



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2023-2024

LFIR # 2988

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

City Hall is located in an historic structure in the designated Monticello Historic District. The facility serves as the local government public meeting venue, customer service center, and city administrative offices. A detailed analysis of the structural condition of the facility was prepared by a licensed architect and revealed numerous deficiencies including unsafe electrical panel and wiring, foundation and flooring issues, water intrusion, exterior rot, and other problems. The requested funds will be used to address these issues.

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	0
Fixed Capital Outlay	400,000
Total State Funds Requested	400,000

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)	400,000	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	400,000	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.

Received \$51,516. All funds used by Monticello Police Department (message board, wellness screener, portable lights)

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)?

No

c. What is the estimated start date of construction?

60 days after receipt of funds

d. What is the estimated completion date of construction?

Q4, 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.

City of Monticello (local government)

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	Construction services and materials for repair of foundation, flooring, roof/chimney, ductwork, exterior rot, and damage from water intrusion.	400,000
Total State Funds Requested (must equal total from question #6)		400,000

14. Program Performance

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

Restore safe conditions for employees and the general public; preserve the historic structure.

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



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Construction services to repair and restore the facility to a safe condition.

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

Update and remodel the building to allow for a safe and secure space.

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

City utility customers, city employees, and the general public (including non-city residents) who attend public meetings and hearings, visitors, and potential residents.

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

Safe working conditions, utility and other operational cost savings. Methodology: Compliance with state and local codes, before/after comparison of O&M expenses, and employee/customer satisfaction.

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?

Repayment of funding award

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



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a. Name	<input type="text" value="None"/>
b. Firm Name	<input type="text" value="None"/>
c. E-mail Address	<input type="text"/>
d. Phone Number	<input type="text"/>