

LFIR # 2146

1. Project Title	West Tampa Fire Rescue Station Upgrades

2. Senate Sponsor Jay Collins

**3. Date of Request** 12/15/2023

## 4. Project/Program Description

This funding will be used to rehabilitate and modernize Tampa Fire Rescue stations in West Tampa, including window upgrades, overhead door replacement, electrical system upgrades, mechanical system upgrades, ceiling replacements, plumbing upgrades, painting and sire improvements that will create space for new advanced life support units.

## 5. State Agency to receive requested funds

Department of Financial Services

State Agency contacted? Yes

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

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	750,000
Total State Funds Requested	750,000

## 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)	750,000	50%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	750,000	50%
Other	0	0%
Total Project Costs for Fiscal Year 2024-2025	1,500,000	100%

## 8. Has this project previously received state funding? No

Fiscal Year	Amo	ount	Specific	Vetoed
(уууу-уу)	Recurring	Nonrecurring	Appropriation #	

## 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 COVID-19 pandemic?

No

Yes

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



LFIR # 2146

\$90.47 million in ARPA, CARES, HUD, JAG and HUD rental assistance that was used for small business assistance programs, housing and rental assistance programs, revenue recovery, testing, vaccine distribution, public safety overtime, and similar activities.

## **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)?		Yes	
c. What is the es	timated start da	te of construction?		1/1/2025	
d. What is the es	timated comple	tion date of construe	ction?	12/31/2025	

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.

City of Tampa

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		0
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering	Renovation: Window upgrades, overhead door replacement, electrical system upgrades, mechanical system upgrades, ceiling replacements, plumbing upgrades, painting and sire improvements that will create space for new advanced life support units.	750,000
Total State Funds Requested (m	ust equal total from question #6)	750,000

## 14. Program Performance

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

Tampa is one of the fastest-growing cities in the nation. This growth has led to an increase in the demand for emergency rescue services. One area in which growth is concentrated is West Tampa. Unfortunately, West Tampa's fire stations were built before the addition of rescue services to the fire department, so stations there do not have the capacity for advanced life support vehicles.



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

This funding will be used to rehabilitate and modernize Tampa Fire Rescue stations in West Tampa, including window upgrades, overhead door replacement, electrical system upgrades, mechanical system upgrades, ceiling replacements, plumbing upgrades, painting and sire improvements that will create space for new advanced life support units.

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

Improved response times for emergency rescue calls.

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

The City of Tampa's residents and visitors. Tampa's population is estimated at over 410,000 and is rapidly growing. In addition, Tampa receives over 24 million visitors per year.

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

This project is expected to result in a quantifiable reduction in emergency rescue response times in surrounding neighborhoods.

# 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?

Standard contract penalties

## **15. Requester Contact Information**

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a. First Name	lan		Last Name	Whitney
b. Organization	City of Tampa			
c. E-mail Address	ian.whitney@t	ampa.gov		
d. Phone Number	(813)274-8016	6	Ext.	
6. Recipient Contact	Information			
a. Organization	City of Tampa			
b. Municipality and	I County Hills	sborough		
c. Organization Ty	be			
□For Profit Entity				
□Non Profit 501(c	)(3)			
□Non Profit 501(c	)(4)			
☑Local Entity				
□University or Co	llege			
□Other (please sp	pecify)			
d. First Name	Jane		Last Name	Castor
e. E-mail Address	jane.castor@ta	ampa.gov		



f. Phone Number (813)274-8251

## 17. Lobbyist Contact Information

a. Name
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Angela M. Drzewiecki

b. Firm Name

GrayRobinson PA

c. E-mail Address angela.drzewiecki@gray-robinson.com

**d. Phone Number** (850)577-9090

LFIR # 2146