1. **Title of Project:** Hurricane Michael - Bay County - Building Repairs

2. **Senate Sponsor:** George Gainer

3. **Date of Submission:** 03/05/2019

4. **Project/Program Description:**
   This project is needed to provide assistance to Bay County with the cost of repairs to its buildings damaged by Hurricane Michael. Hurricane Michael significantly damaged or destroyed most of Bay County's buildings. The jail alone suffered $8,000,000 in damages. The total losses to buildings amounts to $18,000,000 and Bay County will be responsible for at least 12.5 percent of the total amount. Bay County’s ultimate responsibility depends in part on FEMA reimbursements.

5. **State Agency to receive requested funds:** Department of Economic Opportunity

6. **Amount of the Nonrecurring Request for Fiscal Year 2019-2020**

<table>
<thead>
<tr>
<th>Type of Funding</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operations</td>
<td>2,250,000</td>
</tr>
<tr>
<td>Fixed Capital Outlay</td>
<td></td>
</tr>
<tr>
<td><strong>Total State Funds Requested</strong></td>
<td><strong>2,250,000</strong></td>
</tr>
</tbody>
</table>

7. **Total Project Cost for Fiscal Year 2019-2020 (including matching funds available for this project)**

<table>
<thead>
<tr>
<th>Type of Funding</th>
<th>Amount</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total State Funds Requested (from question #6)</td>
<td>2,250,000</td>
<td>100.00%</td>
</tr>
<tr>
<td>Federal</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>State (excluding the amount of this request)</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Local</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td><strong>Total Project Costs for Fiscal Year 2019-2020</strong></td>
<td><strong>100.0%</strong></td>
<td></td>
</tr>
</tbody>
</table>

8. **Has this project previously received state funding?** No

9. **Is future-year funding likely to be requested?** No

10. **Details on how the requested state funds will be expended**

    | Spending Category | Description | Amount |
    |-------------------|-------------|--------|
    | Administrative Costs: | | |
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| Executive Director/Project Head Salary and Benefits |  |
| Other Salary and Benefits |  |
| Expense/Equipment/Travel/Supplies/Other |  |
| Consultants/Contracted Services/Study |  |

**Operational Costs:**
- **Salary and Benefits**
- **Expense/Equipment/Travel/Supplies/Other**
- **Consultants/Contracted Services/Study**

**Fixed Capital Construction/Major Renovation:**
- **Construction/Renovation/Land/Planning Engineering**
  - Most of Bay County's buildings were damaged by Hurricane Michael. Contractors will be hired to make all repairs. $2,250,000

**Total State Funds Requested (must equal total from question #6)**
- $2,250,000

11. **Program Performance:**

a. **What is the specific purpose or goal that will be achieved by the funds requested?**
   
The purpose of the requested funds is to help offset the cost of repairing all the Bay County-owned buildings that were damaged or destroyed by Hurricane Michael.

b. **What are the activities and services that will be provided to meet the intended purpose of these funds?**
   
The service provided will be the retention of contractors to conduct the needed repairs to the buildings.

c. **What are the direct services to be provided to citizens by the appropriations project?**
   
The funds will assist Bay County's citizens by repairing the buildings that are vital to the county's provision of services, including the jail and many others.

d. **Who is the target population served by this project? How many individuals are expected to be served?**
   
Bay County has a population of approximately 185,000 individuals

e. **What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?**
   
The expected benefit is that the citizens of Bay County need to have the county-owned buildings repaired to assist with their own recovery from Hurricane Michael. The completion of the building repairs will be the methodology by which to measure the outcome.

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 in the contract?**
   
The money should be used for the project intended. If not, the suggested penalty is repayment of the funds.

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.**

Bay County.
13. **Requestor Contact Information:**
   a. **Name:** Bob Majka
   b. **Organization:** Bay County
   c. **E-mail Address:** bmajka@baycountyfl.gov
   d. **Phone Number:** (850)248-8140

14. **Recipient Contact Information:**
   a. **Organization:** Bay County Board of County Commissioners
   b. **County:** Bay
   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:** Bob Majka
   e. **E-mail Address:** bmajka@baycountyfl.gov
   f. **Phone Number:** (850)248-8140

15. **Lobbyist Contact Information**
   a. **Name:** None
   b. **Firm Name:** None
   c. **E-mail Address:**
   d. **Phone Number:**