



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2023-2024

LFIR # 2013

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The purpose of this request is to fund the rebuild of Station 102 to address the growth of the City of Clermont in that particular area and to address the burden of firefighter cancer. The current station no longer meets the needs as it relates to the demand of service due to growth. This will address inflationary costs associated with the project.

5. State Agency to receive requested funds

State Agency contacted? No

6. Amount of the Nonrecurring Request for Fiscal Year 2023-2024

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	500,000
Total State Funds Requested	500,000

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)	500,000	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	500,000	100%

8. Has this project previously received state funding? No

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. Is future funding likely to be requested? No

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?

Yes

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



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The City of Clermont has received \$19 million in COVID-19 funds for Personnel Protective Equipment (PPE) and personnel salaries for COVID-19 related sick time and backfill.

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?

05/01/2023

d. What is the estimated completion date of construction?

12/31/2023

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 Clermont.

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	Funds will be used to demolish the existing fire station, complete site work and construct the new fire station.	500,000
Total State Funds Requested (must equal total from question #6)		500,000

14. Program Performance

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

Demolition of the current facility, site work to allow a larger facility to fit on the site, and construction of the new facility.

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



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The station will be designed with the latest air handling and exchange designs and attributes that will limit mixing of living space air with truck bay air. Truck exhaust will be scrubbed and the air in the truck bay will not mix with living space air. Additionally, a room for soiled (with products of combustion or potential biohazards) bunker gear will be provided so that contained gear stays out of the living spaces while decontamination and cleaning takes place.

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

The new facility will provide the capacity to meet current and future fire/EMS/rescue response needs. Due to rapid growth, the current facility is undersized for needs of the community served. Additionally, the current station lacks many of the industry standard safety design features, including exposure of firefighters and visitors to cancer-causing carcinogens.

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

Directly, 75 firefighters that may work at this station and the 43,021 citizens of Clermont who may visit or receive care in the station. Indirectly, (43,021) citizens of Clermont who fund the City's employee insurance and Workman's Compensation plan will benefit from cost savings.

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

Continued access to effective fire, EMS, rescue, and hazardous materials response resources.

Emergency response outcomes (unit total response times, property saved, cardiac arrest conversions, etc.) are measured against the past five years of incident responses. Trends on outcomes over time are identified to determine the effectiveness of service delivery programs so that efforts and resources are focused to the continual improvement of services delivered to the public.

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?

Failure to meet the intended performance period or deliverables guidelines would result in the appropriate clawback of funds as required by the State of Florida.

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



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University or College

Other (please specify) Municipal Government

d. First Name Last Name

e. E-mail Address

f. Phone Number

17. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number