



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2026-2027

LFIR # 3167

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

**4. Project/Program Description**

The completion of a new U.S. Customs and Border Protection (CBP) office at the Port of Fernandina. The current building has been deemed inoperable, and without a new building CBP could cease operations in Fernandina and the Port could lose its "Port of Entry Designation". The port of entry designation allows the Port of Fernandina with CBP to carry out customs and immigration operations including conducting inspections, processing immigration documents, and to collect duties and taxes.

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	1,875,000
<b>Total State Funds Requested</b>	<b>1,875,000</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)	1,875,000	66%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	646,314	23%
Local	0	0%
Other	296,314	11%
<b>Total Project Costs for Fiscal Year 2026-2027</b>	<b>2,817,628</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	350,000	1871A	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.**
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**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?** 01/01/2027

**d. What is the estimated completion date of construction?** 12/31/2027

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

Stevedore Revenue.

**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.**

Local Government - Ocean, Highway and Port Authority

**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	Planning, Design, Engineering, and Construction of a new Customs and Border Protection Building at the Port of Fernandina.	1,875,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>1,875,000</b>

**13. Program Performance**

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

The completion of a new U.S. Customs and Border Protection (CBP) office at the Port of Fernandina. The current building has been deemed inoperable, and without a new building CBP could cease operations in Fernandina and the Port could lose its "Port of Entry Designation".

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

The port of entry designation allows the Port of Fernandina with CBP to carry out customs and immigration operations including conducting inspections, processing immigration documents, and to collect duties and taxes.

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



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By keeping the Port of Entry designation, the Port can continue to be an economic driver in Northeast Florida and be used as a tool to attract more businesses and high paying jobs to the region.

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

Statewide and regional impact to the general public. (Ensuring public safety as an immigration enforcement hub, economic benefits of an active port and the jobs it provides to the local economy).

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

Continued business and economic impacts for the region. Partner with the Nassau Co. Economic Development Board and Nassau County to track business inquiries that inquire about the port and its operations.

**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?**

Penalty: Withholding of grant funds until performance measures are met.

**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)?**

- Yes, Applied
- Yes, Received
- No
- No, but intends to apply



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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

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