

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

LFIR # 3265

1. Project Title	Eatonville Public Safety Building						
2. Senate Sponsor	Geraldine Thompson						
3. Date of Request	01/09/2024						
4. Project/Program De	escription						
The Town of Eatons (EMT) space, Law E facility will incorporate	ville Public Safety Building under C nforcement, Evidence Room, and te modern support spaces including a community gathering room. The f	Emergency Operation Ce g a sage room large enou	nter (EOC). The critical representation of the critical repres	cal first responder 100 people and will			
State Agency conta	cted? No	artment of Commerce					
	ecurring Request for Fiscal Yea						
Type of Funding		Amo	_				
Operations Fixed Capital Outlay			5 420 146				
Fixed Capital Outlay Total State Funds F			5,429,146 5,429,146				
7. Total Project Cost fo	or Fiscal Year 2024-2025 (includ	ing matching funds avai	lable for this project	et)			
	equested (from question #6)	5,429,146	100%				
Matching Funds	equested (Horri question #0)	5,429,140	10070				
Federal		0	0%				
	amount of this request)	0	0%				
Local	•	0	0%				
Other		0	0%				
Total Project Costs	for Fiscal Year 2024-2025	5,429,146	100%				
8. Has this project pre	eviously received state funding?	No					
Fiscal Year	Amount	Specific	Vetoed				
(уууу-уу)	Recurring Nonrecurring	Appropriation #					
9. Is future funding lik	•	No					
-	onrecurring amount per year.						
b. Describe the sou	rce of funding that can be used	in lieu of state funding.					
10. Has the entity requ	uesting this project received any	/ federal assistance rela	ted to the COVID-19	9 pandemic?			



11. Status of Construction

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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

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	Fall of 2024					
d. What is the es	Spring of 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.

Town of Eatonville
I TOWN OF CAROUVIIE
Orange County Fire & Rescue
Seminole County Fire & Rescue

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/Major Renovation:					
Construction/Renovation/Land/ Planning Engineering	Land Acquisition , Land Planning, Architecture, Engineering, Construction.	5,429,146			
Total State Funds Requested (must equal total from question #6)					

14. Program Performance

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



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The Town of Eatonville Public Safety Building under Commercial Code-04 will include an emergency medical technician (EMT) space, Law enforcement, Evidence room, and an Emergency Operations Center (EOC). This critical first responder facility will incorporate modern support spaces including a safe room large enough to accommodate 100 people and will be alternately used as a community gathering room. The facility will also include a mental health and substance abuse response and training space.

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

The Town of Eatonville Public Safety Building under Commercial Code-04 will include an emergency medical technician (EMT) space, Law enforcement, Evidence room, and an Emergency Operations Center (EOC). The facility will also include a safe room to accommodate 100 persons.

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

First responder services including EMT, Law Enforcement, Emergency Operations Center, and a first responder safe room.

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

Greater than 3,200 individuals and all residents of Eatonville including Elderly persons, Persons with poor mental health, Persons with poor physical health, Jobless persons, Economically disadvantaged persons At-risk youth Homeless, Developmentally disabled, Physically disabled, Drug users (in health service) Preschool students, Grade school students, High school students, University/college students, Currently or formerly incarcerated persons, Drug offenders (in criminal Justice), Victims of crime will benefit from this funding.

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

Response time for emergency calls will be improved. Area of safety. Public safety to have a modern facility to be economical and efficient in doing their job. All while protecting the people in the building who work there and do business there. The Increase in population and tourism will warrant additional public safety personnel. This critical first responder facility will incorporate building substance abuse training into emergency responses. The methodology measured will increased response time to residents and businesses. The new facility, a community space will allow for community meetings and training increasing while interfacing with the public.

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?

	No failures anticipated						
15. Requester Contact Information							
á	a. First Name	Angie		Last Name	Gardner		
ı	b. Organization	Town of Eatonville					
(c. E-mail Address	agardner@townofeatonville.org					
•	d. Phone Number	(407)623	-8913	Ext.			
16. Recipient Contact Information							
á	a. Organization	Prganization Town of Eatonville					
b. Municipality and County Orange							
c. Organization Type							
	□For Profit Entity						
	□Non Profit 501(c	:)(3)					



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□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	Demetris	Last Name	Pressley					
e. E-mail Address	e. E-mail Address dpressley@townofeatonville.org							
f. Phone Number	(407)623-8913							
17. Lobbyist Contact Information								
a. Name	None							
b. Firm Name								
c. E-mail Address								
d Phone Number								