

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

LFIR # 2322

Project Title Senate Sponsor	Corey Simon			
•				
Date of Request	02/28/2023			
Project/Program D	escription			
(department), which in rescuing victims a options to meet the	ow for the purchase of a new fire truc will allow the department to respond and removing life and property from e department's needs. The ambulance s require EMS assistance.	and perform efficiently a mergency situations; wil	and effectively. The Il provide flexibility	e fire truck will be use and a wide range of
State Agency to re	ceive requested funds Departs	ment of Financial Servic	ces	
State Agency conta	acted? No			
Amount of the Non	recurring Request for Fiscal Year 2	2023-2024		_
Type of Funding		Amou	unt	
Operations			500,000	1
Fixed Capital Outlay	<i>y</i>		0	+
			F00 000	
Total State Funds	Requested		500,000	I
Total Project Cost f	Requested for Fiscal Year 2023-2024 (including	-	lable for this proj	
Total Project Cost f	for Fiscal Year 2023-2024 (including	Amount	lable for this proj	ect)
Total Project Cost f Type of Funding Total State Funds R	•	-	lable for this proj	ect)
Total Project Cost f Type of Funding Total State Funds R Matching Funds	for Fiscal Year 2023-2024 (including	Amount 500,000	lable for this proje Percentage 100%	ect)
Total Project Cost f Type of Funding Total State Funds R Matching Funds Federal	for Fiscal Year 2023-2024 (including Requested (from question #6)	Amount 500,000	lable for this projute Percentage 100%	ect)
Total Project Cost f Type of Funding Total State Funds R Matching Funds Federal	for Fiscal Year 2023-2024 (including	Amount 500,000	lable for this proje Percentage 100%	ect)
Total Project Cost f Type of Funding Total State Funds R Matching Funds Federal State (excluding the	for Fiscal Year 2023-2024 (including Requested (from question #6)	Amount 500,000	Percentage 100% 0%	ect)
Total Project Cost f Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other	for Fiscal Year 2023-2024 (including Requested (from question #6)	Amount 500,000 0 0	Percentage 100% 0% 0% 0%	ect)
Total Project Cost f Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs	Requested (from question #6)	Amount 500,000 0 0 0 0	Percentage 100% 0% 0% 0% 0%	ect)
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Total Project Cost for Type of Funding Total State Funds Robbs Federal State (excluding the Local Other Total Project Costs Has this project professed Year (yyyy-yy)	for Fiscal Year 2023-2024 (including Requested (from question #6) amount of this request) s for Fiscal Year 2023-2024 eviously received state funding? Amount Recurring Nonrecurring	Amount	Percentage	ect)
Total Project Cost for Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project professory (yyyy-yy) Is future funding lift a. If yes, indicate not record to the second content of the second c	for Fiscal Year 2023-2024 (including equested (from question #6) amount of this request) s for Fiscal Year 2023-2024 eviously received state funding? Amount Recurring Nonrecurring kely to be requested?	Amount	Percentage	ect)
Total Project Cost for Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project professory (yyyy-yy) Is future funding lift a. If yes, indicate not record to the second content of the second c	for Fiscal Year 2023-2024 (including equested (from question #6) amount of this request) s for Fiscal Year 2023-2024 eviously received state funding? Amount Recurring Nonrecurring kely to be requested? nonrecurring amount per year.	Amount	Percentage	ect)



11. Status of Construction

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

Madison County received approximately \$3.5 million that has been used towards a variety of projects.

Complete questions 11 and 12 for Fixed Capital Outlay Projects

a. What is the current phase of the project?		
OPlanning ODesign OConstruction		
b. Is the project "shovel ready" (i.e permitted)?	No	
c. What is the estimated start date of construction?		
d. What is the estimated completion date of construction?		
12. List the owners of the facility to receive, directly or indirect relationship between the owners of the facility and the entitle.	etly, any fixed capital outlay funding. Incl ity.	ude the
Madison County, Florida.		

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	Estimate includes the cost of two heavy duty truck chassis and associated modular configuration equipment required to configure one vehicle as a fire tanker, and the other as an ambulance.	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?

It is the Madison County Fire and Rescue's (department) mission and its desire to provide quality services that citizens can expect and depend on. The vehicle will both carry a crew who provides traditional functions at structure fires and will also support equipment for various rescue scenarios, such as assisting in medical emergencies in hard-to reach places.



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The department will respond to life safety needs and provide fire and emergency medical response services.

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

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

The acquisition of a new fire truck will provide better access for Madison County Fire Rescue in response to fires. It also includes better access for disaster responses. The new pumper will also be able to respond quicker and with more versatility; will increase the potential for successful tactical outcomes; develop operational proficiency, and increase public perception for the department.

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

This project will directly serve the 18,200 residents of Madison County (County), in addition to travelers on roadways within the County. Madison County has four interchanges that serve Interstate 10, and the County's main roadway network also includes other major state roads. A new fire tanker and ambulance will allow the County to quickly respond to vehicular accidents on various roadways within the State and US highway system.

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

This project will allow Madison County's Fire Department to provide faster response times and a higher level of operational reliability during emergency calls. The effectiveness of this project may be objectively measured in reduced emergency response times, increased success at limiting a fire's spread, and fewer losses of life, especially in rural areas.

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?

Madison County will work with the contracting agency to determine applicable measures should funding be made available.

15. Requester Contact	t Informati	ion	_	
a. First Name	Sherilyn		Last Name	Pickels
b. Organization	Madison	County		
c. E-mail Address	admin@r	madisoncountyfl.	com	
d. Phone Number	(850)464	-7586	Ext.	N/A
16. Recipient Contact	Informatio	on		
a. Organization	Madison	County		
b. Municipality and	d County	Madison		
c. Organization Ty	ре			
□For Profit Entity				
□Non Profit 501(c	:)(3)			
□Non Profit 501(d	c)(4)			
☑Local Entity				
□University or Co	llege			



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□Other (please specify)

d. First Name	Allen	Last Name	Clayton
e. E-mail Address	fireco@madisoncountyfl.c	om	
f. Phone Number	(850)464-7586		

17. Lobbyist Contact Information

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a. Name	Timothy L. Parson
b. Firm Name	Liberty Partners of Tallahassee LLC
c. E-mail Address	tim@libertypartnersfl.com
d. Phone Number	(850)910-2678