



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2021-2022

LFIR # 2132

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

#### 4. Project/Program Description

The Liberty County Sheriff's Office (LCSO) is requesting a non-recurring appropriation in the amount of \$250,000.00 for construction of additional space for the Liberty County Jail. Funding from this appropriation would be used for the planning, design and construction of an addition to the existing facility which would contain a mental health housing area as well as a classroom area to facilitate educational opportunities, drug and alcohol abuse counseling, anger management courses, and domestic violence prevention programs. Creating an area to facilitate these activities is essential to improving an inmate's opportunity to become productive members of the community upon their release. Additionally, funds from this appropriation would be used to expand the existing Liberty County Jail inmate recreation area, and create a secure area for law enforcement officials arriving or departing from the jail with inmates.

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	0
Fixed Capital Outlay	250,000
<b>Total State Funds Requested</b>	<b>250,000</b>

#### 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)	250,000	100%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2021-2022</b>	<b>250,000</b>	<b>100%</b>

8. Has this project previously received state funding?

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2020-21		250,000	1223A	Yes

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?



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No

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

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

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering		250,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>250,000</b>

#### 12. Program Performance

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

Planning, engineering, design, and construction of an addition to the existing Liberty County Jail to include a mental health housing area and classroom. Planning, design, and construction of expansion of existing Liberty County Jail inmate recreation area. Planning, design, and construction of secure arrival and departure area for law enforcement officials arriving or departing with inmates.

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

If funds are appropriated the LCSO will contract to complete the planning, engineering, design, and construction of an addition to the existing structure to house a mental health housing area and classroom. LCSO will also contract to complete the planning, design, and construction of an addition to the existing inmate recreation area as well as the creation of a secured area for law enforcement officials arriving or departing with inmates. Completion of these projects will be considered meeting the purpose of this funding.

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

Citizens will be better served by improved facilities at the Liberty County Jail. Specifically, this project will create a safer, more secure, and more positive environment, which will lead to less liability on the county and vicariously upon the tax payers of Liberty County. Additionally, a environment encouraging the recovery and improvement of those incarcerated within the jail to increase the probability they are able to become productive and contributing members of the community upon their release.

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

The target population to be served by this project includes the citizens, visitors and businesses operating in or traveling through Liberty County. On a daily basis, this project would serve approximately 8,242 individuals. Additionally, the inmate population of the Liberty County Jail, which averages 86 per day, would be better served as a result of this project.

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



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be measured?

The expected benefit of this project will be the creation of a space within the Liberty County Jail for the safe housing of inmates experiencing a mental health crisis, a classroom area for inmate education and recovery programs, an expanded inmate recreation area, and the creation of a secure area the receiving and releasing of inmates to and from law enforcement officers. Upon the completion of these goals, we anticipate a more secure jail facility, with improved safety for our staff and inmates, and a better environment fostering continuous individual improvement of inmates through education, counseling, and rehabilitation.

**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?**

Forfeiture of remaining funds from this appropriation. Repayment of funds already expended associated with this appropriation.

**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.**



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#### 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