



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2026-2027

LFIR # 1693

1. Project Title

2. Senate Sponsor

3. Date of Request

#### 4. Project/Program Description

Utility, drainage, and parking improvements are needed at LNA to support the redevelopment of the existing fixed base operator site, enabling the construction of new terminal and hangar facilities at the Airport. Tenant and user parking along the southwest will be improved and separated by fencing from the airfield enhancing safety and security. Phase 3 development consists of reconfiguring the central access road and parking area, stormwater collection system and drainage network and electrical and utility infrastructure. Phase 4 development includes a new 26-foot-wide access road along the southwest hangars, a vehicle parking lot with approximately 110 new parking spaces, and a new drainage network and accompanying stormwater collection system improvements.

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	2,000,000
<b>Total State Funds Requested</b>	<b>2,000,000</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)	2,000,000	36%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	3,600,000	64%
Local	0	0%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2026-2027</b>	<b>5,600,000</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		

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 Palm Beach County Department of Airports operates four airports. Other sources of funding are constrained and unavailable due to the rising costs of implementation.



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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)?

Yes

c. What is the estimated start date of construction?

04/01/2026

d. What is the estimated completion date of construction?

01/01/2027

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

Airport operating revenues.

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.

Palm Beach County, Department of Airports. Palm Beach County owns and operates the airport.

### 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	2,000,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>2,000,000</b>

### 13. Program Performance

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

This project will enable economic growth for the community. The current facilities to be improved are aging, severely constrained, and unable to meet demand. Separating tenant and user parking from the airfield will also provide enhanced safety and security of the airport.

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



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The funds will be used to construct the project which enables reconfiguration of facilities to more closely align demand and capacity.

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

Improved facilities and economic impact of fixed base operator services for local and transient users.

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

Airport tenants and users. By 2044, approximately 154,000 annual aircraft operations are forecasted for the airport. With each operation is an opportunity for airport tenants to provide services including fuel sales, maintenance, flight training, charter operations, and aircraft storage.

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

The FAA encourages airports to be financially self-sustaining. This project will increase operating revenues to the airport and enhance economic benefit to tenants from the community. An increase in revenues and leased parcels/facilities will measure success.

**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?**

Our performance measures are directly related to the health of the local, regional, and national economy, as well as regulations. Factors affecting the health of the economy and regulatory affairs are outside of the control of the airport operator. Additional penalties may be unjust.

**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.*