

LFIR # 1990

- 1. **Project Title** Wind Mitigation Studies Branch Libraries and Community Centers Leon
- 2. Senate Sponsor Bill Montford
- 3. Date of Request 12/02/2019

4. **Project/Program Description**

This project requests funding support to conduct wind mitigation studies for facilities that Leon County utilizes to support disaster response and recovery operations. Wind mitigation studies will identify improvements needed to enhance these facilities' resilience during future natural disasters.

5. State Agency to receive requested funds

Executive Office of the Governor

State Agency contacted?

Yes
No

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

Type of Funding	Amount	
Operations	000	
Fixed Capital Outlay	200,000	
Total State Funds Requested	200,000	

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)	200000	100.0 %	
Matching Funds			
Federal	00	0 %	
State (excluding the amount of this request)	00	0 %	
Local	00	0 %	
Other	00	0 %	
Total Project Costs for Fiscal Year 2020-2021	200,000	100 %	

8. Has this project previously received state funding? \bigcirc Yes \odot No

If yes, provide the most recent instance:

Fiscal Year	Amount		Specific	
(уууу-уу)	Recurring	Nonrecurring	Appropriation #	Vetoed

9. Is future-year funding likely to be requested? O Yes O 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
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		
Other Salary and Benefits		
Expense/Equipment/ Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Operational Costs: Oth	er	
Salary and Benefits		
Expense/Equipment/ Travel/Supplies/Other		
Consultants/Contracted Services/Study	Conduct wind mitigation studies for nine Leon County facilities.	200,000
Fixed Capital Construc	tion/Major Renovation:	
Construction/Renovation/ Land/Planning Engineering		
Total State Funds Re	equested (must equal total from question #6)	200,000



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11. Program Performance

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

This project seeks to identify physical improvements needed to enhance these facilities' resilience to future natural disasters. These facilities, which are located all areas of the community including urbanized areas as well as outlying rural areas, can be used as recovery centers, points of distribution for water and supplies, logistical staging areas, or for other uses as described in the county's Comprehensive Emergency Management Plan.

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

Wind mitigation studies.

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

This project will identify physical improvements to enhance the disaster resilience of critical Leon County facilities that are utilized to support preparedness, response, and recovery operations.

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

This project will benefit all residents and potential evacuees to Leon County.

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

Completed wind mitigation studies.

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?

Deobligation of funds.



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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.

	Leon County		
13.	Re	equestor Contact	t Information
	a.	First Name	Andrew Last Name Johnson
	b.	Organization	Leon County Government
	C.	E-mail Address	JohnsonAn@leoncountyfl.gov
	d.	Phone Number	(850)606-5383 Ext.
14.	Re	cipient Contact	Information
	a.	Organization	Leon County Government
	b.	Municipality and	County Leon
	C.	Organization Typ	pe
		O For-profit E	intity
		O Non-Profit \$	501(c) (3)
		O Non-Profit &	501(c) (4)
		Local Entity	/
		O University of	or College
		Other (plea	ise specify)
	d.	First Name	Andrew Last Name Johnson
	e.	E-mail Address	JohnsonAn@leoncountyfl.gov
	f.	Phone Number	(850)6065383
15.	Lo	obbyist Contact I	Information
	a.	Name	Jeff Sharkey
	b.	Firm Name	Capitol Alliance Group
	C.	E-mail Address	jeff@capitolalliancegroup.com

d. Phone Number (850)2241660

Ext.