

LFIR # 1563

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State (excluding the am			Τ	0	00/	
				0	0%	
	ount of this requ	est)		5,000	<u>0%</u> 9%	
Other				0	0%	
	- Fig. 1 Var. 00	04 0000				
Total Project Costs for	r Fiscai Year 20	21-2022		55,000	100%	
Has this project previo	ously received s	state funding	?	No		
Fiscal Year	Amount Recurring Nonrecurring			Specific	Vetoed	
(уууу-уу)			ing	Appropriation #		
la fotoma fomalina libralo	. 40 ho "0"	.d0		No		
Is future funding likely	•			No		
a. If yes, indicate nonr	ecurring amour	nt per year.				
b. Describe the source	of funding that	t can be use	d in li	eu of state funding.		
				-		
). Has the entity reques	ting this projec	t received ar	ny fed	leral assistance rela	ted to the COVID-19 pa	
Yes						
If yes, indicate the am						



LFIR # 1563

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		0			
Consultants/Contracted Services/Study		0			
Fixed Capital Construction/Majo	r Renovation:				
Construction/Renovation/Land/ Planning Engineering	Purchase and installation of solar security lighting	50,000			
Total State Funds Requested (must equal total from question #6)					

12. Program Performance

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

The goal is to provide protection and safe passage through the Town owned Community Garden with the installation of the solar security lighting.

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

Funds will be used to purchase and install solar security lighting per the Town's procurement policy and procedures.

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

Protection and safety of the citizenry, general public and Town-owned property 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 - 4,000+ individuals 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?

Provides for safety and protection of citizenry and Town assets.

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?

implementation of a corrective action plan; non payment of invoices until milestones are achieved



LFIR # 1563

13.	The owners of the facility	y to receive, o	directly or ir	ndirectly, any	fixed capital	outlay funding.	Include the
	relationship between the	owners of the	ne facility an	d the entity.	-	_	

Town of Pembroke Park is the owner and the entity



LFIR # 1563

14.	14. Requestor Contact Information							
	a. First Name	JC Last Name Jimenez						
	b. Organization	Town of Pembroke Park						
	c. E-mail Address	jcjimenez@tppfl.gov						
	d. Phone Number	(954)966-4600 Ext.						
15.	15. Recipient Contact Information							
	a. Organization	Town of Pembroke Park						
	b. Municipality and County Broward							
	c. Organization Type							
	□For Profit Entity	For Profit Entity						
	□Non Profit 501(c	O1(c)(3)						
	□Non Profit 501(c)(4)							
	☑Local Entity							
	□University or College							
	□Other (please specify)							
	d. First Name	Myriam		Last Name	Jacques			
	e. E-mail Address	mjacques@tppfl.gov						
	f. Phone Number	(954)966-4600						
16								
10.	6. Lobbyist Contact Information a. Name Connie Carpenter Vanassche							
		Connie Carpenter Vanassche						
	b. Firm Name	CAS Governmental Services LLC						
	c. E-mail Address	ccvgovser@gmail.com						
	d. Phone Number	(561)924-7702						