



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** Calhoun County Emergency Operations Center

2. **Senate Sponsor:** Bill Montford

3. **Date of Submission:** 11/15/2017

4. **Project/Program Description:**

Construction of a stand-alone Emergency Operations Center. Calhoun County Emergency Management and the EOC are currently located in the basement of the county Courthouse, which is subject to flooding.

5. **State Agency Contacted?** No

a. If yes, which state agency?

b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested?

Executive Office of the Governor

6. **Amount of Non-recurring Requested for fiscal year 2018-19:**

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
	750,000	750,000

7. **Type, amount and percent of matching funds available for this project for fiscal year 2018-19:**

Type	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	0	0.0%
Other	0	0.0%
TOTAL	0	0.0 %

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 750,000

9. **Previous Year Funding Details:**

a. Has funding been provided in a previous state budget for this activity? No

b. In the previous 5 fiscal years, how many years was funding provided? (Optional)

c. What is the most recent fiscal year the project was funded?

d. Were the funds provided in the most recent fiscal year subsequently vetoed?

e. Complete the following Worksheet.



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FY:	Input Prior FY Appropriation for this project for FY 2017-18 (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
Column:	A	B	C
Funds Description:	Prior Year Recurring Funds *	Prior Year Nonrecurring Funds *	Total Funds Appropriated (Column A + Column B)
Input Amounts:			

10. Is future-year funding likely to be requested?

No

11. Program Performance:

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

Construction of a stand-alone EOC to accommodate Emergency Support Function representatives equipped with the latest technology and communications equipment.

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

During non-activated times the EOC will be used for day to day mitigation and preparedness operations, training and recovery operations.

c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
<input type="checkbox"/> Executive Director/Project Head Salary and Benefits		
<input type="checkbox"/> Other Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		
Operational Costs		
<input type="checkbox"/> Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		



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<input type="checkbox"/> Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation		
<input checked="" type="checkbox"/> Construction/Renovation/Land/Planning Engineering	Jobs provided in construction. Lives saved during emergencies.	750,000
TOTAL		750,000

d. What are the direct services to be provided to citizens by the appropriations project?

Provide a dedicated stand-alone Emergency Operations Center during times of emergency and serve as a training center.

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

An estimated 14,000 residents of Calhoun County.

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

The current EOC is located in the flood prone basement of the County Courthouse. An above ground location would increase weather awareness and increase community engagement.

g. 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 in the contract?

Liquidated damages of \$200 per day.

12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.

Calhoun County Emergency Management is a department under the Board of County Commissioners.

13. Requestor Contact Information:

- a. **Name:** Adam Johnson
- b. **Organization:** Interim Director, Calhoun County Emergency Management
- c. **Email:** CalhounEMC@gmail.com
- d. **Phone Number:** (850)674-8075

14. Recipient Contact Information:

- a. **Organization:** Calhoun County Board of County Commissioners
- b. **County:** Calhoun
- c. **Organization Type:**
 - For Profit
 - Non Profit 501(c) (3)



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- Non Profit 501(c) (4)
- Local Entity
- University or College
- Other (Please specify)

d. Contact Name: Adam Johnson

e. E-mail Address: CalhounEMC@gmail.com

f. Phone Number: (850)674-8075

15. If there is a registered lobbyist, fill out the lobbyist information below.

a. Name: None

b. Firm: None

c. Email:

d. Phone Number: