



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2023-2024

LFIR # 1846

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

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	305,000
Fixed Capital Outlay	0
Total State Funds Requested	305,000

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)	305,000	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 2023-2024	305,000	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?

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



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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

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
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	Equipment - two Brush/Utility trucks.	305,000
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/ Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		305,000

14. Program Performance

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

To ensure reliable response to fire and medical emergencies in Union County. Our fleet of response trucks is extremely aged with the newest brush/utility truck being 12 years old and the oldest being 20 years old. These trucks are the primary response unit for our fire department which relies heavily on volunteers. These trucks are strategically placed throughout Union County to ensure a quick response when needed. Several are at end of life and we struggle to keep them in working condition. We have gaps in coverage due to constant out of service times with these vehicles.

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

Immediate purchase of two new units and add them to Union County Fire Department's fleet thus reducing out of service times. One of these units will be located at our newest funded fire station when built to serve a previous undeserved area of our county in Providence.



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

These units deliver first line fire and EMS response.

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

The entirety of Union County.

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

Union County Fire Department will record out of service time for maintenance as well as new response from a new area. The UCFD anticipates response times to emergencies as a whole in the Providence area will be reduced.

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?

There are no penalties and although supply chain issues could delay this project, Union County does not foresee any problems in obtaining the new equipment.

15. Requester Contact Information

a. First Name James **Last Name** Williams
b. Organization Union County Board of County Commissioners
c. E-mail Address countycoord@unioncounty-fl.gov
d. Phone Number (386)496-4241 **Ext.** 0277

16. Recipient Contact Information

a. Organization Union County Board of County Commissioners
b. Municipality and County Union

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 James **Last Name** Williams
e. E-mail Address countycoord@unioncounty-fl.gov
f. Phone Number (386)496-4241

17. Lobbyist Contact Information

a. Name None



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b. Firm Name

None

c. E-mail Address

d. Phone Number