

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

**LFIR # 2295** 

1. Project Title Gretna Fire/Rescue Department  2. Senate Sponsor Corey Simon  3. Date of Request 12/14/2023	
3. Date of Request 12/14/2023	
A. Duning (I/Dung group). Description	
4. Project/Program Description	
The City of Gretna (City) has an ISO rating of -10, as of the date of this application. The City currently has appa is insufficient to provide adequate response to calls for service in order to save life and property. The City will use equipment to provide first response to calls for services regarding Fire/Rescue and Medical Assist Calls with Gad County Emergency Services. In addition, this equipment will ensure that the City's ISO continues to benefit the citizens of it's service area. Furt this apparatus will allow for a more rapid response to over 20 miles if interstate on I-10.	this Isden
5. State Agency to receive requested funds Department of Financial Services	
State Agency contacted? No	
6. Amount of the Nonrecurring Request for Fiscal Year 2024-2025	
Type of Funding Amount	
Operations 470,000	
Fixed Capital Outlay 0	
Total State Funds Requested 470,000	
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) 470,000 100%	
Matching Funds	
Federal 0 0%	
State (excluding the amount of this request) 0 0%	
Local 0 0%	
Other 0 0%	
Total Project Costs for Fiscal Year 2024-2025 470,000 100%	
8. Has this project previously received state funding? No	
Fiscal Year Amount Specific Vetoed Appropriation #	
9. Is future funding likely to be requested?	
a. If yes, indicate nonrecurring amount per year.	
a. If yes, indicate nonrecurring amount per year.  b. Describe the source of funding that can be used in lieu of state funding.	



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

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Complete que	estions 11 a	nd 12 for Fixed	d Cap	oital O	utlay Pı	rojects	
11. Status of Const		he project?					
Planning	O Design	Construction	O N	/A			
b. Is the project	"shovel ready" (	i.e permitted)?					
c. What is the es	stimated start da	te of construction?					
d. What is the e	stimated comple	tion date of constru	ction?				

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	Stock Mini Pumper/Brush Truck/Rescue 300 gal, 1500 gpm, \$400,000.00 - Extrication Equipment (battery), \$50,000.00 - Digital Radio's compatible with county's new radio system 10 units, \$20,000.00	470,000
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering		0
Total State Funds Requested (m	ust equal total from question #6)	470,000

### 14. Program Performance

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

Timely First Response to calls for service with adequate and appropriate apparatus. Our current apparatus had aged-out and is currently non-functional. By providing these services timely, efficiently, and adequately will certainly have a dramatic impact on the City of Gretna's (City) and Gadsden County's (County) ISO rating. More importantly, responding to the safety and well-being of our community and citizens is critical



15.

16.

□University or College

□Other (please specify)

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

By providing these services timely, efficiently, and adequately will certainly have a dramatic impact on the City's and the County's ISO rating. More importantly, responding to the safety and well-being of our community and citizens is critical.

County's ISO rating	g. More importantly, respor	nding to the s	afety and well-being of our	community and citizens is critical.
c. What direct ser	vices will be provided to	citizens by t	he appropriation project?	?
provide adequate in provide first response Emergency Service	response to calls for services reg ase to calls for services reg es. In addition, this equipm	e in order to s arding Fire/R ent will ensur	save life and property. The escue and Medical Assist	y has apparatus that is insufficient to City will use this equipment to Calls with Gadsden County nues to benefit the citizens of it's r 20 miles if interstate
d. Who is the targ	et population served by t	his project?	How many individuals a	re expected to be served?
The citizens of Gr	etna and Gadsden County			
e. What is the exp be measured?	ected benefit or outcome	of this proje	ect? What is the methodo	ology by which this outcome will
The expected ben need. Methodology standards.	efit will be faster response to measure outcomes will	times to calls be the meeti	for service, will expand caing of ISO and NFPA	pacity to meet the vacancies in
		•	g agency may consider in es provided for the contr	n addition to its standard penalties act?
Return of all or un	used portions of funding.			
Requester Contact	Information			
a. First Name	Joe	Last Name	Parramore	
b. Organization	City of Gretna, Fire/Rescue Department			
c. E-mail Address	drjparramore@gmail.com			
d. Phone Number	(850)510-0584	Ext.		
Paciniant Contact				
Recipient Contact	Information			
a. Organization	Information City of Gretna Fire Rescu	e Departmen	t	
	City of Gretna Fire Rescu	e Departmen	t	
a. Organization	City of Gretna Fire Rescu	e Departmen	t	
a. Organization b. Municipality and	City of Gretna Fire Rescu	e Departmen	t	
a. Organization b. Municipality and c. Organization Ty	City of Gretna Fire Rescu County Gadsden	e Departmen	t	
a. Organization b. Municipality and c. Organization Ty  □For Profit Entity	City of Gretna Fire Rescu  County Gadsden  Coe	e Departmen	t	



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d. First Name	Joe Last Name Parramore
e. E-mail Address	drjparramore@gmail.com
f. Phone Number	(850)510-0584
17. Lobbyist Contact I	nformation
a. Name	None
b. Firm Name	
c. E-mail Address	
d. Phone Number	