

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

LFIR # 1614

	Local Other Total Project Costs Has this project professed Year (yyyy-yy) Is future funding lift a. If yes, indicate n	amount of this request) s for Fiscal Year 2024-2025 eviously received state fundi Amount Recurring Nonrecu kely to be requested? onrecurring amount per year urce of funding that can be use	urring	0 0 1,000,000 No Specific Appropriation #	0% 0% 0% 100%	
	State (excluding the Local Other Total Project Costs Has this project professor (yyyy-yy)	eviously received state fundi Amount Recurring Nonrecu		0 0 1,000,000 No Specific Appropriation #	0% 0% 100%	
8.	State (excluding the Local Other Total Project Costs Has this project pro	s for Fiscal Year 2024-2025 eviously received state fundi Amount		0 0 0 1,000,000	0% 0% 100%	
8.	State (excluding the Local Other Total Project Costs Has this project pro	s for Fiscal Year 2024-2025 eviously received state fundi Amount		0 0 0 1,000,000	0% 0% 100%	
8.	State (excluding the Local Other Total Project Costs Has this project pro	s for Fiscal Year 2024-2025 eviously received state fundi	ng?	0 0 0 1,000,000	0% 0% 100%	
0	State (excluding the Local Other Total Project Costs	s for Fiscal Year 2024-2025		0 0 0 1,000,000	0% 0%	
	State (excluding the Local Other			0 0 0	0% 0%	
	State (excluding the Local	amount of this request)		0	0%	
	State (excluding the	amount of this request)		0		
				0	0%	
	Matching Funds			,		
		equested (from question #6)		1,000,000	100%	
7.	Total Project Cost f	or Fiscal Year 2024-2025 (inc	luding i	matching funds avail	lable for this proje	ect)
	Total State Funds	Requested			1,000,000	
	Fixed Capital Outlay	1			1,000,000	
	Operations				0	
	Type of Funding			Amou	ınt	
	State Agency conta Amount of the Non	ncted? No recurring Request for Fiscal	Year 20	24-2025		
5.	State Agency to re-	ceive requested funds	Departme	ent of Transportation		
	system of Greenway and a high quality of FL Greenway Trail p	vays and Trails System (FGTS) vs and trails for recreation, considered trails for recreation, considered the This proposed project is insportion of the Florida Greenway lay County. This request include	servatior ntended s and Ti	n, alternative transport to construct a parking rails System. The proje	ation, healthy lifest lot and access roa ect will connect the	tyles, a vibrant economy and for access to the NE trail system between
4.	Project/Program D	•				
3.	Date of Request	11/12/2023				
	Senate Sponsor	Jennifer Bradley				
2.	Project Title	Clay County Veterans Park	Greenw	ay Access		
	Project Title					



11. Status of Construction

a. What is the current phase of the project?

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0

0

1,000,000

1,000,000

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

The County received CARES, ARPA, and COVID-19 related grant funding for a broad range of public health and economic recovery projects related to the pandemic.

Complete questions 11 and 12 for Fixed Capital Outlay Projects

Planning	Design	Construction	O N/A			
b. Is the project "sh	novel ready" ((i.e permitted)?		No		
c. What is the estin	nated start da	te of construction?		7/1/2024		
d. What is the estin	nated comple	tion date of constru	ction?	6/30/2025		
12. List the owners of relationship between	f the facility to een the owne	o receive, directly o rs of the facility and	r indirect I the entit	y, any fixed capital y.	outlay fund	ing. Include the
	d of County Co	ommissioners will ow	n and mai	ntain the Park		
Clay County Board	a or county oc			nam the rank		
3. Details on how the	•			nam tro i arr		
	requested st		pended	Description		Amount
3. Details on how the	requested st		pended			Amount
3. Details on how the Spending Category	e requested st		pended			Amount
3. Details on how the Spending Category Administrative Cos Executive Director/Pro	requested st		pended			Amount
3. Details on how the Spending Category Administrative Cos Executive Director/Pro Salary and Benefits	requested st		pended			Amount
3. Details on how the Spending Category Administrative Cos Executive Director/Pro Salary and Benefits Other Salary and Bene Expense/Equipment/Ti	e requested st		pended			Amount
3. Details on how the Spending Category Administrative Cos Executive Director/Pro Salary and Benefits Other Salary and Bene Expense/Equipment/Tr Other Consultants/Contracte	e requested st		pended			Amount

14. Program Performance

Planning Engineering

Consultants/Contracted

Construction/Renovation/Land/

Services/Study

Other

Expense/Equipment/Travel/Supplies/

Fixed Capital Construction/Major Renovation:

a WI	hat specific p	urnose or ac	al will be	achieved	by the	funds r	equeste	ď
a. vv:	nai su c cinc d	uibose oi uo	ai wiii be	: acmeveu	DV IIIE	iuiius i	euuesii	2

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

project management.

Construct trail access to Veterans Park, connecting Duval and Clay Counties.

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

Design, construction, CEI, and project management to develop an access road to Veterans Park

This request includes funding for design, construction, CEI, and



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c. what direct so	ervices will be provided to	citizens by t	ne appropriation project	Lf			
Increased oppor	Increased opportunities for outdoor recreation and economic development						
d. Who is the tar	d. Who is the target population served by this project? How many individuals are expected to be served?						
This project will	18,245).						
e. What is the expected benefit or outcome of this project? What is the methodology by which this outc							
be measured?							
Parks and Recre				ercise. Surveys and the County's ed by the County and evaluated			
f. What are the s	suggested penalties that t	he contractin	g agency may consider	in addition to its standard penaltie			
for failing to me	et deliverables or perform	nance measur	es provided for the cont	ract?			
The local govern governments murequirements.	nment is responsible for const comply with federal regul	nforming with a lations and ce	all federal and state regula rtify that, if funded, they wi	tions governing the program. All locallications governing the program. All locallications and comply with all applicable laws and			
15. Requester Conta	ect Information						
a. First Name	Betsy	Last Name	Condon				
b. Organization	Clay County Board of Co						
c. E-mail Addres	s betsy.condon@claycoun	ntygov.com					
d. Phone Numbe	(904)284-6394	Ext.					
16. Recipient Contac	et Information						
a. Organization	Clay County Board of Co	ounty Commis	sioners				
b. Municipality a	nd County Clay						
c. Organization T	⁻ уре						
□For Profit Enti	ty						
□Non Profit 501	(c)(3)						
□Non Profit 501	(c)(4)						
☑Local Entity							
□University or College							
□Other (please	specify)						
d. First Name	Charlie	Last Name	Latham				
e. E-mail Addres	s charles.latham@claycou	ıntygov.com					
f. Phone Number	(904)529-5269						



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b. Firm Name	The Southern Group
c. E-mail Address	fearington@thesoutherngroup.com
d. Phone Number	(850)671-4401