

1. Project Title

## The Florida Senate Local Funding Initiative Request Fiscal Year 2026-2027

Tallahassee Fire Department Fire Station 17

**LFIR # 1804** 

2. Senate Sponsor	Corey Simon					
3. Date of Request	12/9/2025					
1. Project/Program D	escription					
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disadvantaged com- services. It will also	munity by reducing serve as a commu	response times	s, imp fferin	oroving fire suppressic g fire prevention educ resources while stren	on, and expanding of ation, emergency r	oreparedness
5. State Agency to re	ceive requested fu	unds Dep	artme	ent of Financial Service	es	
State Agency conta	acted? No					
6. Amount of the Non	recurring Reques	t for Fiscal Yea	ar 202	26-2027		
Type of Funding				Amoi	unt	
Operating					0	l
Fixed Capital Outlay	/				1,500,000	l
<b>Total State Funds</b>	Requested				1,500,000	ı
7. Total Project Cost f  Type of Funding	or Fiscal Tear 202	26-2027 (Includ	ing r	Amount	Percentage	<del>;Ct)</del>
Total State Funds Requested (from question #6)				1,500,000	5%	l
Matching Funds		,	•			l
Federal				0	0%	l
State (excluding the	amount of this req	uest)		28,500,000	95%	l
Local				0	0%	ſ
Other				0	0%	l
<b>Total Project Costs</b>	s for Fiscal Year 2	026-2027		30,000,000	100%	
8. Has this project pro If yes, provide the	•	•	?	No		
Fiscal Year	Amount			Specific	Vetoed	l
(уууу-уу)	Recurring	Nonrecurri	ng	Appropriation #		l
9. Is future-year fund	ina likely to be red	nuested?		No		
-		•				
a. If yes, indicate n	_					
b. Describe the so	urce of funding th	at can be used	in li	eu of state funding.		
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a. What is the current phase of the project?							
Planning	O Design	<ul><li>Construction</li></ul>	O N/A				
b. Is the project "	shovel ready" (i	e permitted)?	Yes				
c. What is the est	imated start date	e of construction?	08/01/2025				
d. What is the est	imated completi	on date of construc	tion?	12/31/2026			
e. What funding stream will be used for ongoing operations and maintenance of the project?							
The City of Tallahassee will use the Fire Services Fund to fund the fire station's ongoing operations and maintenance.							

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.

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### 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/Majo	or Renovation:				
Construction/Renovation/Land/ Planning Engineering	The funding will be used to construct the new fire station, which will include fire responders, fire prevention teams, and a 160-person community room.	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 requested funds will be used to construct a new fire station in an underserved community that experiences over 5,000 emergency calls annually. This investment will improve response times, enhance fire suppression and medical services, and provide fire prevention education and community engagement opportunities, ensuring greater public safety and support for residents and businesses.

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



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The funds will support the construction of a new fire station that will provide fire suppression, emergency medical response, fire prevention education, and community engagement services. This facility will house fire responders, prevention teams, and a 160-person community room, ensuring faster response times, improved public safety, and enhanced emergency preparedness for an underserved area.

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

The funding will provide critical fire suppression, emergency medical response, and fire prevention education to residents in an underserved area with over 5,000 emergency calls annually. The new fire station will ensure faster response times, improved life-saving capabilities, and enhanced public safety programs while serving as a community resource for education and engagement.

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

The target population includes underserved and economically disadvantaged residents and the general population in Tallahassee's Southside, ensuring equitable access to fire suppression, emergency medical response, and public safety resources. The new fire station will serve thousands of residents, businesses, and visitors, addressing over 5,000 emergency calls annually and enhancing community-wide safety and resilience.

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

The new fire station will improve response times, fire suppression, and medical services in an underserved area with over 5,000 emergency calls annually, while also lowering insurance costs, attracting businesses, and supporting fire prevention education. Success will be measured through response time data, emergency call volumes, fire damage reduction, and community engagement metrics.

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?

tc	or failing to meet deliverables or performance measures provided for in the contract?
-	The requested funding would be returned to the appropriate state agency.
14. Is	this project related to mitigation, response, or recovery from a natural disaster? No
a. I	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 infastructure)
<b>b.</b> l	Name of the natural disaster (or Executive Order # for events not under a federal declaration):
15. H	as the entity applied for or received federal assistance for this project?
	Yes, Applied
	Yes, Received
	No
	No, but intends to apply
a. I	If yes, provide the FEMA project worksheet ID#:

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



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. Has the entity app	olied for or received state	assistance	for this projec	t (other than	n this reques
☐ Yes, Applied					
☐ Yes, Received					
□ No					
☐ No, but intends t	o apply				
a. If yes, specify the Commerce):	e program and state age	ncy (ex. Loca	al Governmen	t Emergenc	y Bridge Loai
. Requester Contac	t Information				
a. First Name	Reese	Last Name	Goad		
b. Organization	City of Tallahassee				
c. E-mail Address	Reese.Goad@talgov.com	n			
d. Phone Number	(850)891-8318	Ext.			
Recipient Contact					
<ul><li>a. Organization</li><li>b. Municipality and</li></ul>	City of Tallahassee d County Leon			]	
	-				
c. Organization Ty					
□For Profit Entity					
□Non Profit 501(d	c)(3)				
□Non Profit 501(d	c)(4)				
☑Local Entity					
□University or Co	ollege				
□Other (please sp	pecify)				
d. First Name	Thomas	Last Name	Whitley		
e. E-mail Address	Thomas.Whitley@talgov.	com			
f. Phone Number	(850)891-8208	Ext.			
Lobbyist Contact I	nformation				
a. Name	Kirk Pepper				
b. Firm Name	GravRobinson PA				



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d. Phone Number	(850)577-9090	

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