

The Florida Senate Local Funding Initiative Request Fiscal Year 2022-2023

LFIR # 1192

1. Project Title Miami Gardens Neighborhood Watch, Inc

2. Senate Sponsor Shevrin Jones

3. Date of Request 11/03/2021

4. Project/Program Description

Our purpose is to take action to minimize and help resolve the ongoing crime incidents throughout our city of Miami Gardens by providing 1500 warning signs throughout the City letting the criminals beware that they are under continuous surveillance by our community. Secondly, to provide 2,000 ring cameras to our elderly, developmentally & physically disabled residents and victims of crime within the City of Miami Gardens.

5. State Agency to receive requested funds

Department of Law Enforcement

State Agency contacted? No

6. Amount of the Nonrecurring Request for Fiscal Year 2022-2023

Type of Funding	Amount
Operations	516,780
Fixed Capital Outlay	0
Total State Funds Requested	516,780

7. Total Project Cost for Fiscal Year 2022-2023 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	516,780	100%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
Total Project Costs for Fiscal Year 2022-2023	516,780	100%

8. Has this project previously received state funding? No

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

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?

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
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	Project Administrator	30,000
Other Salary and Benefits	Each of our 12 member group would be given a \$5,000.00 subvention to assist in the distribution and administration in their subjective areas	60,000
Expense/Equipment/Travel/Supplies/ Dther 1,500 Metal Signs @ \$18.35 each = \$27,525.00, 1,500 Metal poles @ \$36.45 each = \$54,675.00; 2,000 Ring cameras @ \$99.99 each = \$199,980.00, warehousing fo 1 yr = \$21,000.00, utilities for 1 yr = \$3,600.00, miscellaneous \$15,000.00; total =\$ \$321,780.00		321,780
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits	Installation cost @ \$15.00 per hour for two persons for 3,500 hours = \$105,000.00	105,000
Expense/Equipment/Travel/Supplies/ Other		0
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering		0
Total State Funds Requested (m	ust equal total from question #6)	516,780

12. Program Performance

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

The continued crimes reported in the local media and on social media, often times gives Miami Gardens the nickname Murder Gardens, and is very damaging to the image of our tourism industry. With the upcoming Formula 1, Tennis Tournament, Jazz, NFL games, future Super Bowls, shopping and the ability recreate within the, we want to change that image and provide comfort & safety for our residents and tourists.,

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

The activities and services would be through our twelve members that makes up the Miami Gardens Neighborhood Watch, Inc during their monthly meetings to apprise and engage our community and helping to build capacity to be the watchful eyes and ears as a deterrent of crimes in our community.

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

The 2,000 camera would be given out to our elders, developmentally & physically disabled residents and victims of crime with the City of Miami Gardens and the signage posted throughout the City will hopefully serve as a dual purpose in deterring crime and also able to assist our law enforcement officers in solving crimes within the City.

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

Our targeted population are residents who are elderly, developmentally & physically disabled, and victims of crime within and around the City of Miami Gardens.

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



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With providing a means to assist our targeted population and our measurable benefit will be determined through pre and post surveys regarding our public saftey. We would also collect data from our Crime Watch & Neighborhood watch groups members and encouraging greater participation in our various organizations.

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?

The return of all funding as given by the state if we fail to implement the project as promised.

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.

The Miami Gardens Neighborhood Watch, Inc, serves as an umbrella organization of which the twelve members comprised the board of directors, the member organizations would then be the immediate supervisors for the distributions and implementation of the project.



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14. Requestor Contact Information

	a. First Name	Francis		Last Name	Ragoo	
	b. Organization	Miami Gardens Neighborhood Watch, Inc				
	c. E-mail Address	fragoore@aol.com				
	d. Phone Number	r (786)286-6166 Ext.				
15.	5. Recipient Contact Information					
	a. Organization	Miami Gardens Neighborhood Watch, Inc				
	b. Municipality and	l County	Miami-Dade			
	c. Organization Type					
	□For Profit Entity					
	☑Non Profit 501(c)(3)					
	□Non Profit 501(c	501(c)(4)				
	□Local Entity					
	□University or Co	ollege				
	□Other (please sp	specify)				
	d. First Name	Francis		Last Name	Ragoo	
	e. E-mail Address	fragoore@aol.com				
	f. Phone Number					
16.	16. Lobbyist Contact Information					
	a. Name	None				
	b. Firm Name	None				
	c. E-mail Address					
	d. Phone Number					