

1. Project Title

2. Senate Sponsor

3. Date of Request

Corey Simon

12/9/2025

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

Dixie County Old Town Fire Station - Revert and Reappropriate to Dixie County EOC Fire Station

LFIR # 1805

4. Project/Program D	escription				
measures, the Cour equipment costs, the 1578) can be used	nty spent under budg le EOC Fire Station h to complete critical p	jet on the Old To nas outstanding r ublic safety need	two fire stations (SF15) wn Fire Station (SF 15) needs. The savings of \$ ds for the EOC Fire States (S) revert and be reapproperations.	78). Due to increase 289,026 from Old T tion (SF 1577). The	ed construction and own Fire Station (SF county requests the
5. State Agency to re	ceive requested fu	nds Depart	ment of Financial Servi	CAS	
State Agency cont	-	Берап	ment of i manetal octivi	003	
6. Amount of the Non	recurring Request	for Fiscal Year	2026-2027		
Type of Funding			Amo	ount	
Operating				289,026	
Fixed Capital Outla	у			0	
Total State Funds	Requested			289,026	
7. Total Project Cost	for Fiscal Year 2026	6-2027 (includin	g matching funds ava	ilable for this proj	ect)
Type of Funding			Amount	Percentage	
Total State Funds F	Requested (from que	stion #6)	289,026	90%	
Matching Funds					
Federal			0	0%	
State (excluding the	e amount of this requ	est)	0	0%	
Local			31,000	10%	
Other			0	0%	
Total Project Cost	s for Fiscal Year 20	26-2027	320,026	100%	
8. Has this project pr If yes, provide the	reviously received s most recent instan	•	Yes		
Fiscal Year (yyyy-yy)	Amo Recurring	unt Nonrecurring	Specific Appropriation #	Vetoed	
2022-23	0	7,296,5		No	
	nonrecurring amou	nt per year.	No lieu of state funding.		
					



10. Status of Construction

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Complete questions 10 and 11 for Fixed Capital Outlay Projects

á	a. What is the current phase of the project?							
	Planning	O Design	Construction	O N/A				
ı	o. Is the project "	shovel ready" (i	.e permitted)?					
(c. What is the est	imated start dat	e of construction?					
•	d. What is the est	imated complet	ion date of constru	ction?				
•	e. What funding s	stream will be us	sed for ongoing ope	rations a	nd maintenand	e of the project?		
	Local funds and labor will be used for any operational or maintenance needs.							
11.	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.							
	Dixie County Bo	Dixie County Board of County Commissioners.						

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	Funds will be used to repave the existing parking lot, drainage and erosion control measures, furnishings for the station and office areas, and equipment.	289,026		
Consultants/Contracted Services/Study		0		
Fixed Capital Construction/Major Renovation:				
Construction/Renovation/Land/ Planning Engineering		0		
Total State Funds Requested (m	nust equal total from question #6)	289,026		

13. Program Performance

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

In FY 2022-23, Dixie County was appropriated funds for two fire stations, (SF 1577/HB 3749 and HB 3751/SF 1578). Through cost-cutting measures, the County spent under budget on the Old Town Fire Station (SF 1579). Due to increased construction and equipment costs, the EOC Fire Station has outstanding needs. The savings of \$289,026 for Old Town Fire Station can be used to complete critical public safety needs for the EOC Fire Station (SF 1577).

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



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c. What direct services will be provided to citizens by the appropriation project? The completion of the EOC Fire Station will allow efficient and quick response of services to citizens. d. Who is the target population served by this project? How many individuals are expected to be served? Dixie County, thousands of individuals will be served. e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured? Completion of the EOC Fire Station allows for critical safety needs of citizens to be fulfilled. Efficient and quick response of services will be a benefit. f. What are the suggested penalties that the contracting agency may consider in addition to its standard penaltifor failing to meet deliverables or performance measures provided for in the contract. If the funds are re-appropriated as requested, Dixie County will ensure that all deliverables and performance measures set forth in the funding agreement are met. These measures will included engaging a compliance/project management team to work with County staff to oversee administration and compliance of the appropriated funds. 14. Is this project related to mitigation, response, or recovery from a natural disaster? 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. 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#:		tation and office areas, and equipment.
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□ No, but intends to apply a. If yes, provide the FEMA project worksheet ID#:		Yes, Applied
□ No, but intends to apply a. If yes, provide the FEMA project worksheet ID#:		Yes, Received
a. If yes, provide the FEMA project worksheet ID#:		No
		No, but intends to apply
b. Provide the total project cost listed on the FEMA project worksheet:	a. I	If yes, provide the FEMA project worksheet ID#:
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	b. l	Provide the total project cost listed on the FEMA project worksheet:
	П	Yes, Applied



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	☐ Yes, Received				
	□ No				
	☐ No, but intends to	o apply			
	a. If yes, specify the Commerce):	e program and sta	te agency (ex. Loc	al Government Emerger	cy Bridge Loan, Department of
17.	Requester Contact	Information			_
	a. First Name	Jody	Last Name	Stephenson	
	b. Organization	Dixie County Board	d of County Commis	sioners	
	c. E-mail Address	boccdistrict1@dixi	ecounty.us		
	d. Phone Number	(352)498-1206	Ext.		
18.	Recipient Contact				
	a. Organization		d of County Commis	ssioners	
	b. Municipality and	I County Dixie			
	c. Organization Ty	pe			
	□For Profit Entity				
	□Non Profit 501(c	e)(3)			
	□Non Profit 501(c	e)(4)			
	☑Local Entity				
	□University or Co	llege			
	□Other (please sp	pecify)			
	d. First Name	Martha	Last Name	McCaskill	
	e. E-mail Address	grantcoordinator@	dixiecounty.us		
	f. Phone Number	(352)498-1426	Ext.		
19.	Lobbyist Contact I	nformation			
	Jennifer Jankowski Green				
	b. Firm Name Liberty Partners of Tallahassee LLC				
	c. E-mail Address jennifer@libertypartnersfl.com				
	d. Phone Number (850)841-1726				



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