Request	3/4/2025				
4. Project/Program D	escription				
The purchase of ne unsupported equipn reducing crime and	nent. This equipmer	nt will enhance trair	ey Police Department ning capabilities and e	is needed to replace ffectiveness of the F	e outdated and Police Department by
5. State Agency to re	ceive requested fu	ınds Departm	nent of Law Enforceme	ent	
State Agency conta	acted? No				
6. Amount of the Non	recurring Reguest	for Fiscal Year 20	125-2026		
	Todaring Request	10111304116412			
Type of Funding Operating			Amo	400,000	
Fixed Capital Outlay					
Total State Funds				400,000	
				100,000	
7. Total Project Cost f	or Fiscal Year 202	5-2026 (including	matching funds ava	ilable for this proje	ect)
Type of Funding			Amount	Percentage	
Total State Funds R	equested (from que	estion #6)	400,000	100%	
Matching Funds					
Federal			0	0%	
State (excluding the	amount of this requ	uest)	0	0%	
Local			0	0%	
Other			0	0%	
<b>Total Project Costs</b>	s for Fiscal Year 20	025-2026	400,000	100%	
8. Has this project pr	eviously received	state funding?	No		
If yes, provide the	•	•	INO		
Fiscal Year (yyyy-yy)	Amo Recurring	Nonrecurring	Specific Appropriation #	Vetoed	
	Recurring	Nomecuring			
9. Is future-year fund	ing likely to be req	uested?	No		
a. If yes, indicate n	onrecurring amou	ınt per year.			
b. Describe the so	urce of funding tha	at can be used in	lieu of state funding.		

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

10. Status of Construction



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Planning	O Design	Construction	O N/A		
o. Is the project	"shovel ready"	(i.e permitted)?			
c. What is the e	stimated start da	ate of construction?			
d. What is the e	stimated comple	etion date of constru	ction?		
e. What funding	stream will be u	used for ongoing ope	erations and main	tenance of the pro	oject?
		o roccivo directly or	· indirectly, any fix	red capital outlay	funding Include the

#### 12. Details on how the requested state funds will be expended

a. What is the current phase of the project?

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/ Other	Purchase of critical equipment and training tools to enhance public safety, and protect lives of officers.	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/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering		0
Total State Funds Requested (m	ust equal total from question #6)	400,000

#### 13. Program Performance

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

The purchase of new emergency equipment for the Chipley Police Department is needed to replace outdated and unsupported equipment. This equipment will enhance training capabilities and effectiveness of the Police Department by reducing crime and increasing community safety.

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

This new equipment will new technology will enhance the Police Department's ability to perform their duties. This includes training capabilities and overall effectiveness.

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



□ No

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	residents.
	d. Who is the target population served by this project? How many individuals are expected to be served?
	The general population will be served by this project and is expected to exceed 1,000 people.
	e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will
	be measured?
	Improvements will increase law enforcement effectiveness and safety for the community and officers. This will be measured by improved response times and an overall reduction in crime.
	f. What are the suggested penalties that the contracting agency may consider in addition to its standard penaltic
	for failing to meet deliverables or performance measures provided for in the contract?
	If appropriated, the City of Chipley will ensure that all deliverables and performance measures set forth in the funding agreement are met. These measures will include engaging a compliance/project management team to work with City state to oversee administration and compliance of the appropriated funds.
14.	Is this project related to mitigation, response, or recovery from a natural disaster? No
а	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	o. 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?
ı	☐ Yes, Applied
ı	☐ Yes, Received
ı	□ No
ı	□ No, but intends to apply
а	ı. If yes, provide the FEMA project worksheet ID#:
b	o. 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)?
ı	☐ Yes, Applied
ı	□ Yes, Received



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☐ No, but intends t a. If yes, specify th		and state age	ncy (ex. Loca	al Governme	ent Emergeno	cy Bridge I o
Commerce):	o program	- una otato ago	noy (oxi 2000			5, 5,14g0 E0
'. Requester Contac	l Informat	ion				
a. First Name	Tracy	1011	Last Name	Andrews		
b. Organization	City of Cl	nipley				_
_		tandrews@cityofchipley.com				
d. Phone Number	(850)638	-6350	Ext.			
3. Recipient Contact	Informati	on				
a. Organization	City of Cl					
b. Municipality and	d County	Washington				
c. Organization Ty	ре					
□For Profit Entity						
□Non Profit 501(d	c)(3)					
□Non Profit 501(d	:)(4)					
☑Local Entity						
□University or Co	llogo					
•	•					
□Other (please sp	ресіту)					
d. First Name	Patrice		Last Name	Tanner		
e. E-mail Address	ptanner@	cityofchipley.co	om			
f. Phone Number	(850)638	-6350	Ext.			
. Lobbyist Contact I	nformatio	n				
a. Name	Timothy	L. Parson				
b. Firm Name	Liberty F	artners of Tallal	hassee LLC			
c. E-mail Address	tim@libe	rtypartnersfl.con	n			
d. Phone Number	(850)910	-2678				

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