



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2020-2021

LFIR # 1883

1. **Project Title**
2. **Senate Sponsor**
3. **Date of Request**

4. **Project/Program Description**

The request is for funding to complete Phase 1 of pre-construction site work for a new Emergency Operations Center for Brevard County. Brevard County's EOC is the most frequently activated in the State of Florida, serves an area with numerous unique hazards, including space launches and landings, and is antiquated and cramped. The purpose of EOC activation is to centralize response and recovery decisions, plans, and operational activities so that the efficiency, quality, and quantity of resources achieves maximum effectiveness. The current EOC (built in 1966) was not built to accommodate today's needs, and its electrical, plumbing, and mechanical systems are aged. A 2005 property condition assessment report states: In many respects, the existing EOC has outlived its effective and functional life.

5. **State Agency to receive requested funds** 

State Agency contacted?     Yes     No

6. **Amount of the Nonrecurring Request for Fiscal Year 2020-2021**

Type of Funding	Amount
Operations	<input style="width: 80px;" type="text" value="000"/>
Fixed Capital Outlay	<input style="width: 80px;" type="text" value="1,000,000"/>
<b>Total State Funds Requested</b>	<b>1,000,000</b>

7. **Total Project Cost for Fiscal Year 2020-2021 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	<input style="width: 80px;" type="text" value="1000000"/>	<input style="width: 40px;" type="text" value="29.0"/> %
<b>Matching Funds</b>		
Federal	<input style="width: 80px;" type="text" value="718,850"/>	<input style="width: 40px;" type="text" value="21"/> %
State (excluding the amount of this request)	<input style="width: 80px;" type="text" value="367,000"/>	<input style="width: 40px;" type="text" value="11"/> %
Local	<input style="width: 80px;" type="text" value="1,000,000"/>	<input style="width: 40px;" type="text" value="30"/> %
Other	<input style="width: 80px;" type="text" value="300,000"/>	<input style="width: 40px;" type="text" value="9"/> %
<b>Total Project Costs for Fiscal Year 2020-2021</b>	<b>3,385,850</b>	<b>100</b> %

8. **Has this project previously received state funding?**     Yes     No

If yes, provide the most recent instance:

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
<input style="width: 80px;" type="text" value="2019-20"/>	<input style="width: 80px;" type="text" value="00"/>	<input style="width: 80px;" type="text" value="513,500"/>	<input style="width: 60px;" type="text" value="2669"/>	<input type="text" value="No"/>

9. **Is future-year funding likely to be requested?**     Yes     No

If yes, indicate nonrecurring amount per year.



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10. Details on how the requested state funds will be expended

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		<input type="text"/>
Other Salary and Benefits		<input type="text"/>
Expense/Equipment/Travel/Supplies/Other		<input type="text"/>
Consultants/Contracted Services/Study		<input type="text"/>
<b>Operational Costs: Other</b>		
Salary and Benefits		<input type="text"/>
Expense/Equipment/Travel/Supplies/Other		<input type="text"/>
Consultants/Contracted Services/Study		<input type="text"/>
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	A contractor will be utilized to complete the site work on the land designated for the future EOC as well as the current property. Site work must be complete before facility construction can begin.	1,000,000
<b>Total State Funds Requested (must equal total from question #6)</b>		1,000,000



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## 11. Program Performance

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

A new EOC of sufficient size and technology capacity would enable Brevard County to better provide emergency response, recovery, training, and mitigation -- all part of the county's responsibility under ch. 252, F.S., for residents and visitors of East Central Florida. The funds requested would provide for the conclusion of the site work, required before the construction phase could begin.

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

In addition to emergency communication, preparedness, response, training, recovery, and mitigation provided for all county residents and visitors, the EOC also houses the secondary 911 answering point which dispatches emergency medical response throughout the county and fire response in all unincorporated and some incorporated areas of the county.

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

same as above

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

All residents (around 600,000) and visitors (millions) of Brevard County, in addition to those populations in surrounding counties that could be affected by Brevard's hazards.

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

Protect the general public from harm, save lives, measured by statistics of lives lost during emergencies tracked in coordination with the National Weather Service.  
Also increase economic activity, by employing contractors, measured by people employed by construction contractors, tracked by the Economic Development Commission.

- 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 in the contract?

Delay reimbursement.



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12. **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.**

Brevard County

13. **Requestor Contact Information**

- a. First Name  Last Name
- b. Organization
- c. E-mail Address
- d. Phone Number  Ext.

14. **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

15. **Lobbyist Contact Information**

- a. Name
- b. Firm Name
- c. E-mail Address
- d. Phone Number  Ext.