



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2022-2023

LFIR # 2251

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

## 4. Project/Program Description

Funds will be used to procure a Mobile Command Center for the City's Public Safety and Emergency Management personnel. A Mobile Command Center is a critical resource for the City's response to disasters, large-scale emergencies, and other major incidents. The current Mobile Command Center is almost 14 years old.

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

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

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

## 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)	500,000	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 2022-2023</b>	<b>500,000</b>	<b>100%</b>

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?

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



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\$14.9 million towards construction of a water treatment plant.

#### 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	Mobile Command Center	500,000
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering		0
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>500,000</b>

#### 12. Program Performance

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

The goal is to provide a command center for law enforcement and emergency responders to timely respond to emergency calls.

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

The Mobile Command Center will be used to provide emergency services to the citizens during various disasters and major incidents.

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

Government services related to disasters and major incidents will be delivered to citizens at various locations within the community by way of the Mobile Command Center. Elderly citizens and those with special needs will be provided access to government during disasters by responding to neighborhoods with the Mobile Command Center.

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

City of Riviera Beach, 33,000+

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

Increase the resources available to first responders at the scene of disasters and other major incidents, which will lead to enhanced services to citizens and victims of crime.

##### 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?

Funding to be withheld if deliverables not met.



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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.

City of Riviera Beach



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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