

LFIR # 2964

1. Project Title	Willow Way Villages, Inc.				
2. Senate Sponsor	Jay Trumbull				
3. Date of Request	01/04/2024				
4. Project/Program D	escription				
disorder (chronically additional \$20+ milli tax credits. Attainab	attainable housing units for p underfunded populations). A on required to complete the S le housing funding opportunit hrough FHFC programs is dif	\ \$9,000,0 \$30 million ties are les	00 appropriation for g project through Non- s available than typic	pap funding allows E competitive private cal affordable housin	BCI to obtain the activity bonds with 4% ng. Funding for
5. State Agency to re	ceive requested funds	Departme	ent of Commerce		
State Agency conta	acted? No				
•					
6. Amount of the Non	recurring Request for Fisca	al Year 20	24-2025		
Type of Funding			Amo	unt	
Operations				0	
Fixed Capital Outlay				9,000,000	
Total State Funds	Total State Funds Requested			9,000,000	
7. Total Project Cost f	or Fiscal Year 2024-2025 (i	ncluding	matching funds ava	ilable for this proje	ect)
Type of Funding			Amount	Percentage	
	equested (from question #6)		9,000,000	100%	
Matching Funds				201	
Federal			0	0%	
	amount of this request)		0	0%	
Local Other			0	0% 0%	
	(F: L)/ 0004 0005		_		
Total Project Costs	s for Fiscal Year 2024-2025		9,000,000	100%	
8. Has this project pr	eviously received state fun	ding?	No		
Fiscal Year	Amount		Specific	Vetoed	
(уууу-уу)	Recurring Nonre	curring	Appropriation #		
9. Is future funding li	kely to be requested?		Yes		
a. If yes, indicate n	onrecurring amount per ye	ear.	00		
	urce of funding that can be				



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Yes
If yes, indicate the amount of funds received and what the funds were used for.
Not available at this time.

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	O N/A		
b. Is the project "	shovel ready" ((i.e permitted)?		No	
c. What is the est	imated start da	te of construction?		March 2025	
d What is the est	timated comple	tion data of construc	tion?	March 2027	

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.

NI CONTRACTOR OF THE CONTRACTO	
None	

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	New construction of permanent supportive housing for individuals transitioning out of homelessness and those experiencing mental health and substance use disorders with a preference to serve Veterans.	9,000,000
Total State Funds Requested (m	ust equal total from question #6)	9,000,000

14. Program Performance

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



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Willow Way Village (WWV) will be a newly constructed 72-unit permanent supportive housing community in Okaloosa County. The development design is a three (3) story garden-style apartment complex, consisting of 36 studio and 36 one-bedroom apartments, with 36 parking spaces provided for residents.

bedroom apartments, with 36 parking spaces provided for residents.

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

Commence construction of WWV (planning, design, and pre-development activities have been completed).

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

Bridgeway Center, Inc. will maintain on-site offices and provide supportive services to residents, including psychiatric medication management and mental health and substance use disorder treatment services. The common areas of the development will include a clubhouse, computer lab, library, and a community garden. Bridgeway's offices will be available for community partners to provide vocational training as well as recovery meetings. The development is located in close proximity to numerous grocery stores, medical care facilities, and business for general shopping needs.

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

WWV will target individuals transitioning out of homelessness who are experiencing mental health and substance use disorders. The project will also designate veterans as a priority population for housing. Okaloosa County is home to Eglin Air Force Base and Hurlburt field, and veterans comprise 15.5% of the Okaloosa County population according to the latest US Census report.

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

To reduce homelessness and housing instability in the target population by building a safe living environment and providing recovery-oriented supportive services to WWV residents.

Outcome Measures:

1

90% occupancy rate maintained

15% of veterans housed

30% of residents will engage in on-site supportive services.

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 and/or revocation of remaining grant funds to be considered for failing to meet deliverables or performance standards.

5. Requester Contact	Information				
a. First Name	Bonnie	Last Name	Barlow		
b. Organization	Bridgeway Center	, Inc.			
c. E-mail Address	Bonnie.Barlow@b	ridgeway.org			
d. Phone Number	(850)833-7500	Ext.			
6. Recipient Contact Information					
a. Organization	Bridgeway Center	, Inc.			
b. Municipality and	d County Okaloos	sa			
c. Organization Ty	ре				
□For Profit Entity					
☑Non Profit 501(d	:)(3)				



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□Non Profit 501(c	c)(4)			
□Local Entity				
□University or Co	llege			
□Other (please sp	pecify)			
d. First Name	Clayton	Last Name	McAllister	
e. E-mail Address	cmcallister@bridgeway.or	g		
f. Phone Number	(850)833-7500			
17. Lobbyist Contact I	nformation			
a. Name	None			
b. Firm Name				
c. E-mail Address				
d Phone Number				