

LFIR # 2490

- **Project Title** 1. Tampa Hillsborough Homeless Initiative - Shared Housing
- 2. **Senate Sponsor** Darryl Rouson
- 3. Date of Request 01/14/2020

4. **Project/Program Description**

The funds will be used to financially support the goals of the Tampa Hillsborough Homeless Initiative and to create housing opportunities for persons emerging from homelessness by constructing or rehabilitating rental properties or accessory dwelling units (ADU). The funds will create construction training and jobs for persons that are unemployed and/or have faced previous employment barriers. This project will create economic stability and growth for residents purchasing the rental properties or ADUs.

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

○ Yes ● No State Agency contacted?

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

| Type of Funding | Amount | |
|-----------------------------|-----------|--|
| Operations | 350,000 | |
| Fixed Capital Outlay | 3,150,000 | |
| Total State Funds Requested | 3,500,000 | |

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) | 3500000 | 47.0 % | |
| Matching Funds | | | |
| Federal | 00 | 0 % | |
| State (excluding the amount of this request) | 00 | 0 % | |
| Local | 4,000,000 | 53 % | |
| Other | 00 | 0 % | |
| Total Project Costs for Fiscal Year 2020-2021 | 7,500,000 | 100 % | |

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

If yes, provide the most recent instance:

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

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 |
|--|--|-----------|
| Administrative Costs: | | |
| Executive Director/Project Head Salary and Benefits | 1% of the requested funds for Executive Director/CEO salary and benefits (\$3,500,000 x 1% = \$35,000) | 35,000 |
| Other Salary and Benefits | 4% of the requested funds for other salaries and benefits (\$3,500,000 x 4% = \$140,000) | 140,000 |
| Expense/Equipment/ Travel/Supplies/Other | | |
| Consultants/Contracted Services/Study | 5% of the requested funds for consultants/contracted services/study (\$3,500,000 x 5% = \$175,000) | 175,000 |
| Operational Costs: Oth Salary and Benefits | ner | |
| Expense/Equipment/ Travel/Supplies/Other | | |
| Consultants/Contracted | | |
| Services/Study | | |
| Fixed Capital Construc | tion/Major Renovation: | |
| Construction/Renovation/ Land/Planning Engineering | 25 units at \$126,000 each | 3,150,000 |
| Total State Funds Re | equested (must equal total from question #6) | 3,500,000 |



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11. Program Performance

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

The goal is to increase the number of affordable units for people emerging from homelessness. This includes engaging community residents and partners to improve housing stock and economic opportunities by developing and owning ADUs, rehabilitating foreclosed properties, and purchasing rental properties.

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

The project will create housing opportunities for persons emerging from homelessness. This project will create construction training and jobs for persons that are unemployed and/or have faced previous employment barriers. The project will create economic stability and growth to residents purchasing the rental properties or ADUs.

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

The creation of housing opportunities, construction training, and jobs. Additionally, the funds will assist in creating economic stability and growth to residents purchasing rental properties or ADUs.

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

Elderly persons; persons with poor mental/physical health; jobless persons; economically disadvantaged persons; homeless; developmentally/physically disabled persons; currently or formerly incarcerated. 101-200 people are expected to be served.

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

The construction/rehab of 25 units will result in the reduction of the homeless population by 50 people or more.

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?

Hillsborough County has standard safeguards in place; however, provided there are unforeseen circumstances, negotiations will be made with the agency.



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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.

The owners will be the persons who were awarded funding from Tampa Hillsborough Homeless Initiative. However, THHI will have a 10-15 year recapture/lien on each property.

13. Requestor Contact Information

| | a. | First Name | Antoinette | Last Name | Hayes-Triplett |
|-----|----|------------------|----------------------------------|-----------|----------------|
| | b. | Organization | Tampa Hillsborough Homeless Init | iative | |
| | C. | E-mail Address | tripletta@thhi.org | | |
| | d. | Phone Number | (813)274-6998 | Ext. | |
| 14. | Re | cipient Contact | Information | | |
| | a. | Organization | Tampa Hillsborough Homeless Init | iative | |
| | b. | Municipality and | County Hillsborough | | |
| | c. | Organization Typ | De | | |
| | | O For-profit E | ntity | | |
| | | O Non-Profit & | 501(c) (3) | | |
| | | O Non-Profit s | 501(c) (4) | | |
| | | O Local Entity | , | | |
| | | O University of | or College | | |
| | | Other (plea | se specify)Non Profit 501(c) (3) | | |
| | d. | First Name | Antoinette | Last Name | Hayes-Triplett |
| | e. | E-mail Address | tripletta@thhi.org | | |
| | f. | Phone Number | (813)2746998 | | |
| 15. | Lo | bbyist Contact I | nformation | | |
| | a. | Name | Jim Taylor | | |
| | b. | Firm Name | Hillsborough County | | |
| | c. | E-mail Address | taylorj@hillsboroughcounty.org | | |
| | d. | Phone Number | (813)2746789 | Ext. | |