



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2026-2027

LFIR # 1141

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Request supports the Village's senior program to improve the quality of life for our adults 60 years of age and older by offering recreational, social, and educational activities; and by providing support services and resources, including direct assistance for those with physical and cognitive impairments. Senior programming is central for over 20% of our population – significantly higher than surrounding areas – and is essential to promoting safety, activity, and health for our aging community. Key Biscayne's geographic isolation, accessible only via a single causeway, limits access to off-island services, making local support critical. Without funding, the Village would be forced to shift from proactive engagement to reactive services, relying more heavily on emergency aid, food programs, and mental health interventions. This investment ensures our seniors remain safe, active, and connected, while reducing long-term healthcare and emergency response costs.

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2026-2027

Type of Funding	Amount
Operating	125,000
Fixed Capital Outlay	0
Total State Funds Requested	125,000

7. Total Project Cost for Fiscal Year 2026-2027 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	125,000	47%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	140,000	53%
Total Project Costs for Fiscal Year 2026-2027	265,000	100%

8. Has this project previously received state funding?

If yes, provide the most recent instance:

Fiscal Year (YYYY-YY)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. Is future-year funding likely to be requested?

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.



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Complete questions 10 and 11 for Fixed Capital Outlay Projects

10. 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)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

e. What funding stream will be used for ongoing operations and maintenance of the project?

11. 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.

12. 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		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study	Vendors and contractual services provide the programming for seniors year round.	125,000
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		125,000

13. Program Performance

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

The requested funds will support the Village's senior program to improve quality of life for adults aged 60 and older by offering recreational, social, and educational activities and by providing support services and resources, including direct assistance for those with physical and cognitive impairments.

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



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Funds will be used to deliver a range of recreational, social, and educational activities and to provide supportive services and resources that address the needs of older residents; programming will include activities that promote engagement, skill-building, and social connection, along with hands-on assistance for seniors facing mobility or cognitive challenges.

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

Citizens will receive direct, on-island services such as group recreational and educational programs, social engagement opportunities, and targeted support services—explicitly including direct assistance for seniors with physical and cognitive impairments—so that older adults can remain active, safe, and connected in their community.

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

The project targets Village residents aged 60 and older; seniors make up over 20% of the Village population, and the program is designed to serve this concentrated older-adult community.

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

Expected benefits include improved safety, increased physical and social activity, better mental and physical health outcomes, and reduced reliance on emergency and reactive services. Outcomes can be tracked through measures such as participant feedback and satisfaction, records of program participation, documentation of support services delivered, and comparisons over time of service utilization.

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 in the contract?

withholding of payment.

14. Is this project related to mitigation, response, or recovery from a natural disaster?

a. If Yes, what phase best describes the project?

- ☐ Mitigation (reducing or eliminating potential loss of life or property)
- ☐ Response (addressing the immediate and short-term effects of a natural disaster)
- ☐ Recovery (assisting communities return to normal operations, including rebuilding damaged infrastructure)

b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):

15. Has the entity applied for or received federal assistance for this project?

- ☐ Yes, Applied
- ☐ Yes, Received
- ☐ No
- ☐ No, but intends to apply

a. If yes, provide the FEMA project worksheet ID#:

b. Provide the total project cost listed on the FEMA project worksheet:



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16. Has the entity applied for or received state assistance for this project (other than this request)?

- ☐ Yes, Applied
- ☐ Yes, Received
- ☐ No
- ☐ No, but intends to apply

a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):

17. Requester Contact Information

a. First Name **Last Name**

b. Organization

c. E-mail Address

d. Phone Number **Ext.**

18. Recipient Contact Information

a. Organization

b. Municipality 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 **Last Name**

e. E-mail Address

f. Phone Number **Ext.**

19. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address



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d. Phone Number

The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.