

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

LFIR # 2478

1. Project Title	Hamilton County Jail HVAC Replacement

2. Senate Sponsor Corey Simon

3. Date of Request 12/07/2023

4. Project/Program Description

This request will be for a replacement HVAC unit for the Hamilton County Jail. The current unit is over 20 years old and has aged well past its expected functional expectancy.

5. State Agency to receive requested funds

Department of Law Enforcement

State Agency contacted? No

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

Type of Funding	Amount	
Operations	0	
Fixed Capital Outlay	98,000	
Total State Funds Requested	98,000	

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)	98,000	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	98,000	100%

8. Has this project previously received state funding?

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

9. Is future funding likely to be requested?

No

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?

No

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



Complete questions 11 and 12 for Fixed Capital Outlay Projects

11. Status of Construction

a. What is the current phase of the project?

📀 Planning 💦 🔘 Desigi	n 🚫 Construction	🔵 N/A
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b. Is the project "shovel ready" (i.e permitte	ed)?
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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.

Hamilton County	
Hamilton County Sheriff's Office	

No

07/01/2024 06/30/2025

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	Request funding for planning, purchase, of a new HVAC unit. This cost includes removal of the current unit and installing the new.	98,000
Fotal State Funds Requested (must equal total from question #6) 98,000		

14. Program Performance

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

This request will be for a new HVAC unit at the Hamilton County Jail. The current unit is well in exceedance of its life expectancy and is not currently functioning properly and/or is creating undue hardship with relation to frequent repair needs. The new unit will obviate the need for such frequent repair expenditures and allow the facility to run more efficiently with respect to energy usage while also ensuring the safety and comfort of the staff and those incarcerated within the facility.

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

A third-party provider will provide removal, replacement and installation of all new HVAC system components.

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



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Safety and comfort of all staff and citizens that interact with and enter the facility.

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

The staff of the facility as well as the inmates and various citizens and members of the public that enter the facility.

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

Reduced operating costs, increased safety due to the reduction in potential for heat related illness and increased energy efficiency.

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 are sufficient.

15. Requester Contact Information

a. First Name	Matthew	Last Name Morgan	
b. Organization	Grant Coordinator, Hamilton County Florida		
c. E-mail Address	landuse@hamiltoncountyfl.com		
d. Phone Number	(386)792-0507	Ext.	

16. Recipient Contact Information

a. Organization	Hamilton County Board of County Commissioners		
b. Municipality and County		Hamilton	

b. Municipanty and county

c. Organization Type

□For Profit Entity

□Non Profit 501(c)(3)

□Non Profit 501(c)(4)

☑Local Entity

□University or College

□Other (please specify)

d. First Name	Matthew	Last Name	Morgan
e. E-mail Address	landuse@hamiltoncounty	fl.com	
f. Phone Number	(386)792-0507		

17. Lobbyist Contact Information

a. Name	Patrick E. Bell
b. Firm Name	Capitol Solutions LLC



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d. Phone Number	(850)544-0784	