

LFIR # 1800

_	complete HVAC failu	ures, which can resu	ılt in loss of ability	ampus. In addition, HVA y to provide services to	students.	ures could result in
Э.	State Agency to red State Agency conta	•	ius Depart	ment of Education		
	•					
6.	Amount of the Non	recurring Request	for Fiscal Year 2	2022-2023		
	Type of Funding			Amo	unt	
	Operations				0	
	Fixed Capital Outlay				900,000	
	Total State Funds I	Requestea			900,000	
	Total Project Cost f	or Fiscal Year 2022	2-2023 (includin	g matching funds avai	lable for this proje	ect)
7.						
7.	Type of Funding			Amount	Percentage	
7.	-	equested (from que	stion #6)	Amount 900,000	Percentage 75%	
7.	Type of Funding	equested (from que	stion #6)		_	
7.	Type of Funding Total State Funds R	equested (from que	stion #6)		_	
7.	Type of Funding Total State Funds R Matching Funds			900,000	75%	
7.	Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local			900,000	75% 0% 0% 25%	
7.	Type of Funding Total State Funds R Matching Funds Federal State (excluding the			900,000	75% 0% 0%	
7.	Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local	amount of this requ	est)	900,000 0 0 300,000	75% 0% 0% 25%	
	Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other	amount of this requ	est) 22-2023	900,000 0 300,000 0	75% 0% 0% 25% 0%	
	Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project pro	amount of this requ	est) 22-2023 state funding?	900,000 0 300,000 0 1,200,000 No Specific	75% 0% 0% 25% 0%	
	Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project pro	amount of this requestions for Fiscal Year 20 eviously received s	est) 22-2023 state funding?	900,000 0 300,000 0 1,200,000	75% 0% 0% 25% 0% 100%	
	Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project pro	amount of this requestions for Fiscal Year 20 eviously received s	est) 22-2023 state funding?	900,000 0 300,000 0 1,200,000 No Specific	75% 0% 0% 25% 0% 100%	
8.	Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project pro	amount of this request for Fiscal Year 20 eviously received services Amo	est) 22-2023 state funding? unt Nonrecurring	900,000 0 300,000 0 1,200,000 No Specific Appropriation #	75% 0% 0% 25% 0% 100%	
8.	Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project pro	amount of this request for Fiscal Year 20 eviously received services Amo	est) 22-2023 state funding? unt Nonrecurring	900,000 0 300,000 0 1,200,000 No Specific	75% 0% 0% 25% 0% 100%	
8.	Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project pro	amount of this requested amount of this reques	est) 22-2023 state funding? unt Nonrecurring	900,000 0 300,000 0 1,200,000 No Specific Appropriation #	75% 0% 0% 25% 0% 100%	
8	Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project pro Fiscal Year (уууу-уу) Is future funding lil a. If yes, indicate n	amount of this requested services for Fiscal Year 20 evicusly received services Amore Recurring services to be requested on recurring amounts.	est) 22-2023 state funding? unt Nonrecurring d? nt per year.	900,000 0 300,000 0 1,200,000 No Specific Appropriation #	75% 0% 0% 25% 0% 100%	



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

HEERF Funds - used for emergency financial aid grants to students. Funds also used for safety of students and to advance College capabilities to offer online education.

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	Third-Party Contracted Services to replace control systems for lighting and HVAC systems at NFC Campus.	900,000		
Fixed Capital Construction/Majo	r Renovation:			
Construction/Renovation/Land/ Planning Engineering		0		
Total State Funds Requested (m	ust equal total from question #6)	900,000		

12. Program Performance

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

Control systems for lighting and HVAC systems at North Florida College are obsolete. When failures occur, the College is limited to Ebay and other refurbished replacement parts and control panels. This represents a safety concern for students, as the lighting system outages occur frequently on the campus. In addition, HVAC control panel failures could result in complete HVAC failures, which can result in loss of ability to provide services to students.

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

A third-party provider will install and replace existing control systems for lighting and HVAC systems at the North Florida Campus.

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

Safety concern for students attending the North Florida College

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

College students are the target population. Approximately 1,200 students per semester will benefit from this project.

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

Safety and operational HVAC systems at the College.

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?

None		
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relationship between the owners of the facility and the entity.

13. The owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the

College property	



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14	14. Requestor Contact Information						
	a. First Name	John		Last Name	Grosskopf		
	b. Organization	North Florida College					
	c. E-mail Address	grosskop	grosskopfj@nfc.edu				
	d. Phone Number (850)973-1601 Ext.						
15. Recipient Contact Information							
	a. Organization	North Flo	rida College				
	b. Municipality and County Madison						
	c. Organization Ty	ре					
	□For Profit Entity						
	□Non Profit 501(c	ofit 501(c)(3)					
	□Non Profit 501(c)(4)						
	□Local Entity						
	☑University or College						
	□Other (please specify)						
	d. First Name	Micah		Last Name	Rodgers		
	e. E-mail Address	rodgersm@nfc.edu					
	f. Phone Number						
16	16. Lobbyist Contact Information						
	a. Name	None					
	b. Firm Name	None					
	c. E-mail Address	i					
	d. Phone Number						