

LFIR # 2557

Project Title	Cedar Hammock Fire Control District Regional Training Tower					
Senate Sponsor	Joe Gruters					
Date of Request	01/29/2020					
Project/Program	Description					
as provide a training p without taking local re	Training Tower for use by area fire depa prop for technical rescue for local and stat sources out of their general service areas proposed multi-story structures.	e resources. This location	will allow for re-occurring training	oppo		
State Agency to		artment of Financial S	ervices			
State Agency conf						
	onrecurring Request for Fiscal		ı			
Type of Funding		Amount				
Operations		000				
Fixed Capital Ou	ıtlay	1,000,000				
Total State Fun	ds Requested	1,000,000				
otal Project Cos	et for Fiscal Year 2020-2021 (inc	cluding matching fu	nds available for this pro	iect		
Type of Funding	g	Amount	Percentage			
Total State Fund	s Requested (from question #6)	1000000	100.0 %			
Matching Funds	5					
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		1,000,000	100 %			
	previously received state fundi most recent instance:					
		Spec Appropr	iation # Vetoed			
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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		
Fixed Capital Construc	tion/Major Renovation:	
Construction/Renovation/ Land/Planning	Construction of four story Training Tower	1,000,000
Engineering		
Total State Funds Re	quested (must equal total from question #6)	1,000,000



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<ol> <li>Program Performanc</li> </ol>	е
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1.	Program Performance			
a.	What specific purpose or goal will be achieved by the funds requested?			
	Provide a Fire Service Training Tower for use by area fire departments to train on structure fire response to multi-story structures as well as provide a training prop for technical rescue for local and state resources.			
b.	What activities and services will be provided to meet the intended purpose of these funds?			
	Construction of four story Training Tower.			
C.	What direct services will be provided to citizens by the appropriation project?			
	Insurance Services Office (ISO) qualified training. Staffing, training, and proximity of the fire department make up 50% of the rating.			
d.	Who is the target population served by this project? How many individuals are expected to be served?			
	Citizens of the counties that will train on the new tower.			
e.	What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?			
	Training of fire service personnel that will directly benefit the public served. There is not a ISO approved training tower available that will not cause additional payroll costs due to backfill coverage while the on duty firefighters travel to more distant locations to train. This location also provides for more mutual aid training for surrounding fire agencies which regularly respond together. The tower will also provide a better training opportunity to two Light Technical Rescue Teams which are state resources.			
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?			
	Return of funds.			



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	edai Hallillock File	Control District will build the tower.			
Re	equestor Contact	Information			
a.	First Name	Jeffrey	Last Name	Hoyle	
b.	Organization	Cedar Hammock Fire Control D	istrict		
C.	E-mail Address	jhoyle@chfr.org			
d.	Phone Number	(941)727-2070	Ext.		
Re	ecipient Contact	Information			
a.	Organization	Cedar Hammock Fire Control D	istrict		
b.	Municipality and	d County Manatee			
c.	Organization Typ	oe			
	For-profit E				
	Non-Profit	•			
	Non-Profit 5	501(c) (4)			
	<ul><li>Local Entity</li></ul>				
	O University of	or College			
	Other (plea	se specify)			
d.	First Name	Jeffrey	Last Name	Hoyle	
e.	E-mail Address	hoyle@chfr.org			
	Phone Number				
Lo	obbyist Contact I	nformation			
a.	Name	David Rama			
b.	Firm Name	Ramba Consulting Group			
		david@rambaconsulting.com			