



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2026-2027

LFIR # 1961

1. Project Title
2. Senate Sponsor
3. Date of Request

4. Project/Program Description

This project will expand commercial air service at Tallahassee International Airport (TLH) by recruiting new nonstop routes and increasing seat capacity to improve connectivity within Florida and to key regions nationwide. The City will provide a 100% local match, demonstrating strong shared investment. Funding will support airline recruitment, route incentives, and related planning consistent with Federal Aviation Administration (FAA) Air Carrier Incentive Program guidance, strengthening statewide access, economic growth, and transportation resiliency for the Capital Region.

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	2,000,000
Fixed Capital Outlay	0
Total State Funds Requested	2,000,000

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)	2,000,000	50%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	2,000,000	50%
Other	0	0%
Total Project Costs for Fiscal Year 2026-2027	4,000,000	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		
>5 years	0	1,000,000	2234	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)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

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

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.

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	Funding will be used to recruit and attract new commercial air service in accordance with FAA Air Carrier Incentive Program guidance, state travel demand, and community input, and to support planning, airspace studies, and equipment that enhance multimodal transportation at TLH.	2,000,000
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		2,000,000

13. Program Performance

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

The funds will expand air service at Tallahassee International Airport by attracting new nonstop routes, increasing seat capacity, and improving intrastate connectivity to Florida's capital; strengthening economic growth, tourism, and statewide transportation resiliency.

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



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Activities include recruiting and securing new commercial air service routes, increasing flight capacity, and enhancing intrastate connectivity. Services will include planning, marketing, and airspace studies per FAA Air Carrier Incentive Program guidance, along with related infrastructure and equipment improvements at Tallahassee International Airport.

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

Citizens will benefit from expanded flight options, improved statewide connectivity, and greater access to business and leisure travel. The project will create jobs, boost tourism, and strengthen economic opportunities while enhancing transportation efficiency and resiliency for Tallahassee and the surrounding region.

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

The target population includes residents, businesses, government agencies, and visitors traveling to and from Florida's capital region. Expanded air service at TLH is expected to directly benefit approximately one million annual passengers, while indirectly supporting thousands of regional jobs and businesses that rely on efficient, reliable air transportation.

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

The project will enhance air service, increase economic activity, and strengthen statewide connectivity by adding new nonstop routes and greater flight capacity, boosting tourism, attracting business investment, creating jobs, and improving transportation resiliency in Florida's capital region. Success will be measured by tracking new routes, increased seat capacity, passenger growth, job creation, tourism revenue, and overall economic impact.

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?

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?

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:



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

- ☐ 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



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d. Phone Number

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