

LFIR # 2499

1. Project	Title	City of North Mia Project Phase 1	ami Beach Emer	rgend	cy Response Techn	ology Upgrades			
2. Senate	Snonsor	Shevrin Jones							
Z. Seriate	оронзог	Offevilli Joffes							
3. Date of	Request	12/21/2023							
4. Project/	Program D	escription							
prepared manage respond being of manage	dness, respondents technology ment's technology to emerger our resident ment resour	onse, and recovery nology and modern icies effectively. By ts. Moreover, by ac	capabilities. We izing it will signif investing in this lding a tactical me to respond to a	firm ficant initia nultip all inc	ly believe that upgratly enhance North Mative, we can save liburpose response arcidents that exceed	ading our Öffice of of liami Beach's resilion ves, protect proper ad rescue vehicle to to the secue vehicle to to the secue vehicle to to the secue vehicle to to the secue vehicle to the secue vehicle the secue vehicle to the secue vehicle to the secue vehicle to the secue vehicle the secue vehic	ence and ability to ty, and ensure the well-		
5. State A	gency to re	ceive requested fu	ı nds Divisi	ion o	f Emergency Manag	gement			
·	gency conta	•			<u> </u>	,			
•	-		for Figure 1 Voca	. 000	4 0005				
6. Amount	of the Non	recurring Request	Tor Fiscal Year	r 202	4-2025				
	Funding				Amo				
Operation						(-		
	apital Outlay				446,500				
Total State Funds Requested						446,500			
7 Total Pr	niect Cost f	or Fiscal Vear 202	74-2025 (includi	na n	natching funds ava	ailable for this pro	iact)		
		Oi i iscai i eai 202	. 4- 2025 (IIICIUUI	iig ii		•	J ec i, □		
	Funding		.: "0)		Amount	Percentage			
		equested (from que	estion #6)		446,500	50%	0		
	ng Funds				0	00/			
Federal	valudina tha	amount of this road	uoot)		0	0% 0%	7		
	xcluding the	amount of this req	uest)		446,500	50%	7		
Local Other					446,500	0%	7		
	roject Costs	s for Fiscal Year 2	024-2025		893,000	100%			
Total I	Oject Oost	s ioi i iscai i cai z	024-2023	-	033,000	1007			
8. Has this	s project pr	eviously received	state funding?		No				
Fisc	al Year	Am	ount		Specific	Vetoed			
(уу	уу-уу)	Recurring	Nonrecurrin	g	Appropriation #				
0 1- 6-4			- 10		NI.				
9. IS future	e tunding iii	kely to be request	ea?	L	No				
a. If yes	, indicate n	onrecurring amou	ınt per year.						
b. Desc	ribe the so	urce of funding th	at can be used	in lie	eu of state funding	-			
		· · · · · · · · · · · · · · · · · · ·							

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?



LFIR # 2499

V	es		
- 1	=>		

11. Status of Construction

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

The City received a total of \$20M. The Utility was provided \$275,000 for a new vac truck, \$400,000 for septic to sewer, \$500,000 for utility billing assistance.

Complete questions 11 and 12 for Fixed Capital Outlay Projects

a. What is the current phase of the project?						
Planning	O Design	Construction	O N/A			
b. Is the project "shovel ready" (i.e permitted)?						
c. What is the es	10/01/2024					
d. What is the es	01/31/2025					

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 North Miami Beach	

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	In addition of upgrading technology, and expanding the Office of Emergency Management, the Office of Emergency Management will purchase a tactical multipurpose response and rescue vehicle to respond to catastrophic incidents such as natural disasters and terrorist attacks, performing rescues and evacuations in adverse conditions, or protecting civilians from ballistic attacks.	446,500
Total State Funds Requested (m	ust equal total from question #6)	446,500

14. Program Performance

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



LFIR # 2499

To better prepare for threats such as terrorism, natural disasters, violent crime, and mass shootings, the City of North Miami Beach maintains a highly equipped Office of Emergency Management and a Tactical Multipurpose Response and Rescue Vehicle to respond to all high-risk critical situations within the city. In order for the team to effectively fulfill our mission of protecting the citizens and critical infrastructure of the region, we must have the necessary technology and equipment to perform our duties.

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

Equipment and Technology: Acquiring essential equipment, communication systems, and software to support emergency operations. Training and Education: Conducting training programs for staff and community members to enhance preparedness and response capabilities. Public Outreach: Developing public awareness campaigns, educational materials, and community engagement initiatives to promote a culture of preparedness. Tactical multipurpose response and rescue vehicle to respond to catastrophic incidents such as natural disasters and terrorist attacks, performing rescues and evacuations in adverse conditions, or protecting civilians from ballistic attacks.

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

Community's preparedness, response, and recovery capabilities.

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

The target population served by this project is the jurisdiction throughout the City of North Miami Beach, a 5.37-square-mile municipality with a growing population of 45,887 residents. Through mutual aid agreement, the Office of Emergency Management and a Tactical Multipurpose Response and Rescue Vehicle will be able to respond to emergencies and to support local tactical teams within the cities of North Miami, Aventura, Miami Beach, Miami Gardens or anywhere throughout Miami-Dade County, a 2,431 square mile region with 2,761,581 residents.

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

This expected benefit will increase integration among first responders allowing us to protect against the widest variety of hazards so that we can fulfill our duty to safeguard our immediate and surrounding communities. To sustain the capabilities supporting this project North Miami Beach plans to implement a robust performance measurement tool to track and evaluate key performance indicators for the Office of Emergency Management and a Tactical Multipurpose Response and Rescue Vehicle. Our performance measurement tool will enable us to assess our progress, identify areas for improvement, and make data-driven decisions to enhance efficiency and productivity.

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?

Upon the recommendation of the City Commission, funds will be unallocated from the project, and the Close-Out phase will commence immediately.

15. Requester Contac	t Information						
a. First Name	Mario	Last Name	Diaz				
b. Organization	City of North Miami Beach	1					
c. E-mail Address	mario.diaz@citynmb.com						
d. Phone Number	(305)948-2900	Ext.					
16. Recipient Contact Information							
a. Organization City of North Miami Beach							
b. Municipality and County Miami-Dade							
c. Organization Ty	pe						



LFIR # 2499

□For Profit Entity							
□Non Profit 501(c	□Non Profit 501(c)(3)						
□Non Profit 501(c	□Non Profit 501(c)(4)						
☑Local Entity	☑Local Entity						
□University or Co	□University or College						
□Other (please specify)							
d. First Name	Mario	Last Name	Diaz				
e. E-mail Address	mario.diaz@citynmb.com						
f. Phone Number	f. Phone Number (305)948-2900						
17. Lobbyist Contact Information							
a. Name	Ronald L. Book						
b. Firm Name	Ronald L. Book PA						
c. E-mail Address	ron@rlbookpa.com						
d. Phone Number	(305)935-1866						