



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2024-2025

LFIR # 1907

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Builders Care will be reroofing homes for low-income, elderly, veterans, and disabled individuals who are otherwise unable to afford repairs and eventually have to leave their homes due to condemnation. We will also be building home-access ramps for low-income, elderly, veterans, and disabled individuals who are otherwise isolated and unable to leave their homes. Many of Builders Care's disabled clients haven't been outside of their homes in one to two years due to their inability to safely leave their home since they have no home-access ramp.

5. State Agency to receive requested funds

State Agency contacted? No

6. Amount of the Nonrecurring Request for Fiscal Year 2024-2025

Type of Funding	Amount
Operations	400,000
Fixed Capital Outlay	0
Total State Funds Requested	400,000

7. Total Project Cost for Fiscal Year 2024-2025 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	400,000	44%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	225,000	24%
Other	300,000	32%
Total Project Costs for Fiscal Year 2024-2025	925,000	100%

8. Has this project previously received state funding? No

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. Is future funding likely to be requested? No

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?

Yes



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

\$22,490 was received in PPP funds. The funds were used for payroll during the COVID-19 pandemic.

Complete questions 11 and 12 for Fixed Capital Outlay Projects

11. Status of Construction

a. What is the current phase of the project?

- Planning
 Design
 Construction
 N/A

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?

12. List 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.

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

Spending Category	Description	Amount
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	Builders Care utilizes a preferred, certified contractor, HW Contracting, LLC, to rebuild roofs. Builders Care utilizes another preferred, certified contractor, Duncan Drywall, to build home-access ramps. Builders Care also subsidizes this work through volunteers who assist with building the home-access ramps, as well as material suppliers like Builders First Source that donate most of the material needed for the ramps.	400,000
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		400,000

14. Program Performance

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



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Reroofing homes for low-income, elderly, veterans, and disabled individuals who are otherwise unable to afford repairs and eventually have to leave their homes due to condemnation. We will also be building home-access ramps for low-income, elderly, veterans, and disabled individuals who are otherwise isolated and unable to leave their homes.

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

Builders Care will repair/replace approximately 25 roofs for individuals in need. It will also build approximately 10 home-access ramps with these state funds.

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

Citizens who have demonstrated their financial need through two months of bank statements will receive roof repairs or replacements free of charge since they'll otherwise be unable to afford the work. Home-access ramps will be provided to those who can prove their financial need and who have documentation of a permanent disability.

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

Target populations are: Elderly persons, economically disadvantaged persons, developmentally disabled, and physically disabled. 25-50 individuals will be served.

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

The roof will be fully repaired (weather-tight). This will benefit residents by allowing them to stay in their homes, stopping leaks which cause mold and mildew, as well as preventing ceiling collapses. An ADA-compliant home-access ramp will be fully constructed allowing safe entry and exit of their home. This will improve physical and mental health by allowing once-isolated individuals to have independence. Also, the lifting of these massive cost burdens from these individuals will allow them to both stay in their homes longer and to be able to focus all money on their self-sufficiency. It will also allow them the option to begin working again if they want (especially for home-access ramps) and will thus be less reliant on the community and government. The methodology to measure the outcome is if roofs were repaired/replaced satisfactorily resulting in no leaks, and if home-access ramps were built satisfactorily and allow residents to easily enter and leave their homes.

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?

If deliverables aren't met, return funds to state.

15. Requester Contact Information

a. First Name **Last Name**

b. Organization

c. E-mail Address

d. Phone Number **Ext.**

16. Recipient Contact Information

a. Organization

b. Municipality and County

c. Organization Type

- For Profit Entity
- Non Profit 501(c)(3)



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- 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

17. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number