

1. Project Title

No

The Florida Senate Local Funding Initiative Request Fiscal Year 2023-2024

Delray Beach Police Department Real Time Crime Center

LFIR # 1942

| City approved Bud Downtown Develo | pment Authority to in | vest in this project. | | | |
|---|---|--|---|--|--|
| | dant and cooperation | n with the Communi | ty Redevelopment Age | encv and | |
| | | | ieu of state funding. | . 1 | |
| 9. Is future funding likely to be requested? a. If yes, indicate nonrecurring amount per year. | | | Yes 200,000 | | |
| | | | | | |
| | Recuiring | Homeouring | | | |
| Fiscal Year (уууу-уу) | Recurring | ount Nonrecurring | Specific Appropriation # | Vetoed | |
| 8. Has this project p | 1 . | | No | | |
| Total Project Cos | ts for Fiscal Year 2 | 023-2024 | 500,000 | 100% | |
| Other | | | 0 | 0% | |
| Local | | | 0 | 0% | |
| State (excluding the amount of this request) | | uest) | 0 | 0% | |
| Federal | Federal | | 0 | 0% | |
| Matching Funds | | | | | |
| Total State Funds | Requested (from que | estion #6) | 500,000 | 100% | |
| Type of Funding | TOT TISCAL TEAL 202 | 13-2024 (inicidating | Amount | Percentage | ot) |
| Total Broject Cost | | 22-2024 (including | matching funds avai | 500,000 | .04) |
| Fixed Capital Outla | | | | 500,000 | |
| Operations | | | | 500,000 | |
| Type of Funding | | | Amo | | |
| 6. Amount of the No | nrecurring Request | tor Fiscal Year 20 | 123-2024 | | |
| State Agency con | | | | | |
| 5. State Agency to re | eceive requested fu | unds Departm | ent of Law Enforceme | nt | |
| respond to in-progrenhance officer sate and effective RTC0 | ress crimes more eff fety, and further imp | iciently, collect evid rove trust within the equipment to includ | d evolving technologie ence that can aid in fo community. To accom de: video management ion software. | llow-up investigation aplish our goal of es | ns, significantly tablishing an efficient |
| 4. Project/Program [| • | 4-P | | | |
| 3. Date of Request | 02/20/2023 | | | | |
| 2. Senate Sponsor | Lori Berman | | | | |
| | | | | | |



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

Complete questions 11 and 12 for Fixed Capital Outlay Projects

| 1. Status of Construction | |
|--|--|
| a. What is the current phase of the project? | |
| OPlanning ODesign OConstruction | |
| b. Is the project "shovel ready" (i.e permitted)? | |
| c. What is the estimated start date of construction? | |
| d. What is the estimated completion date of construction? | |
| 2. List the owners of the facility to receive, directly or indirect relationship between the owners of the facility and the entire transfer of the facility to receive, directly or indirectly and the entire transfer of the facility to receive, directly or indirectly and the entire transfer of the facility to receive, directly or indirectly and the entire transfer of the facility and the entire transfer of the entire transf | |
| | |

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 | RTCC will require special equipment to include: video management software, video cameras, video storage, automatic license plate readers, and a RTCC data integration software. | 500,000 |
| Consultants/Contracted Services/Study | | 0 |
| Fixed Capital Construction/Majo | r Renovation: | |
| Construction/Renovation/Land/ Planning Engineering | | 0 |
| Total State Funds Requested (m | ust equal total from question #6) | 500,000 |

14. Program Performance

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

Our objective of this initiative is to capitalize on current and evolving technologies to reduce gun violence, property crimes, respond to in-progress crimes more efficiently, collect evidence that can aid in follow-up investigations, significantly enhance officer safety, and further improve trust within the community.

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



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The Department will utilize the equipment and software acquired to monitor the City and provide police intervention as soon as possible as well as to provide evidence to increase conviction rates of those arrested.

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

Reduced police response times and higher conviction rates of those arrested resulting in lower crime rates.

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

All residents of the City, property owners, and visitors (Delray Beach is a tourist and local dining destination) will be served by the project. In total this is 70,000 residents plus over 300,000 annual visitors.

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

Reduction in crime as measured by reportable statistics.

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?

| Nothing beyond standard penalties. |
|------------------------------------|
|------------------------------------|

| 15. Requester Contact | Informati | ion | | | |
|---------------------------------------|-----------------------------------|-----|-----------|------------|--|
| a. First Name | Joseph | | Last Name | Grammatico | |
| b. Organization | Delray Beach Police Department | | | | |
| c. E-mail Address | grammatico@mydelraybeach.com | | | | |
| d. Phone Number | (561)287-2287 Ext. | | | | |
| 16. Recipient Contact | 16. Recipient Contact Information | | | | |
| a. Organization | Delray Beach Police Department | | | | |
| b. Municipality and County Palm Beach | | | | | |
| c. Organization Ty _l | ре | | | | |
| □For Profit Entity | □For Profit Entity | | | | |
| □Non Profit 501(c | □Non Profit 501(c)(3) | | | | |
| □Non Profit 501(c)(4) | | | | | |
| ☑Local Entity | | | | | |
| □University or College | | | | | |
| □Other (please specify) | | | | | |
| d. First Name | Joseph | | Last Name | Grammatico | |
| e. E-mail Address | grammatico@mydelraybeach.com | | | | |
| f. Phone Number | (561)287-2287 | | | | |

17. Lobbyist Contact Information



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| a. Name | Mathew Forrest |
|-------------------|-------------------------|
| b. Firm Name | Ballard Partners |
| c. E-mail Address | mat@ballardpartners.com |
| d. Phone Number | (561)253-3232 |