

LFIR # 3228

١.	Project Title	Special Needs Sh	elters Emergenc	y Generators				
2.	Senate Sponsor	Darryl Rouson						
3.	Date of Request	3/5/2025						
4.	Project/Program Des	scription						
	In order to appropriately sustain special needs residents at special needs shelters, these shelter sites must have a backup electrical service. Pinellas County is seeking funding to support the purchase and installation of three generators, one each for two new special needs shelter locations and one to replace an existing obsolete, under powered, 20-year-old generator at a third shelter location. In coordination with the Florida Department of Health – Pinellas and the Pinellas County School Board, Pinellas County will properly assess and configure each generator to maintain electrical service for: electrical outlets for durable medical equipment, the HVAC system, emergency lighting and cooking facilities at each school. It is estimated that we will need 720 kw generators or larger to accomplish this. Pinellas is requesting \$4,000,000 for this project; this includes the cost of the generators and installation.							
5	State Agency to rece		· ·	of Emergency Manag		autori.		
٥.	State Agency contact	-	DIVIDION	of Emergency Manag	Cilicit			
6.	Amount of the Nonre	ecurring Request for	or Fiscal Year 20	025-2026				
	Type of Funding			Amo	unt			
	Operating				0			
	Fixed Capital Outlay							
	Total State Funds R	Requested		4,000,000				
7.	Total Project Cost fo	or Fiscal Year 2025-	·2026 (including	matching funds ava	ilable for this proje	ect)		
7.	Type of Funding	or Fiscal Year 2025-	-2026 (including			ect)		
7.	Type of Funding		,	Amount	Percentage	ect)		
7.	Type of Funding Total State Funds Re		,			ect)		
7.	Type of Funding Total State Funds Re Matching Funds		,	Amount 4,000,000	Percentage 100%	ect)		
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8.	Type of Funding Total State Funds Re Matching Funds Federal State (excluding the a Local Other Total Project Costs Has this project prediction of the model of t	equested (from quest amount of this reque for Fiscal Year 202 viously received st nost recent instanc Amou	stion #6) 25-2026 ate funding? ee: unt Nonrecurring	Amount 4,000,000 0 0 0 4,000,000 No Specific	Percentage 100% 0% 0% 0% 0% 100%	ect)		
8.	Type of Funding Total State Funds Re Matching Funds Federal State (excluding the a Local Other Total Project Costs Has this project predif yes, provide the more services of the project	equested (from quest amount of this reque for Fiscal Year 202 viously received st nost recent instanc Amou Recurring	tion #6) 25-2026 2ate funding? 2e: Int Nonrecurring ested?	Amount 4,000,000 0 0 0 4,000,000 No Specific Appropriation #	Percentage 100% 0% 0% 0% 0% 100%	ect)		
8.	Type of Funding Total State Funds Re Matching Funds Federal State (excluding the a Local Other Total Project Costs Has this project predif yes, provide the m Fiscal Year (yyyy-yy) Is future-year funding a. If yes, indicate no	equested (from quest amount of this reque for Fiscal Year 202 viously received st nost recent instanc Amou Recurring ng likely to be reque onrecurring amount	tion #6) 25-2026 ate funding? e: Int Nonrecurring ested? t per year.	Amount 4,000,000 0 0 0 4,000,000 No Specific Appropriation #	Percentage 100% 0% 0% 0% 0% 100%	ect)		
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10. Status of Construction

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

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Complete questions 10 and 11 for Fixed Capital Outlay Projects

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)?				No	
c. What is the es	stimated start da	6/1/2026			
d. What is the es	stimated comple	06/01/2027			
e. What funding	stream will be ι	used for ongoing ope	erations a	nd maintenance o	f the project?
The Pinellas County School Board in local agreement with Pinellas County Government will maintain the generators as part of their facility maintenance program.					

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 Pinellas County School Board are the owners of the school facilities that will receive the fixed capital outlay funding. They work in partnership and coordination with Pinellas County Government who are responsible for the identification and coordination of risk shelters during hurricanes and for providing services for our most vulnerable residents per Florida Statue 252.

