



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2025-2026

LFIR # 3435

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

4. **Project/Program Description**

Suwannee County was impacted by four disaster events within a 13-month period: Idalia/Aug 2023, Tornadoes/May 2024, Debby/Aug 2024 and then Helene/Sep 2024. The rare occurrence of some many storms in such a condensed time period created a severe and repetitive impact on infrastructure, homes, business/industry and water quality from winds and inland flooding. Funds would be used to design a master plan for a regional shelter resource for surrounding counties and all Floridians.

5. **State Agency to receive requested funds**

**State Agency contacted?**  Yes

6. **Amount of the Nonrecurring Request for Fiscal Year 2025-2026**

Type of Funding	Amount
Operating	0
Fixed Capital Outlay	5,000,000
<b>Total State Funds Requested</b>	<b>5,000,000</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)	5,000,000	100%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2025-2026</b>	<b>5,000,000</b>	<b>100%</b>

8. **Has this project previously received state funding?**  Yes

If yes, provide the most recent instance:

Fiscal Year (YYYY-YY)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2024-25	0	2,500,000	3690	No

9. **Is future-year funding likely to be requested?**  Yes

a. **If yes, indicate nonrecurring amount per year.**

b. **Describe the source of funding that can be used in lieu of state funding.**

None available to RAO county based on chronic economic stress

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



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LFIR # 3435

**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?** 02/01/2026

**d. What is the estimated completion date of construction?** 12/31/2027

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

Local funding from Suwannee County Board of County Commissioners

**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.**

Suwannee County Board of County Commissioners will own the facility.

**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		0
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Master planning and design of a regional storm shelter resource for surrounding counties and all Floridians.	5,000,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>5,000,000</b>

**13. Program Performance**

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

Planning a regional emergency shelter for the residents of Suwannee County and the North Central Florida Region, will provide an essential services to many who have limited access to emergency resources at the time of their greatest need. Through this regional shelter, residents will be have a safe space to turn to for food, water, medical care and support. This will be a multipurpose facility functioning as a storm shelter (gray skies) and a regional event center (blue skies).

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

Master planning and design services for a regional storm shelter.

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



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Planning a regional emergency shelter for the residents of Suwannee County and the North Central Florida Region, will provide an essential services to many who have limited access to emergency resources at the time of their greatest need. Through this regional shelter, residents will be have a safe space to turn to for food, water, medical care and support.

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

All residents in Suwannee, Columbia, Hamilton, Madison, Lafayette, Gilchrist counties.

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

Protect the general public from harm during local state of emergency -facility use log  
 Increase/improve economic activity -Tax revenue, retail sales, new jobs and count of people attending events  
 Increase tourism -Count of events and participants along with event revenue generation  
 Improve wastewater management -additional or expanded processing capacity  
 Improve star water management- additional storm water management capacity  
 Improve drinking water -additional or expanded drinking water capacity

**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?**

Remittance of funding back to the State

**14. Is this project related to mitigation, response, or recovery from a natural disaster?**  No  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):**

Idalia/2023, Tornadoes in May 2024, Debby/2024, Helene/2024

**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)

**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.*