



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2024-2025

LFIR # 3539

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Operation PAR is a substance use disorder and mental health treatment organization providing services ranging from residential and outpatient treatment, prevention and intervention services with facilities located throughout West Central Florida. The Roof of the administrative building located at 6655 66th St N. Pinellas Park, which serves not only Operation PAR, but several other Florida nonprofit organizations must be replaced, along with the air conditioning units located there, to continue to provide a secure sustainable environment to the communities we serve for years to come.

5. State Agency to receive requested funds

State Agency contacted?

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

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	225,000
Total State Funds Requested	225,000

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)	225,000	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 2024-2025	225,000	100%

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?



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

\$4,435,520 PPP Loan Forgiveness
 \$1,013,109 PPP and Healthcare related expenses
 \$153,023 Loss of Revenue

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? 7/1/2024

d. What is the estimated completion date of construction? 10/1/2024

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.

Operation PAR, Inc, is a Florida non-profit that does not have owners. We are governed by a Board of Directors and the Officers of the company are responsible for day-to-day business and operations.

13. 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: Other		
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	Engineering, roofing and air conditioning companies to complete the grading and removal of the old roof, removal and replacement of the 6-8 air conditioning units currently on top of the roof and add new roofing materials in accordance with Florida Building Code.	225,000
Total State Funds Requested (must equal total from question #6)		225,000

14. Program Performance

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



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The request for funding to replace the roof at 6655 66th Street N in Pinellas Park is to ensure the continued safety, functionality and longevity of this essential community facility. This project aims to support not only Operation PAR's mission, but also assist other non-profit organizations and governmental agencies that rely on this building in which to conduct administrative services. These agencies include Boley Centers, PEMHS and the Florida Department of Corrections (DOC).

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

Operation PAR will engage an engineering, roofing and air conditioning company to complete the grading and removal of the old roof, removal and replacement of the 6-8 air conditioning units currently on the roof and adding replacement roofing in compliance with Florida building code.

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

Replacement of the roof and roof-top air conditioning units will support the administrative operations of the tenants consisting of Operation PAR, Inc, Boley Centers, PEMHS, and Florida Department of Corrections offices.

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

The target population includes: Persons with poor mental health, Homeless men and women, At-risk youth, Drug users (in health services), Persons coping with substance use disorder, Preschool students, Currently and Formerly Incarcerated Persons, and Drug Offenders (in Criminal Justice). Expected Number of Individuals Served: 2,000-4,000.

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

These funds will allow for uninterrupted administrative support services to Operation PAR, Inc, Boley Centers, PEMHS and Department of Corrections.

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?

No additional penalties are recommended.

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



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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

c. E-mail Address

d. Phone Number