

## The Florida Senate Local Funding Initiative Request Fiscal Year 2024-2025

**LFIR # 1330** 

1. Project Title	City of Edgewater Safe Center				
2. Senate Sponsor	Tom Wright				
3. Date of Request	11/15/2023				
4. Project/Program D	escription				
house an ambulanc	e, crew quarters an	d in times of emerg	ned land valued at \$2. ency, such as hurricar o respond to this area	nes, a safe house fo	or residents. Currently it
5. State Agency to re	ceive requested fu	ınds Division	of Emergency Manage	ement	
State Agency conta	-				
State Agency Conta	acteu: 165				
6. Amount of the Non	recurring Request	for Fiscal Year 20	24-2025		
Type of Funding			Amo		
Operations				0	
Fixed Capital Outlay	/		2,600,000		
<b>Total State Funds</b>	Requested		2,600,000		
7. Total Project Cost f	for Fiscal Year 202	24-2025 (including	matching funds avai	lable for this proje	ect)
	Total State Funds Requested (from question #6)		2,600,000	100%	
Matching Funds			_,,		
Federal			0	0%	
State (excluding the amount of this request)			0	0%	
Local			0	0%	
Other			0	0%	
<b>Total Project Costs</b>	s for Fiscal Year 2	024-2025	2,600,000	100%	
8. Has this project pr	eviously received	state funding?	No		
Fiscal Year	Am	ount	Specific	Vetoed	
(уууу-уу)	Recurring	Nonrecurring	Appropriation #		
9. Is future funding li	kelv to be request	ed?	No		
J	•				
a. If yes, indicate n	ionrecurring amou	int per year.			
b. Describe the so	urce of funding the	at can be used in I	ieu of state funding.		
10. Has the entity req	upsting this proje	ct received any for	daral accietance rola	ted to the COVID-1	10 nandemic?
	juesting this proje	ct received any ted	ierai assistance fela	ted to the COVID-1	ia panuemic?
Yes					

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



11. Status of Construction

14. Program Performance

Planning

a. What is the current phase of the project?

Design

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

Total State Funds Requested (must equal total from question #6)

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

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2,600,000

American Rescue Plan Act monies received totaled \$11,979,418. A portion of this was used to purchase the land for this project and a new City Hall location. \$1,979,418 was used to reline existing and leaking sewer pipe.

### Complete questions 11 and 12 for Fixed Capital Outlay Projects

Construction

	relationship between the owne	rs of the facility and the entity.				
	City of Edgewater - Owner					
12	Datails on how the requested at	ate funde will be expended				
п	Details on how the requested st Spending Category	Description	Amount			
	Administrative Costs:	Description	Amount			
ſ	Executive Director/Project Head Salary and Benefits					
	Other Salary and Benefits		(			
	Expense/Equipment/Travel/Supplies/ Other		(			
	Consultants/Contracted Services/Study					
	Operational Costs: Other					
	Salary and Benefits					
	Expense/Equipment/Travel/Supplies/ Other		(			
	Consultants/Contracted Services/Study					
	ixed Capital Construction/Major Renovation:					
	Construction/Renovation/Land/ Planning Engineering	Planning, engineering and construction.	2,600,000			

N/A

No

July 2024

July 2025

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

haven for residents in an emergency aftermath. Also, an enhanced and more modern Police Department.

To provide Ambulance, EMT/Paramedic services to remote area of the City along with providing Police with a much larger and more modern facility than their present location. To provide Citizens a safe haven in an emergency aftermath.

The Ambulance and EMT/Paramedic Services would be much quicker than currently available. This would offer safe



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

The Ambulance and EMT/Paramedic Services would be much quicker than currently available. This would offer safe haven for residents in an emergency aftermath. Also, an enhanced and more modern Police Department.

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

10,000 +/- west of the US 1/Indian River intersection and this area is expected to grow very rapidly.

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

This will be measured by Dispatcher time

addition to its standard penalties ct?

tracking.	tracking.						
	f. What are the suggested penalties that the contracting agency may consider in						
for failing to meet	for failing to meet deliverables or performance measures provided for the contr						
Liquidated damag	Liquidated damages charged daily to contractors failing to meet contractual deadline						
15. Requester Contact Information							
a. First Name	Glenn	Last Name	Irby				
b. Organization	City of Edgewater						
c. E-mail Address	-mail Address girby@cityofedgewater.org						
d. Phone Number	(386)424-2400	Ext.	1201				
16. Recipient Contact	Information						
a. Organization	City of Edgewater						
b. Municipality and	b. Municipality and County Volusia						
c. Organization Ty	c. Organization Type						
□For Profit Entity	For Profit Entity						
□Non Profit 501(d	□Non Profit 501(c)(3)						
□Non Profit 501(d	□Non Profit 501(c)(4)						
☑Local Entity	☑Local Entity						
□University or Co	□University or College						
□Other (please sp	□Other (please specify)						
d. First Name	Glenn	Last Name	Irby				
e. E-mail Address	girby@cityofedgewater.or	g					
f. Phone Number	(386)424-2400						
17. Lobbyist Contact I	17. Lobbyist Contact Information						
a. Name	Georgia McKeown						

#### 17.



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b. Firm Name	GA McKeown & Associates LLC
c. E-mail Address	ramgam95@gmail.com
d. Phone Number	(904)303-1611