

1. Project Title

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

Bradford County Fire Rescue - Heilbronn Springs Fire Station and Training Facility - Phase II

LFIR # 2629

State (excluding the amount of this request) 0	fire station/administration fire station will also house rovision of 24/7 fire and nty and the surrounding
Provides an appropriation for the Bradford County Fire Rescue - Heilbronn Springs Fire Station Phase II. Funding will allow Bradford County to complete the construction/enhancement of a new and training facility for the delivery of fire rescue services. The renovated and newly constructed on-duty firefighters/paramedics/EMTs as well as fire administrative staff and will provide for the pemergency response services as well as a necessary educational and training facility for the couregion. 5. State Agency to receive requested funds Department of Financial Services State Agency contacted? Yes 5. Amount of the Nonrecurring Request for Fiscal Year 2022-2023 Type of Funding Amount Operations Fixed Capital Outlay Total State Funds Requested 7. Total Project Cost for Fiscal Year 2022-2023 (including matching funds available for this percentage) Type of Funding Amount Percentage Total State Funds Requested (from question #6) 850,000 100 Matching Funds Federal O State (excluding the amount of this request)	fire station/administration fire station will also house rovision of 24/7 fire and nty and the surrounding
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2004	<u>%</u>
Other 0	%
Total Project Costs for Fiscal Year 2022-2023 850,000	%
B. Has this project previously received state funding? Yes	
Fiscal Year Amount Specific Vetoed (yyyy-yy) Recurring Nonrecurring Appropriation #	
(yyyy-yy) Recurring Nonrecurring Appropriation # 2020-21 0 850,000 2424A No	7
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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 COV	



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Yes

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

CARES ACT \$4.6 million (public health and safety, payroll with a small amount used for individual and business); ARP Funds \$5.7 million (waiting on those funds; waiting on rule to see how to distribute the funds.)

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

Spending Category	Description			
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	The existing fire station will be renovated and expanded to include living space with sleeping quarters, kitchen and restroom facilities, office space, enhancement of the current apparatus bay and training facilities.	850,000		
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?

Funding will allow Bradford County to complete the construction/enhancement of a new fire station/administration and training facility for the delivery of fire rescue services. The renovated and newly constructed fire station will also house onduty firefighters/paramedics/EMTs as well as fire administrative staff and will provide for the provision of 24/7 fire and emergency response services as well as a necessary educational and training facility for the county and the surrounding region.

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

The renovated and newly constructed facility will provide and allow for the provision of enhanced fire, rescue and other emergency response services for the citizens of Bradford County and the surrounding community.

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

The new facility will provide improved fire rescue and emergency response services and will allow for a decrease in response times and will otherwise result in an enhanced level of service in fire, medical and other emergency response services in Bradford County and on 301. All emergency response calls are logged and tracked. Data will be available to determine the increased responsiveness for fire and emergency medical responses as well as reduced response times for the same.

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

27,000 which is the entirety of Bradford County. The County estimates in excess of 50,000 citizens and visitors may be served by this project.



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

The outcome will be that the Bradford County Fire Rescue Department will able to provide enhanced emergency response services to the citizens of Bradford County through improved coordination of emergency response efforts, better trained Fire Rescue personnel and reduced emergency response times.

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?

Loss of programs and activities as described in this funding request.

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 Bradford County Board of County Commissioners.



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14.	Requestor Contact	t Informat	ion							
	a. First Name	William Last Name Sexton								
	b. Organization	Bradford County								
	c. E-mail Address	will_sexton@bradfordcountyfl.gov								
	d. Phone Number	(904)966-6327 Ext .								
15.	Recipient Contact	Information Board of County Commissioners of Bradford County, Florida								
	a. Organization									
b. Municipality and County Bradford										
	c. Organization Ty	nization Type								
	□For Profit Entity									
	□Non Profit 501(d	2)(3)								
	□Non Profit 501(d	2)(4)								
	☑Local Entity									
	□University or Co	versity or College								
	□Other (please specify)									
	d. First Name	William		Last Name	Sexton					
	e. E-mail Address	will_sexton@bradfordcountyfl.gov								
	f. Phone Number	(904)966-6327								
16. Lobbyist Contact Information										
	a. Name	None								
	b. Firm Name	None								
	c. E-mail Address									
	d. Phone Number									