1. **Title of Project:** Hurricane Michael - Liberty County - Housing Rehabilitation Assistance

2. **Senate Sponsor:** Bill Montford

3. **Date of Submission:** 03/06/2019

4. **Project/Program Description:**
   There are individuals in Liberty County that do not qualify for any type of immediate housing rehabilitation (substantial rehabilitation) assistance (FEMA, SHIP, etc.). These people fall outside of the qualifications of said programs. Liberty County is requesting funds to meet these housing needs. As of early March 2019, the county identified ten or more individuals that could find benefit from this funding.

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

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>300,000</td>
</tr>
<tr>
<td>Fixed Capital Outlay</td>
<td></td>
</tr>
<tr>
<td><strong>Total State Funds Requested</strong></td>
<td>300,000</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>300,000</td>
<td>100.00%</td>
</tr>
<tr>
<td>Federal</td>
<td></td>
<td>0.00%</td>
</tr>
<tr>
<td>State (excluding the amount of this request)</td>
<td></td>
<td>0.00%</td>
</tr>
<tr>
<td>Local</td>
<td></td>
<td>0.00%</td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td>0.00%</td>
</tr>
<tr>
<td><strong>Total Project Costs for Fiscal Year 2019-2020</strong></td>
<td></td>
<td><strong>100.0%</strong></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 Administrative Costs: | Description | Amount |
    |----------------------------------------|-------------|--------|
    | 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
There are individuals in Liberty County that do not qualify for any type of immediate housing rehabilitation (substantial rehabilitation) assistance (FEMA, SHIP, etc.) These people fall outside of the qualifications of said programs. Liberty County is requesting funds to meet these housing needs. 300,000

Consultants/Contracted Services/Study

Fixed Capital Construction/Major Renovation:
Construction/Renovation/Land/Planning Engineering

Total State Funds Requested (must equal total from question #6) 300,000

11. Program Performance:

a. What is the specific purpose or goal that will be achieved by the funds requested?
   Substantial rehabilitation of homes that improve a person's quality of life.

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

c. What are the direct services to be provided to citizens by the appropriations project?
   Substantial home rehabilitation.

d. Who is the target population served by this project? How many individuals are expected to be served?
   The target population are those that do not qualify for state or federal housing rehabilitation assistance. As of early March 2019, the county has identified at least ten individuals that could find benefit from this funding.

e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?
   Citizen improvement of life, due to healthier and safer housing conditions. All repairs will be made to meet current building code standards.

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?
   Standard contract penalties are sufficient.

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.
   Liberty County Board of County Commissioners; homeowners in Liberty County.
The Florida Senate
Local Funding Initiative Request
Fiscal Year 2019-2020

LFIR#: 2534

13. Requestor Contact Information:
   a. Name: Kathy Brown
   b. Organization: Clerk of Court
   c. E-mail Address: kbrown@libertyclerk.com
   d. Phone Number: (850)643-2215

14. Recipient Contact Information:
   a. Organization: Liberty County Board of County Commissioners
   b. County: Liberty
   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: Kathy Brown
   e. E-mail Address: kbrown@libertyclerk.com
   f. Phone Number: (850)643-2215

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