



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2024-2025

LFIR # 2534

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

This request will be for a replacement HVAC unit for the Hamilton County Courthouse Annex. The current unit is over 20 years old and has aged well past its expected functional expectancy.

5. State Agency to receive requested funds

State Agency contacted?  No

6. Amount of the Nonrecurring Request for Fiscal Year 2024-2025

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	98,000
<b>Total State Funds Requested</b>	<b>98,000</b>

7. Total Project Cost for Fiscal Year 2024-2025 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	98,000	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 2024-2025</b>	<b>98,000</b>	<b>100%</b>

8. Has this project previously received state funding?  No

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

9. Is future 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.

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

Yes

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

No funds were available for this project.



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## 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
  N/A

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

No

c. What is the estimated start date of construction?

07/01/2024

d. What is the estimated completion date of construction?

06/30/2025

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.

Hamilton County

### 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		0
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Request funding for planning, purchase, of a new HVAC unit. This cost includes removal of the current unit and installation of the new unit.	98,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>98,000</b>

### 14. Program Performance

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

This request will be for a new HVAC unit at the Hamilton County Courthouse Annex. The current unit is well in exceedance of its life expectancy and is not currently functioning properly and/or is creating undue hardship with relation to frequent repair needs. The new unit will obviate the need for such frequent repair expenditures and allow the facility to run more efficiently with respect to energy usage while also ensuring the safety and comfort of the staff and those of the public entering the facility.

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

A third-party provider will provide removal, replacement and installation of all new HVAC system components.

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



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Safety and comfort of all staff and citizens that interact with and enter the facility.

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

The staff of the facility, various citizens and members of the public that enter the facility.

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

Reduced operating costs, increased safety due to the reduction in potential for heat related illness and increased energy efficiency.

**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?**

Standard contract penalties are sufficient.

**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)

**d. First Name**  **Last Name**

**e. E-mail Address**

**f. Phone Number**

**17. Lobbyist Contact Information**

**a. Name**

**b. Firm Name**



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c. E-mail Address

d. Phone Number