



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2019-2020

LFIR#: 2667

**1. Title of Project:** Hurricane Michael - Wewahitchka - Dickens Annex

**2. Senate Sponsor:** Bill Montford

**3. Date of Submission:** 03/14/2019

**4. Project/Program Description:**

Dickens Annex was used as a control center during/after Hurricane Michael and really did not have sufficient room. It needs to be upgraded to have additional office space, meeting room, showers, sleeping space, commercial washer/dryer and additional storage. (\$650,000)

A potable well for self-sufficiency will allow employees assistance while they work almost 24/7 to get water/sewer utilities up and running as quickly as possible to benefit the community. (\$150,000)

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

State Agency Contacted? No

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

Type of Funding	Amount
Operations	
Fixed Capital Outlay	800,000
<b>Total State Funds Requested</b>	<b>800,000</b>

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

Type of Funding	Amount	Percent
Total State Funds Requested (from question #6)	800,000	100.00%
Federal	0	0.00%
State (excluding the amount of this request)	0	0.00%
Local	0	0.00%
Other	0	0.00%
<b>Total Project Costs for Fiscal Year 2019-2020</b>	<b>800,000</b>	<b>100.0%</b>

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

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	NonRecurring		

**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
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and		



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Benefits		
Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
<b>Operational Costs:</b>		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Construction of upgrades and improvements to Dickens Annex.	800,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>800,000</b>

**11. Program Performance:**

**a. What is the specific purpose or goal that will be achieved by the funds requested?**

Allowing employees to work more efficiently to get city services up and running as quickly as possible to benefit the community.

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

Developing scopes of work, competitive bidding, construction or installation as appropriate, and employment

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

Faster access to water/sewer services and an information base during the initial chaos of a disaster like Hurricane Michael.

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

City of Wewahitchka (population approximately 2,000 currently) and the north end of Gulf County (total population 11,000 to 12,000).

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

Faster access to water/sewer services and an information base during the initial chaos of a disaster like Hurricane Michael.

**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 penalties, bonding requirements, and state/federal license requirements should be 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.**

City of Wewahitchka.



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#### 13. Requestor Contact Information:

- a. **Name:** Cathy Simmons
- b. **Organization:** City of Wewahitchka
- c. **E-mail Address:** wewacomptroller@fairpoint.net
- d. **Phone Number:** (850)639-2605

#### 14. Recipient Contact Information:

- a. **Organization:** City of Wewahitchka
- b. **County:** Gulf
- c. **Organization Type:**
  - For Profit
  - Non Profit 501(c) (3)
  - Non Profit 501(c) (4)
  - Local Entity
  - University or College
  - Other (Please specify) municipal government
- d. **Contact Name:** Cathy Simmons
- e. **E-mail Address:** wewacomptroller@fairpoint.net
- f. **Phone Number:** (850)639-2605

#### 15. Lobbyist Contact Information

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