



# The Florida Senate

## Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** Holmes County Jail Expansion

2. **Senate Sponsor:** George Gainer

3. **Date of Submission:** 12/28/2017

4. **Project/Program Description:**

The Holmes County Jail currently has one pod that is designed to hold approximately 100 inmates. According to Holmes County Sheriff John Tate, they are routinely over capacity. Holmes County is proposing to add an additional 100 inmate pod and extend the administration portion of the jail. This expansion with a new pod will allow for the County to serve the needs of its citizens and meet State Requirements for inmate regulation. It is anticipated that this expansion will be sufficient with the expected growth over the next 20 years.

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
	2,875,000	2,875,000

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	0	0.0%
Other	0	0.0%
TOTAL	0	0.0%

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 2,875,000

9. **Previous Year Funding Details:**

a. Has funding been provided in a previous state budget for this activity? No

b. In the previous 5 fiscal years, how many years was funding provided? (Optional)

c. What is the most recent fiscal year the project was funded?



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- d. Were the funds provided in the most recent fiscal year subsequently vetoed?
- e. Complete the following Worksheet.

<b>FY:</b>	<b>Input Prior FY Appropriation for this project for FY 2017-18</b> <i>(If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)</i>		
<b>Column:</b>	<b>A</b>	<b>B</b>	<b>C</b>
<b>Funds Description:</b>	<b>Prior Year Recurring Funds *</b>	<b>Prior Year Nonrecurring Funds *</b>	<b>Total Funds Appropriated (Column A + Column B)</b>
<b>Input Amounts:</b>			

**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?**

The jail expansion will allow the Sherriff to hold more prisoners. This will open up more jobs for the citizens of Holmes County. The proposed administration area will be for the new employees that will be required to cover the additional inmates. The existing facility has holding cells directly adjacent to the check in service area where contraband is passed and poses safety issues for the guards and other inmates. The expansion will be to move the holding cells away from the check in and provide some space for administration staff that currently have no office space.

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

This project will allow the Jail staff to better meet the needs of the inmates. It will also improve the working conditions for the County Staff working at the Jail.

**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 type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation		
<input checked="" type="checkbox"/> Construction/Renovation/Land/Planning Engineering	Architectural Fees and Construction Fees	2,875,000
TOTAL		2,875,000

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

Holmes County Jail

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

The target population of this project is the Holmes County Jail staff. This project will greatly improve the working conditions for the staff. Based on the Space Needs assessment this project will serve approximately 20,000 people annually.

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

As previously mentioned, this project will benefit approximately 20,000 people annually. This project will provide better living conditions for the inmates, better working conditions for the Jail staff and an increase in revenue to Holmes County. The measurable goal here will be the increase revenue in Holmes County.

**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?**

This project is a priority of Holmes County Board of County Commissioners and the citizens of Holmes County. Once funded Holmes County Board of County Commissioners will hire a design team for the project and create a schedule with submittal deadlines that the design team must meet. Once designed the contractor will have liquidated damages built in to their contract to ensure that they remain on schedule.

**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.**

The owner of the this facility will be Holmes County.

**13. Requestor Contact Information:**

**a. Name:** Clint Erickson



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- b. **Organization:** Holmes County Board of County Commissioners
- c. **Email:** hcadmin@holmescountyfl.org
- d. **Phone Number:** (850)547-1119

### 14. Recipient Contact Information:

- a. **Organization:** Holmes County Board of County Commissioners
- b. **County:** Holmes
- 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:** Clint Erickson
- e. **E-mail Address:** hcadmin@holmescountyfl.org
- f. **Phone Number:** (850)547-1119

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

- a. **Name:** None
- b. **Firm:** None
- c. **Email:**
- d. **Phone Number:**