



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2026-2027

LFIR # 1468

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

To remove accessibility barriers and upgrade City-owned facilities to meet current ADA accessibility standards, including compliant ramps, doors, walkways, elevators, and restroom facilities. The project improves accessibility across multiple municipal buildings, parks, and public rights-of-way consistent with the City's ADA Transition Plan and Title II requirements.

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	900,000
Total State Funds Requested	900,000

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)	900,000	75%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	300,000	25%
Other	0	0%
Total Project Costs for Fiscal Year 2026-2027	1,200,000	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.

Complete questions 10 and 11 for Fixed Capital Outlay Projects



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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)?

Yes

c. What is the estimated start date of construction?

09/01/2026

d. What is the estimated completion date of construction?

09/30/2027

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

City budget.

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 Sarasota.

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	Design, permitting, and construction of accessibility improvements (ramps, entrances, doors, elevators, sidewalks).	900,000
Total State Funds Requested (must equal total from question #6)		900,000

13. Program Performance

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

To remove accessibility barriers and upgrade City-owned facilities to meet current ADA accessibility standards, including compliant ramps, doors, walkways, elevators, and restroom facilities. The project improves accessibility across multiple municipal buildings, parks, and public rights-of-way consistent with the City's ADA Transition Plan and Title II requirements.

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

Directly benefits residents, visitors, and employees accessing City facilities and public spaces.

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



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Directly benefits residents, visitors, and employees accessing City facilities and public spaces.

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

Target Populations: Physically disabled, Elderly persons, General public. Estimated to serve >10,000 individuals annually through improved access to civic facilities, parks, and pedestrian routes. 400 maximum characters allowed.

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

Expected benefit includes: (1) improved transportation conditions through remediated sidewalks, curb cuts, and other accessibility improvements planned to improve pedestrian traffic conditions by removing barriers; (2) increased economic activity through improved access supports local economic drivers — parks, cultural venues, and commercial corridors — by providing more options for visitors and residents with limited mobility; (3) and improved quality of life for residents and visitors by ensuring barrier-free access to civic, cultural, and recreational amenities. The methodology to measure the outcomes will include: (1) the City's Click2Fix reporting system for residents to report accessibility issues. A reduction in reported complaints post-construction would indicate improved pedestrian conditions; (2) track visitor attendance and business activity data in newly accessible areas post-improvement; and (3) annual ADA progress report documenting barrier removals and public surveys.

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?

Penalties for failing to meet deliverables or performance measures would include: a) a return of funding and, b) a report explaining why the deliverables or performance measures were not met.

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:

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



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- ☐ 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
- d. Phone Number



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