



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2021-2022

LFIR # 1379

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

4. **Project/Program Description**

The town commissioned a study to determine the cost effectiveness of establishing their own Police Dept. The outcome showed that there would be a significant financial savings and the ability to provide for improved life, health protective services for its citizens and creating approx. 20 jobs in this financially disadvantaged community. The town has been contracting with the Broward Sheriff Dept. for law enforcement services, but costs have increased significantly over time. Funds requested are to be used for appropriate operational equipment and tools needed by law enforcement, i.e., radios, firearms, ballistic shields/helmets, body armor, stop sticks, uniforms, regional dispatch, computers, vehicles, RMS, AXON, etc.

5. **State Agency to receive requested funds**
- State Agency contacted?**

6. **Amount of the Nonrecurring Request for Fiscal Year 2021-2022**

Type of Funding	Amount
Operations	500,000
Fixed Capital Outlay	0
Total State Funds Requested	500,000

7. **Total Project Cost for Fiscal Year 2021-2022 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	500,000	33%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	998,500	67%
Other	0	0%
Total Project Costs for Fiscal Year 2021-2022	1,498,500	100%

8. **Has this project previously received state funding?**

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

9. **Is future funding likely to be requested?**

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

10. **Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?**



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2021-2022

LFIR # 1379

Yes

If yes, indicate the amount of funds received and what the funds were used for.

COVID-19 expenses to be reimbursed by Broward County. Expenditures as of 12/15/20 were \$57,000 and by end of Dec. estimated to be \$65,000 for hosting food giveaway drives, COVID-19 hardening of town owned facilities/properties; purchase of sanitizing equipment and supplies, required social distancing modifications made to facilities; PPE, equipment and software required to work and meet remotely, etc.

11. Details on how the requested state funds will be expended

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other	Operational start-up equipment and tools for municipal police department and law enforcement - i.e., radios, firearms, ballistic shields/helmets, body armor, stop sticks, uniforms, computers, regional dispatch, vehicles, RMS, AXON, etc.	500,000
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		500,000

12. Program Performance

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

The goal is to provide cost effective law enforcement services and to improve services to citizens. Funds requested will provide the necessary start-up equipment and tools needed for establishing a municipal police department, i.e., radios, firearms, ballistic shields/helmets, body armor, stop sticks, uniforms, regional dispatch, computers, vehicles, RMS, AXON, etc. Approximately 20 jobs will be created in this financially disadvantaged community.

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

Purchase of first responder law enforcement required equipment and necessary tools needed for law enforcement personnel and for establishing a local police department to better protect and serve its citizenry.

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

Direct services provided to its citizens are providing cost-effect first responder law enforcement services to better protect the citizenry and general public in the Town of Pembroke Park, which is a fiscally constrained municipality.

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

General Public; Individuals expected to serve are greater than 6,749 due the increase of the winter residents and tourist populations.

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



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2021-2022

LFIR # 1379

be measured?

The expected benefit is to provide cost effective law enforcement services for better protection and safety of citizenry and to provide the appropriate tools and equipment for first responders law enforcement personnel to perform their duties and approximately 20 new jobs will be created in this financially disadvantaged municipality.

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 the contract?

There are no anticipated and/or suggested penalties for failure to meet deliverables or performance measures.

13. 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.

Town of Pembroke Park is the owner and the entity.



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2021-2022

LFIR # 1379

14. Requestor Contact Information

a. First Name Last Name

b. Organization

c. E-mail Address

d. Phone Number Ext.

15. 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

16. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number