



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2026-2027

LFIR # 1233

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The project will construct a resilient facility that can perform as fully functional post-disaster center and also as a reunification center in times of certain community emergencies. This enhancement would significantly bolster the City's emergency response capabilities and ensure continuity of services when they are needed most. Also improving indoor space for logistics for an existing park designated as a POD in the City's and Broward DEM emergency plans. Funding will be used for the construction of a 44,000 SF new critical facility. Construction will consist of site preparation, exterior shell, interior build-out, emergency power, and support infrastructure. All funds, both state and local, will be for contractual services.

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	0
Fixed Capital Outlay	1,500,000
Total State Funds Requested	1,500,000

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)	1,500,000	5%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	28,500,000	95%
Other	0	0%
Total Project Costs for Fiscal Year 2026-2027	30,000,000	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.



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2026-2027

LFIR # 1233

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)?

No

c. What is the estimated start date of construction?

10/01/2026

d. What is the estimated completion date of construction?

12/31/2027

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

City of Weston, General Fund, Parks and Recreation

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.

City of Weston

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		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	Funding will be used for the construction of a 44,000 SF new critical facility. Construction will consist of site preparation, exterior shell, interior build-out, emergency power, and support infrastructure. All funds, both state and local, will be for contractual services.	1,500,000
Total State Funds Requested (must equal total from question #6)		1,500,000

13. Program Performance

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

The project will construct a resilient facility that can perform as fully functional post-disaster center and also as a reunification center in times of certain community emergencies. This enhancement would significantly bolster the City's emergency response capabilities and ensure continuity of services when they are needed most. Also improving indoor space for logistics for an existing park designated as a POD in the City's and Broward DEM emergency plans.



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2026-2027

LFIR # 1233

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

Community Reunification Services: Operate as a family reunification center during community emergencies (e.g., school incidents, mass-casualty events, missing persons investigations), Reception and triage of affected families, Mental-health and victim-support services, Law enforcement reunification operations.
Post-Disaster Operations: continuity of government (COG) functions, enabling essential services to continue after hurricanes or other disasters, logistics hub for resource management, staging, and distribution, Facilitate coordination with Broward County Emergency Management and other partner agencies, Host damage assessment teams, contractors, inspectors, and recovery personnel.
Point of Distribution (POD) Operations: logistical activity for the existing POD site within the park, offer staging space for POD staff and volunteers, Emergency volunteer coordination (CERT, spontaneous volunteers), Provide indoor storage for Water, food, tarps, ice, and emergency supplies.

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

Family reunification center services during community emergencies (e.g., school incidents, mass-casualty events, missing persons investigations). Reception and triage of affected families; Private meeting rooms for notifications; Mental-health and victim-support services; increase community access to critical services during recovery periods. Provide indoor storage for Water, food, tarps, ice, and emergency supplies for citizens.

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

The project will benefit the entire community with a critical facility that provides a post-disaster recovery center, including continued governmental operation. The City will use the facility directly after an event to provide information and services such as recovery schedules, public assistance, food and water distribution, and charging stations.

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

The benefits of the project can be measured in the short term by the ability of the City to incorporate the new facility into its emergency management response plans. In the long term, the benefits would be from the use of the facility to provide post-disaster recovery services to residents of the community after a disaster such as a hurricane or mass shooting event.

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?

Potential penalties for not meeting deliverables or performance measures would be the withholding of funding with the possibility of the City not receiving the appropriated funds or a fraction of the amount provided by the State.

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



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2026-2027

LFIR # 1233

☐ 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:

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)



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2026-2027

LFIR # 1233

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

d. Phone Number

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