



# The Florida Senate

## Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** Fire Station at Cartagena Park Extension

2. **Senate Sponsor:** Jose Rodriguez

3. **Date of Submission:** 11/09/2017

4. **Project/Program Description:**

To acquire a property to use as a fire station adjacent to Cartagena Park. The site will house one fire truck and staff. In addition the park space will provide a rest or meeting space for cyclist and hikers on Miami-Dade's longest trail.

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?  
Department of Economic Opportunity

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
	1,500,000	1,500,000

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	1,500,000	50.0%
Other	0	0.0%
TOTAL	1,500,000	50.0 %

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 3,000,000

9. **Previous Year Funding Details:**

- Has funding been provided in a previous state budget for this activity? No
- In the previous 5 fiscal years, how many years was funding provided? (Optional)
- What is the most recent fiscal year the project was funded?
- Were the funds provided in the most recent fiscal year subsequently vetoed?
- 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?

To acquire a parcel of land to house a fire station and fire trucks which will be able to provide emergency services to the surrounding area, are in addition to a park space that will provide a rest or meeting space for cyclist and hikers on Miami-Dade's longest trail.

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

Fire Station, Emergency Medical Services, and park space to be used by citizens, community organizations, cyclist, hikers and trail goers for leisure and/or physical activity programming.

#### 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		



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<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation		
<input checked="" type="checkbox"/> Construction/Renovation/Land/Planning Engineering	Real Estate Acquisition	1,500,000
TOTAL		1,500,000

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

Fire Station, Emergency Medical Services and park space available to the public

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

Residents in need of medical services in South Coral Gables, and physically active individuals, families, county residents etc.

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

Faster response times in providing emergency services to the surrounding area, and expanding the greenspace next to the longest trail in Miami-Dade County will drive cyclist, hikers, trail goers, and outdoor enthusiast to visit the park. The City will track traffic patterns to measure the reduction in EMS response times and number visitors to park.

**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?**

Returning a portion of the funds back to the state.

**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.**

The City of Coral Gables

**13. Requestor Contact Information:**

- a. Name: Cathy Swanson-Riverbark
- b. Organization: City of Coral Gables
- c. Email: cswanson@coralgables.com
- d. Phone Number: (305)460-5201

**14. Recipient Contact Information:**

- a. Organization: City of Coral Gables
- b. County: Miami-Dade
- c. Organization Type:



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## *Local Funding Initiative Request - Fiscal Year 2018-2019*

- ☐ For Profit
- ☐ Non Profit 501(c) (3)
- ☐ Non Profit 501(c) (4)
- ☒ Local Entity
- ☐ University or College
- ☐ Other (Please specify)

**d. Contact Name:** Naomi Levi-Garcia

**e. E-mail Address:** nlevi-garcia@coralgables.com

**f. Phone Number:** (305)460-5248

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

**a. Name:** Nelson Diaz

**b. Firm:** Southern Strategy

**c. Email:**

**d. Phone Number:** (305)421-6304