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/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering	The state funds will provide for electrical Planning and Engineering, Electrical Service Renovation and Installation of three generators at three special needs Pinellas County school shelter locations.	4,000,000
Total State Funds Requested (m	ust equal total from question #6)	4,000,000

13. Program Performance

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



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Funding critical life-sustaining backup power systems for our three Special Needs risk shelters. This will provide suitable locations to maintain the electrical outlets for medical equipment, emergency lighting, the HVAC system, and cooking facilities at each school even when widespread power outages occur for our approximately 4,000 registrants.

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

This will provide uninterrupted power, at risk shelters during hurricanes, to the electrical outlets for medical equipment, emergency lighting, the HVAC system, and cooking facilities at each school even when widespread power outages occur.

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

This will fulfill a state statute to provide risk shelters for special needs populations. This will provide uninterrupted power to the electrical outlets for medical equipment, emergency lighting, the HVAC system, and cooking facilities at each school even when widespread power outages occur. The generators will provide uninterrupted power during hurricanes to support their medical equipment such as oxygen concentrators, CPAP machines, Bi-PAP, nebulizers, heart monitors, and feeding pumps.

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

Very vulnerable residents who have medical conditions that require equipment to run on electricity. These sites are utilized during hurricane evacuations to provide a safe refuge for those who are at risk due to storm surge and high winds. Our registry currently has approximately 4,000 people.

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

This will save lives for vulnerable medically needy residents by providing a safe option for people to seek refuge in during a hurricane. This can be measured by the number of people who seek shelter and a reduction in indirect storm related deaths, reduced 911 calls and emergency evacuations after a storm.

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?

	Pin	nellas County Government would reimburse the State for the obligated funds.				
14.	Is th	is project related to mitigation, response, or recovery from a natural disaster? Yes				
a	a. If Yes, what phase best describes the project?					
	\square	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. Name of the natural disaster (or Executive Order # for events not under a federal declaration):						
Hurricane Milton and Helene						
15.	15. Has the entity applied for or received federal assistance for this project?					
☐ Yes, Applied						
	□ Y	es, Received				
	ΜN	0				

a. If yes, provide the FEMA project worksheet ID#:

□ No, but intends to apply



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b. Provide the tota	b. Provide the total project cost listed on the FEMA project worksheet:				
16. Has the entity ap	plied for o	r received state	assistance t	for this project (other tha	n this request)?
☑ Yes, Applied					
☐ Yes, Received					
□ No					
☐ No, but intends	to apply				
a. If yes, specify t	he progran	n and state ager	ncy (ex. Loca	al Government Emergenc	y Bridge Loan, Department of
Commerce):	soived thre		iclativo ack [Division of Emergency Man	aggament
Applied but not re	ceived tillo	ugii previous ieg	isialive ask, i	Division of Emergency Man	agement
17. Requester Conta	ct Informat	tion			
a. First Name	Cathie		Last Name	Perkins	
b. Organization	Pinellas	County Governm	ent		
c. E-mail Address	cperkins	@pinellas.gov	_		
d. Phone Number	r (727)464	-3851	Ext.		
18. Recipient Contac	t Informati	on			
a. Organization		County Governm	ent		
b. Municipality ar	nd County	Pinellas			
c. Organization T	ype				
□For Profit Entit	y				
□Non Profit 501	(c)(3)				
□Non Profit 501	□Non Profit 501(c)(4)				
☑Local Entity	☑Local Entity □University or College				
□University or C					
□Other (please	specify)				
d. First Name	Cathie		Last Name	Perkins	
e. E-mail Address	cperkins	@pinellas.gov]
f. Phone Number	(727)464		Ext.		

19. Lobbyist Contact Information



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a. Name	Laura E. Boehmer	
b. Firm Name	The Southern Group	
c. E-mail Address	boehmer@thesoutherngroup.com	
d. Phone Number	(850)671-4401	

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