

LFIR # 3083

1. Project Title	High Water Res	cue Vehicles			
2. Senate Sponsor	Ben Albritton				
3. Date of Request	2/7/2025				
4. Project/Program D	escription				
Truck vehicle. It is a North Port Police De allowed for rescuing	combined armored epartment provided multiple people at rehicle is able to tra	d personnel carrier us with their Beard one time in addition overse through 40 in	and high water rescue cat High Water Rescue on to room enough for f	vehicle. During Hur vehicle. The vehicle our officers. It has a	e is enclosed and
5. State Agency to re-	ceive requested fo	unds Division	of Emergency Manag	ement	
State Agency conta	acted? Yes				
6. Amount of the Non	recurring Reques	t for Fiscal Year 2	025-2026		
Type of Funding			Amo	unt	
Operating				581,000	
Fixed Capital Outlay				0	
Total State Funds	Requested			581,000	
7. Total Project Cost f	or Fiscal Year 202	25-2026 (including	g matching funds ava	ilable for this proje	ect)
Type of Funding			Amount	Percentage	
Total State Funds R	equested (from qu	estion #6)	581,000	89%	
Matching Funds					
Federal			0	0%	
State (excluding the	amount of this req	uest)	0	0%	
Local			71,000	11%	
Other			0	0%	
Total Project Costs	s for Fiscal Year 2	025-2026	652,000	100%	
8. Has this project pro If yes, provide the	-		No		
Fiscal Year	Am	ount	Specific	Vetoed	
(уууу-уу)	Recurring	Nonrecurring	Appropriation #		
9. Is future-year fund a. If yes, indicate n b. Describe the so	onrecurring amo	unt per year.	No lieu of state funding.		
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Complete questions 10 and 11 for Fixed Capital Outlay Projects

0.	Status of Const	ruction					
i	a. What is the cu	urrent phase of t	the project?				
	Planning	O Design	Construction	O N/A			
	b. Is the project	"shovel ready"	(i.e permitted)?				
	c. What is the es	stimated start da	ate of construction?				
(d. What is the es	stimated comple	etion date of constru	ction?			
	e. What funding	stream will be u	used for ongoing ope	rations a	and maintenance of	f the project?	
11.			o receive, directly or ers of the facility and			outlay funding. Include the	

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	Purchase of a Fat Truck 2.8 Wagon 223,000 Purchase of a BearCat 358,000	581,000
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering		0
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?

Public Safety is our number one concern and having the right equipment is crucial to fulfilling that responsibility. Having to rely on outside agencies and their resources puts a time delay on critical responses as well as the possibility of not receiving those resources if the outside agency were affected by the same storm. The Fat Truck and BearCat provide capabilities that are essential for responding to critical, life-threatening situations.

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



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☑ No						
☐ No, but intends to	o apply					
a. If yes, specify the	e program and state ager	ıcy (ex. Loca	al Governmen	t Emergenc	y Bridge Loar	ı, Department
Commerce):						
I7. Requester Contact	t Information					
a. First Name	Melissa	Last Name	Reichert			
b. Organization	City of Punta Gorda					
c. E-mail Address	mreichert@cityofpuntagor	dafl.com				
d. Phone Number	(941)575-3302	Ext.				
8. Recipient Contact						
a. Organization	City of Punta Gorda					
b. Municipality and	d County Charlotte					
c. Organization Ty	ре					
□For Profit Entity						
□Non Profit 501(d	c)(3)					
□Non Profit 501(d	c)(4)					
☑Local Entity						
□University or Co	llege					
☐Other (please sp						
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d. First Name	Melissa	Last Name	Reichert			
	mreichert@cityofpuntagor	1]	
f. Phone Number	(941)575-3302	Ext.				
9. Lobbyist Contact I	nformation					
a. Name	Rosanna Manuela Catala	no				
b. Firm Name	b. Firm Name Arrow Group Consulting					
c. E-mail Address	ro@anfieldflorida.com					
d. Phone Number	(850)322-4418					



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