



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** Public Safety Mobile Command Center Vehicle (MCCV)

2. **Senate Sponsor:** Lizbeth Benacquisto

3. **Date of Submission:** 11/17/2017

4. **Project/Program Description:**

Retrofitting the MCCV, a multipurpose vehicle, with current A/V technology to provide emergency services in the field, in real-time for incidents and events, including natural disasters under the City's Unified Command approach to incident management.

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 Law Enforcement

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 |
|---------------------------------|---|---------------------------------------|
| 176,250 | | 176,250 |

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 | 58,750 | 25.0% |
| Other | 0 | 0.0% |
| TOTAL | 58,750 | 25.0 % |

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 235,000

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?

Retrofitting the MCCV with digital capabilities and new technologies will allow the Police Department to utilize it as a fully functional mobile station. Personnel will not only be able to communicate with and work alongside, internal City Departments, they will be able to do so with other entities that include, but are not limited to: The Emergency Operation Center, fire, aviation, marine and bordering law enforcement agencies. It will allow the Department to deploy the MCCV to prepare for and respond to a wide variety of emergencies both locally, regionally and if the circumstances warranted it, on a state level.

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

The activities and services that will be provided are numerous which include, but are not limited to: mobile emergency operations center for natural disaster recovery, planned special events, active violent situations, crime scene investigations and special operations. In essence, it allows the Police Department to be completely mobile.

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 | | |



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| | | |
|---|---|---------|
| <input type="checkbox"/> Consultants/Contracted Services/Study | | |
| Operational Costs | | |
| <input type="checkbox"/> Salary and Benefits | | |
| <input checked="" type="checkbox"/> Expense/Equipment/Travel/Supplies/Other | Replace/upgrade audio/video, software and hardware technology. Update the exterior. | 235,000 |
| <input type="checkbox"/> Consultants/Contracted Services/Study | | |
| Fixed Capital Construction/Major Renovation | | |
| <input type="checkbox"/> Construction/Renovation/Land/Planning Engineering | | |
| TOTAL | | 235,000 |

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

A fully functional MCCV will allow the City to continue to provide emergency services from the field. A police presence and focal point for operations, rallying point, lost/missing persons, lost and found, and suspect detention. The MCCV provides surveillance, resource allocation, communications, and protection from the elements. Additionally, citizens are able to go to the MCCV when they have questions, concerns, need assistance and/or feel at risk.

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

General population; Potentially, surrounding cities and counties, as well as, cities and counties throughout the State in the event of a major disaster outside of Southwest Florida.

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

1.) Reduce recovery time and cost to the City, through the use of technology providing live audio/video of the devastation, thus allowing for resources to be properly allocated. This will be measured through a comparable time and cost analysis of previous natural disasters to present natural disasters. 2.) Reduce response times to save lives and reduce crime. This includes being able to respond to incidents where currently the Department does not have the ability to, due to lack of a functioning Mobile Command Center Vehicle. This will be measured by comparing response times to both current response times within the City and the national average during a disaster or catastrophe.

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?



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Possible loss of funding after a right to cure and finding alternative measures.

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.

N/A

13. Requestor Contact Information:

- a. **Name:** David Newlan
- b. **Organization:** City of Cape Coral - Police Department
- c. **Email:** dnewlan@capecoral.net
- d. **Phone Number:** (239)574-0623

14. Recipient Contact Information:

- a. **Organization:** City of Cape Coral - Police Department
- b. **County:** Lee
- c. **Organization Type:**
 - For Profit
 - Non Profit 501(c) (3)
 - Non Profit 501(c) (4)
 - Local Entity
 - University or College
 - Other (Please specify)
- d. **Contact Name:** David Newlan
- e. **E-mail Address:** dnewlan@capecoral.net
- f. **Phone Number:** (239)574-0623

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

- a. **Name:** Yeline Goin
- b. **Firm:** Becker & Poliakoff
- c. **Email:** YGOIN@BPlegal.com
- d. **Phone Number:** (407)875-0955