



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2020-2021

LFIR # 1063

1. **Project Title**
2. **Senate Sponsor**
3. **Date of Request**

4. **Project/Program Description**

The project is positioned on approximately 1.3 acres, located on the west side of Commerce Way and N.W. 146th Street in Miami Lakes. The project will consist of 6,000 square feet interior build, including furniture, fixtures and equipment. As an Age Friendly Community, the Center will be the Town's main, multi-purpose senior center, offering programs, services and amenities, including transportation; referral services; volunteer opportunities and coordination; health screenings, such as blood pressure and annual flu shots; classroom for educational classes; computer classes; Spanish courses; arts and crafts; crocheting; yoga; tai chi; and administrative offices for staff. The facility shell, estimated at \$1.2 million, was donated to the Town. Surrounding accommodations for this space include a 9.4 acres 220-unit senior living apartments and a 4.2 acres assisted living facility. Thus, the proposed Miami Lakes Senior Community Center would complement and complete this elderly community.

5. **State Agency to receive requested funds**
- State Agency contacted?     Yes     No

6. **Amount of the Nonrecurring Request for Fiscal Year 2020-2021**

Type of Funding	Amount
Operations	<input style="width: 80%;" type="text" value="000"/>
Fixed Capital Outlay	<input style="width: 80%;" type="text" value="500,000"/>
<b>Total State Funds Requested</b>	<b>500,000</b>

7. **Total Project Cost for Fiscal Year 2020-2021 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	<input style="width: 80%;" type="text" value="500000"/>	<input style="width: 80%;" type="text" value="100.0"/> %
<b>Matching Funds</b>		
Federal	<input style="width: 80%;" type="text" value="00"/>	<input style="width: 80%;" type="text" value="0"/> %
State (excluding the amount of this request)	<input style="width: 80%;" type="text" value="00"/>	<input style="width: 80%;" type="text" value="0"/> %
Local	<input style="width: 80%;" type="text" value="00"/>	<input style="width: 80%;" type="text" value="0"/> %
Other	<input style="width: 80%;" type="text" value="00"/>	<input style="width: 80%;" type="text" value="0"/> %
<b>Total Project Costs for Fiscal Year 2020-2021</b>	<b>500,000</b>	<b>100</b> %

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

If yes, provide the most recent instance:

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>

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

If yes, indicate nonrecurring amount per year.



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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 Benefits		
Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
<b>Operational Costs: Other</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	Funds will be used to renovate and complete the Town's principal, multi-purpose 6,000 square feet Senior Community Center interior build.	500,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>500,000</b>



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## 11. Program Performance

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

Currently, the Town of Miami Lakes does not have a multi-purpose community facility to accommodate its expanding senior population. There is a need to provide quality senior programming and services at a convenient and easily accessible location. The goal is to renovate and complete an ADA accessible multi-purpose senior community center to provide programs, relationship building, mental and physical stimulation, social services, connectedness to the community, and a better quality of life for the elderly population.

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

Activities and services that will be provided for seniors include free transportation via Freebee, elder care referral services, volunteer opportunities, health fairs and screenings, educational classes, computer classes, Spanish courses, arts and crafts, crocheting, yoga, and tai chi to name a few.

c. What direct services will be provided to citizens by the appropriation project?

Direct services to be provided to senior citizens by the appropriation project include educational programs, lunch bunch and bingo, mental and physical stimulation activities, social services referrals, connectedness to the community, and a better quality of life in an ADA accessible multi-purpose community center.

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

The target population to be served are the Miami Lakes senior and elderly community. The project is expected to serve over 7,000 seniors.

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

The expected outcome will be the renovation and completion of the senior community center. The expected benefit will be an enhanced quality of life for the senior population. The project outcome will be measured by the completed deliverables outlined in the scope of work, including a completion certification signed by a professional engineer.

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?

No payment will be made for a request for reimbursement which does not include an updated summary of the project, dated invoices, checks paid by the contracting agency, and proof of payments via copies of deposited checks.



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12. **The owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.**

Self. The facility shell, estimated at \$1.2 million, will be donated to the Town by The Grahams Companies.

13. **Requestor Contact Information**

- a. First Name  Last Name
- b. Organization
- c. E-mail Address
- d. Phone Number  Ext.

14. **Recipient Contact Information**

- a. Organization
- b. Municipality and County
- c. Organization Type
- For-profit Entity
  - Non-Profit 501(c) (3)
  - Non-Profit 501(c) (4)
  - Local Entity
  - University or College
  - Other (please specify)
- d. First Name  Last Name
- e. E-mail Address
- f. Phone Number

15. **Lobbyist Contact Information**

- a. Name
- b. Firm Name
- c. E-mail Address
- d. Phone Number  Ext.