

1. Proiect Title	Sneads Rebuild Rural Youth Recreational Facility

2. Senate Sponsor Jay Trumbull

**3. Date of Request** 01/08/2024

#### 4. Project/Program Description

This project is for replacing damaged infrastructure at the Adam Tucker Park in Sneads, Florida. This project will provide a rural and under served population with restored recreational opportunities.

#### 5. State Agency to receive requested funds

Department of Environmental Protection

State Agency contacted? Yes

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

Type of Funding	Amount
Operations	350,000
Fixed Capital Outlay	350,000
Total State Funds Requested	700,000

#### 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)	700,000	76%
Matching Funds		
Federal	177,790	19%
State (excluding the amount of this request)	0	0%
Local	50,000	5%
Other	0	0%
Total Project Costs for Fiscal Year 2024-2025	927,790	100%

#### 8. Has this project previously received state funding?

Fiscal Year (уууу-уу)	Amo	ount	Specific	Vetoed	
	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?

Yes

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



### LFIR # 3275

The town has received funds from the American Rescue Plan Act and utilized those funds for much needed repairs, reinforcements, and enhancements to the Town's sewer system. The remaining amount of those funds were used to cover police salary officer retention, required to compete \$45,000 base salaries provided to surrounding agencies.

## **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	🔘 N/A		
b. Is the project	"shovel ready" (	(i.e permitted)?		Yes	
c. What is the estimated start date of construction?			Nov 2024		
d. What is the estimated completion date of construction?			May 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.

The Town of Sneads Florida

#### 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	Purchase of equipment for recreational infrastructure such as electronic equipment, wiring, brackets, lighting, etc.	350,000			
Consultants/Contracted Services/Study		0			
Fixed Capital Construction/Major Renovation:					
Construction/Renovation/Land/ Planning Engineering	installation of support structure, such as concrete, anchoring, and other items needed to renovate current damaged infrastructure.	350,000			
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?

The purpose of these funds would be to provide working recreational infrastructure to a rural area, that the town or surrounding communities would not otherwise reasonably be able to afford

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



The Town will contract with a several providers to replace old and damaged recreational infrastructure. This will mainly include lighting and related support infrastructure such as wiring, pole installation, etc.

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

The administration of a municipal recreational program with high participation

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

The residents of the Town of Sneads, Fla and the residents of surrounding communities such as Calhoun and Liberty Counties, Marianna, and Chattahoochee

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

This project will provide recreational opportunities to under served children and young adults in Sneads and surrounding areas. It is commonly known that a tight knit community with significant parental involvement leads to better outcomes for children and young adults. This recreational infrastructure will provide opportunities to families, not just children, to participate in community activities as a family unit. The Town is able to record the number of participants in community sports. The Town expects a quick increase of participants in community sports activities upon completion of this project. This can be recorded.

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?

The town will not be able to draw down funds if the project is not completed.

#### **15. Requester Contact Information**

a. First Name	Lee		Last Name	Garner	
b. Organization	Town of Sneads Florida				
c. E-mail Address	sneadsm	sneadsmgr@sneadsfl.com			
d. Phone Number	(850)593	-6636	Ext.		
16. Recipient Contact	Informatio	on			
a. Organization	The Tow	n of Sneads FL			
b. Municipality and County Jackson					
c. Organization Ty	ре				
□For Profit Entity	□For Profit Entity				
□Non Profit 501(c)(3)					
□Non Profit 501(c)(4)					
☑Local Entity					
□University or College					
□Other (please specify)					
d. First Name	Lee		Last Name	Garner	
e. E-mail Address	sneadsmgr@sneadsfl.com				



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f. Phone Number (850)593-6636

## 17. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address foster@scgroup.us

Shawn Foster

Sunrise Consulting Group

**d. Phone Number** (727)808-4131