



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2025-2026

LFIR # 3128

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The City of St. Cloud seeks funds to purchase of an emergency response boat for City of St. Cloud Fire Rescue Department.

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	170,000
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>170,000</b>

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)	170,000	53%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	150,000	47%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2025-2026</b>	<b>320,000</b>	<b>100%</b>

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

10. Status of Construction



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a. What is the current phase of the project?

- Planning    
  Design    
  Construction    
  N/A

b. Is the project "shovel ready" (i.e permitted)?

Yes

c. What is the estimated start date of construction?

08/01/2025

d. What is the estimated completion date of construction?

01/01/2026

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

Ad-valorem revenue

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 St. Cloud.

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

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other	Purchase of an emergency response boat for St. Cloud Fire Rescue Department.	170,000
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering		0
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>170,000</b>

13. Program Performance

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

Purchase of an emergency response boat for the St. Cloud Fire Rescue Department. Presently, East Lake Toho, a 12,000-acre lake, is one of the state's most popular bass fishing spots, hosting multiple tournaments, as well as a popular spot for recreational tourism. The fireboat will decrease response times to emergencies in and around the water's edge and help promote the Lake as a safe tourism destination for Florida.

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

Enhance safety in out of city and county waterways with faster response times and up to standard first responder equipment.

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



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This equipment will enhance safety by enabling faster response to emergency calls for service at East Lake Toho. East Lake Toho, a nearly 12,000-acre lake, is a popular spot for recreation uses such as fishing, skiing, and jet skiing. It is also the site of numerous events throughout the year, such as fishing tournaments and speed boat races.

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

This emergency response equipment will serve all the residents and visitors in a city of over 70,000 residents.

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

The purchase of a new fire rescue boat will provide a quicker response to emergencies in our heavily used bodies of water. We expect response times to decrease in our bodies of water.

**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?**

Suggested penalty can be the return of all appropriated funds.

**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
- 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



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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

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