



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 3150

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

4. Project/Program Description

Fort Meade requests funding to securing engineering for breaker replacement, minor repairs, transformer health testing, engineering study for Substation and the path for substation upgrades by June 2025. Current equipment is no longer serviceable. Funding is needed to address the need for these much-needed upgrades, which have not been provided since the 1970s.

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	4,000,000
Total State Funds Requested	4,000,000

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)	4,000,000	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	4,000,000	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.

Complete questions 10 and 11 for Fixed Capital Outlay Projects



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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? 9/01/2025

d. What is the estimated completion date of construction? 10/30/2027

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

Funds from the City of Fort Meade

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.

The City of Fort Meade will be the owner along with Florida Municipal Power Association (FMPA).

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	Full budget breakdown will be available at project bidding. A phased in project with the first phase in place within the fiscal year 2025-2026.	4,000,000
Total State Funds Requested (must equal total from question #6)		4,000,000

13. Program Performance

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

Breaker replacement, minor repairs, transformer health testing, engineering study for Substation and the path for substation upgrades by June 2025. Funding is needed to address the need for these much-needed upgrades, which have not been provided since the 1970s.

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

Upgraded and enhanced utility customer experience.

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



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Electrical utility services such as lights, gas and water.

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

Visiting snowbird residents, local citizens, and tourists.

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

- Finish Electrical Substation Upgrades or Add second Substation
- Reconductor Lines thought out Fort Meade (for expansion)
- Downtown Fort Meade Underground installation - remove overhead
- Upsize Wire across bridge - expansion at Peace River Park (possible new facility)
- New Bucket Truck (already ordered)
- Funds for Larger inventory stock - due to lead times
- Pole replacement throughout City - Phase work (contractors needed)
- Larger Equipment/Material Facility & Storage

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?

the standard penalties

14. Is this project related to mitigation, response, or recovery from a natural disaster? 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):

many hurricanes

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



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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) Municipality

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.