



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 1987

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

This project is requested for funding to purchase bunker gear for the City of Lauderhill (City) Fire and Rescue firefighters in an effort to reduce exposure to cancer causing agents. The funding will provide 100 complete bunker gear sets for a total project cost of \$454,284. This is the City's continued effort minimizing the known risk of cancer to our firefighters, and potential risk to the residents they serve.

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2023-2024

Type of Funding	Amount
Operations	227,142
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>227,142</b>

7. Total Project Cost for Fiscal Year 2023-2024 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	227,142	50%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	227,142	50%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2023-2024</b>	<b>454,284</b>	<b>100%</b>

8. Has this project previously received state funding?

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. Is future 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.

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

If yes, indicate the amount of funds received and what the funds were used for.



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The city received \$18,959,010 from the American Rescue Plan. Funds were used for Public Health, Economic Impact for small businesses, Affordable Housing for residents, and Governmental Services.

## Complete questions 11 and 12 for Fixed Capital Outlay Projects

### 11. Status of Construction

a. What is the current phase of the project?

☐ Planning ☐ Design ☐ Construction

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

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

12. 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.

### 13. 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: Other</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/ Other	This total amount will be used to purchase bunker gear sets that will be used to protect Lauderhill firefighter from excess exposure to PFAS, cancer causing chemicals.	227,142
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>227,142</b>

### 14. Program Performance

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

Through extensive research from the University of Miami, it has been proven that bunker gear contains cancer causing contaminants after a fire and risk of causing cancer in firefighters. This potential exposure has been identified to have serious health risks to our firefighters. This project will provide the needed set of bunker gear to help protect our firefighters from this cross contamination and exposure to cancer by providing clean bunker gear.

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



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The bunker gear will be purchased and will offer the necessary warranties and ongoing necessary maintenance to increase long use of these firefighter bunker gear sets.

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

By one firefighter affected via illness or death will cause a ripple affect to our community, which does not only impact the fire department and their family. It also affects the department and community as a whole. When fire department stff are provided with protective equipment, this reduces the incidents of illnesses and disease, allowing them to be available to provide services to the citizens in need. The safety provision may also attract the interest youths contemplating fire rescue as a career.

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

At risk firefighters and staff that respond to fire related calls throughout Lauderhill. According to the 2020 Census report, the City of Lauderdale (City) had a population of approximately 74,000. The total population is counted since Lauderhill rescue is responsible for providing all residents with support for any given emergency.

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

Decreased incidents of exposure to carcinogens by firefighters and staff that will ultimately cause cancer related illnesses and diseases. A before and after study of health related illneses could be completed to determine if this additional equipment has helped our rates of loss time due to illness compared to before we received the additonal equipment. Because the University of Miami has done studies, a partnership could be formed to assist in their research classes and to justify the expense for our future budgets.

**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 the contract?**

Non-payment of invoices until milestiones are achieved; implemenation of corrective action plan.

**15. Requester Contact Information**

a. First Name  Last Name

b. Organization

c. E-mail Address

d. Phone Number  Ext.

**16. 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)



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d. First Name  Last Name

e. E-mail Address

f. Phone Number

#### 17. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number