



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2026-2027

LFIR # 1514

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The Town of Horseshoe Beach, Florida, suffered severe damage from Hurricane Helene, including the complete destruction of its Town Hall, the central facility for local government operations. Without this critical infrastructure, municipal functions such as administrative services, public meetings, and emergency coordination have been significantly disrupted, impacting both residents and town officials. This project seeks funding to rebuild the Town Hall including the post office to modern, hurricane-resilient standards.

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	2,500,000
<b>Total State Funds Requested</b>	<b>2,500,000</b>

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)	2,500,000	100%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2026-2027</b>	<b>2,500,000</b>	<b>100%</b>

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		
2025-26	0	476,600	2112A	No

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)?

No

##### c. What is the estimated start date of construction?

07/26/2026

##### d. What is the estimated completion date of construction?

01/01/2028

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

Normal operating budget items.

#### 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.

The Town of Horseshoe Beach.

#### 12. Details on how the requested state funds will be expended

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Construction of the new Town Hall Facility.	2,500,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>2,500,000</b>

#### 13. Program Performance

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

Securing necessary permits and regulatory approvals and construction of phase one of the new town hall facility. The new hurricane-resilient facility will house administrative offices, public meeting spaces, a protected post office, and emergency operations capabilities, ensuring the town government can function efficiently.

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

This is a fixed capital outlay project. All funds will be used for the construction of the new Town Hall facility which will provide the Town of Horseshoe Beach with government operations, a protected post office, emergency operations capabilities in the new location that would mitigate further risk.



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

The citizens of Horseshoe Beach will regain a functional Town Hall, a protected post office, a location for their water and utilities offices, enhance community engagement with a functional public meeting place, and improve disaster preparedness and response capabilities, ultimately benefiting all residents.

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

All citizens and businesses of Horseshoe Beach and the surrounding zip code of the post office.

**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 the Town of Horseshoe Beach with a storm-resilient Town Hall facility on a larger parcel of land outside of the FEMA Special Flood Hazard Areas to also include a post office. Please see the attached Opinion of Probable Cost for the methodology of this outcome.

**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?**

None

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

**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):**

Hurricane Helene

**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#:**

798044

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

434,792

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

- ☐ Yes, Applied
- ☐ Yes, Received



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☒ 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) Municipality

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.*