

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

al Year 2024-2025 LFIR # 1826

1.	Project Title	Deltona New Fire	e Station				
2.	Senate Sponsor	Tom Wright					
3.	Date of Request	12/06/2023					
4.	Project/Program Des	scription					
	The project is to prov time and an improved	ride a new 25,000 I coverage of the 0	square foot Fir City as well as t	e Stat hose	ion in the City of De areas serviced by the	eltona (City) to prov he City in the first re	ide increased response esponder agreement.
5.	State Agency to rece	eive requested fu	nds Depa	artme	nt of Financial Serv	ices	
	State Agency contac	ted? No					
6.	Amount of the Nonre	ecurring Request	for Fiscal Yea	r 202	4-2025		
	Type of Funding				Amo	ount	
	Operations	erations				C	<u>)</u>
	Fixed Capital Outlay					<u>) </u>	
	Total State Funds Re	equested				375,000	
7.	Total Project Cost fo	r Fiscal Year 202	4-2025 (includ	ing n	natching funds ava	ailable for this pro	ject)
	Type of Funding				Amount	Percentage	
	Total State Funds Re	quested (from que	estion #6)		375,000	100%	
	Matching Funds						
	Federal				0	0%	0
	State (excluding the a	amount of this requ	uest)		0	0%	<u></u>
	Local				0	0%	<u>, </u>
	Other				0	0%	0
	Total Project Costs	for Fiscal Year 20	024-2025		375,000	100%	
8.	Has this project prev	viously received	state funding?	• [No		_
	Fiscal Year	Amount			Specific	Vetoed	
	(уууу-уу)	Recurring	Nonrecurrii	ng	Appropriation #		-
9.	Is future funding like	ely to be requeste	ed?		Yes		_
	a. If yes, indicate no	nrecurring amou	nt per year.		7,500,000		
	b. Describe the sour	ce of funding tha	at can be used	in lie	u of state funding		_
The City of Deltona Fire Department is looking for a partner to help share the cost of Design/Engineering/Permitting. It is anticipated the construction costs to be \$6,750,000 and will be presenting a cost share application for a 50/50 share or \$3.3M.							
10	. Has the entity requ	esting this proied	ct received an	y fede	eral assistance rela	ated to the COVID	-19 pandemic?
_	No	5 1 7		•			•
If yes, indicate the amount of funds received and what the funds were used for.							



11. Status of Construction

Planning

a. What is the current phase of the project?

Opening the state of the sta

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

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Complete questions 11 and 12 for Fixed Capital Outlay Projects

Construction

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0

0

0

375,000

375,000

	e of construction?	01/01/2025		
d. What is the estimated completion	on date of construction?	06/01/2027		
List the owners of the facility to relationship between the owners			outlay funding. Inc	lude the
The project provides for enhanced and those within the first responde		proved response times	for the City of Delto	ona residents
Details on how the requested star	te funds will be expended			
•				
Spending Category	•	Description		Amount
	•	Description		Amount
Spending Category	•	Description		Amount
Spending Category Administrative Costs: Executive Director/Project Head	•	Description		Amount
Spending Category Administrative Costs: Executive Director/Project Head Salary and Benefits	•	Description		Amount

N/A

No

14. Program Performance

Operational Costs: Other

Construction/Renovation/Land/

Expense/Equipment/Travel/Supplies/

Fixed Capital Construction/Major Renovation:

Salary and Benefits

Services/Study

Consultants/Contracted

Planning Engineering

Other

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

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

The purpose & goal of this request is to help cost share the design/engineering/permitting for an area in need of expanded fire/rescue coverage.

Cost share funding to help the City of Deltona Fire Rescue

design/engineer/permit a new fire station to improve/increase response times. Total project cost estimated at \$750,000; with a request for a 50/50 cost share split/share or a request of \$375,000.

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



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	move towards futu				e City of De	entoria (City) and	ows the life department the ability to
	c. What direct ser	vices will	be provided to	citizens by t	he approp	riation projec	t?
	A new fire station	will increas	se/improve respo	onse times w	ith a broad	er area of cove	erage.
	d. Who is the target population served by this project? How many individuals are expected to be served?						
	Targeted population response times.	on is those	residents in the	physical loca	ation that is	being serviced	d by another station causing longer
	e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome wibe measured? The expected benefit/outcome is the ability to improve/increase the response time.					dology by which this outcome will	
	f. What are the sur					-	in addition to its standard penaltie tract?
	If the funding is no reimburse any of the	ot utilized ir he cost sha	n compliance wit ared funding rec	th the Scope eived.	of Work, P	urchase Order	or similar, the City may be required to
15.	Requester Contact	t Informati	on				
	a. First Name	Glenn		Last Name	Whitcomb)	
	b. Organization City of Deltona						
	c. E-mail Address	gwhitcom	b@deltonafl.gov	<i>I</i>			
	d. Phone Number	(386)878-	8858	Ext.			
16.	Recipient Contact	Informatio	on				
	a. Organization	City of De	eltona				
	b. Municipality and	d County	Volusia				
	c. Organization Ty	pe					
	□For Profit Entity						
	□Non Profit 501(c	c)(3)					
	□Non Profit 501(c	c)(4)					
	☑Local Entity						
	□University or Co	llege					
	□Other (please sp	pecify)					

17. Lobbyist Contact Information

f. Phone Number (386)878-8858

Glenn e. E-mail Address gwhitcomb@deltonafl.gov

d. First Name

Last Name Whitcomb



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b. Firm Name	GA McKeown & Associates LLC
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d. Phone Number	(904)303-1611