

Appropriations Project Request - Fiscal Year 2020-21

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Pompano Beach Fire Station 52 Replacement Project

2. Date of Submission: 11/14/2019

3. House Member Sponsor: Patricia Williams

Members Copied:

4. DETAILS OF AMOUNT REQUESTED:

- Has funding been provided in a previous state budget for this activity? No
If answer to 4a is "No" skip 4b and 4c and proceed to 4d, Col. E
- What is the most recent fiscal year the project was funded?
- Were the funds provided in the most recent fiscal year subsequently vetoed?
- Complete the following Project Request Worksheet to develop your request:

FY:	Input Prior Year Appropriation for this project for FY 2019-20 <i>(If appropriated in 2019-20 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2020-21 <i>(Requests for additional RECURRING funds are prohibited.)</i>		
	Column: A	B	C	D	E	F
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated <i>(Recurring plus Nonrecurring: column A + column B)</i>	Recurring Base Budget <i>(Will equal non- vetoed amounts provided in Column A)</i>	Additional Nonrecurring Request	TOTAL Nonrecurring plus Recurring Base Funds <i>(Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)</i>
Input Amounts:					2,439,000	2,439,000

5. Are funds for this issue requested in a state agency's Legislative Budget Request submitted for FY 2020-21? No

5a. If yes, which state agency?

5b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? Department of Financial Services

5c. Has the appropriate state agency for administering the funding, if the request were appropriated, been contacted? No

5d. Describe penalties for failing to meet deliverables or performance measures which the agency should provide in its contract to administer the funding if appropriated.

\$1,000.00 per day (liquidated damages)

6. Requester:

- a. Name: Horacio Danovich
- b. Organization: City of Pompano Beach, CIP and Innovation District Director
- c. Email: horacio.danovich@copbfl.com
- d. Phone #: (954)786-7834

7. Contact for questions about specific technical or financial details about the project:

- a. Name: Horacio Danovich
- b. Organization: City of Pompano Beach, CIP and Innovation District Director
- c. Email: horacio.danovich@copbfl.com
- d. Phone #: (954)786-7834

8. Is there a registered lobbyist working to secure funding for this project?

- a. Name: Yolanda Cash Jackson
- b. Firm: Becker & Poliakoff
- c. Email: yjackson@beckerlawyers.com
- d. Phone #: (954)364-6094

9. Organization or Name of entity receiving funds:

- a. Name: City of Pompano Beach
- b. County (County where funds are to be expended): Broward
- c. Service Area (Counties being served by the service(s) provided with funding): Broward

10. What type of organization is the entity that will receive the funds? (Select one)

- For Profit
- Non Profit 501(c) (3)
- Non Profit 501(c) (4)
- Local Government
- University or College
- Other (Please describe)

11. What is the specific purpose or goal that will be achieved by the funds being requested?

Demolish and replace an old and outdated fire station serving a largely elderly community including various 55+ housing complex and independent and assisted living facilities. The existing station lacks adequate female quarters and is improperly equipped to manage a high demand of emergency calls.

12. Provide specific details on how funds will be spent. (Select all that apply)

Spending Category	Description	Nonrecurring (Should equal 4d, Col. E) Enter "0" if request is zero for the category
Administrative Costs:		
<input type="checkbox"/> a. Executive Director/Project Head Salary and Benefits		
<input type="checkbox"/> b. Other Salary and Benefits		
<input type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other		
<input checked="" type="checkbox"/> d. Consultants/Contracted Services/Study	Assist with design analysis upon completion of planning stages.	0
Operational Costs:		
<input type="checkbox"/> e. Salaries and Benefits		
<input type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
<input checked="" type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering	Replace existing Fire Station.	2,439,000
TOTAL		2,439,000

13. For the Fixed Capital Costs requested with this issue (In Question 12, category "h. Fixed Capital Outlay" was selected), what type of ownership will the facility be under when complete? (Select one correct option)

For Profit

- Non Profit 501(c) (3)
- Non Profit 501(c) (4)
- Local Government (e.g., police, fire or local government buildings, local roads, etc.)
- State agency owned facility (For example: college or university facility, buildings for public schools, roads in the state transportation system, etc.)
- Other (Please describe)

14. Is the project request an information technology project?

No

15. Is there any documented show of support for the requested project in the community including public hearings, letters of support, major organizational backing, or other expressions of support?

Yes

15a. Please Describe:

The project is supported and has been recommended by the City's Fire Department. The station is outdated and does not meet current standards including adequate accommodations for female firefighters. The project is strongly supported by local residents including operators of various Assisted Living facilities and elderly homes.

16. Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served?

Yes

16a. Please Describe:

Fire Department has conducted an extensive analysis of all City facilities and determined Fire Station 52 lacks minimum desirable elements to operate efficiently including female quarters and ADA compliance.

17. Will the requested funds be used directly for services to citizens?

Yes

17a. What are the activities and services that will be provided to meet the purpose of the funds?

Funds will be used to enlarge the existing fire station to facilitate larger emergency apparatus and to allow for expansion of services as the population and related call volume continue to grow. Living quarters will be updated to accommodate the need to have separate sleeping facilities for male and female firefighters. A full gym area will be developed to ensure appropriate physical fitness for the emergency response personnel to ensure that they are fit for duty and likewise to reduce their

17b. Describe the direct services to be provided to the citizens by the funding requested.

Station 52 services a large portion of the existing population, including a vulnerable population of elderly persons and individuals living in adult congregate living facilities. This station's call volume is so high that it warranted placing two fire suppression units and two rescue units, which is double the allocation of units found in other stations within the same geographic services area. For fiscal year 2018-2019, this particular station responded to 6, 774 incidents with call types ran

17c. Describe the target population to be served (i.e., "the majority of the funds requested will serve these target populations or groups.").

Select all that apply to the target population:

- Elderly persons
- Persons with poor mental health
- Persons with poor physical health
- Jobless persons
- Economically disadvantaged persons
- At-risk youth
- Homeless
- Developmentally disabled
- Physically disabled
- Drug users (in health services)
- Preschool students
- Grade school students
- High school students
- University/college students
- Currently or formerly incarcerated persons
- Drug offenders (in criminal Justice)
- Victims of crime
- General (The majority of the funds will benefit no specific group)
- Other (Please describe): Local residents and tourists

17d. How many in the target population are expected to be served?

- < 25
- 25-50
- 51-100
- 101-200
- 201-400
- 401-800
- >800

18. What benefits or outcomes will be realized by the expenditure of funds requested? (Select each Benefit/Outcome that applies)

Benefit or Outcome	Provide a specific measure of the benefit or outcome	Describe the method for measuring level of benefit
<input checked="" type="checkbox"/> Improve physical health	Increase number of pedestrians walking in the area.	Local Area Planning reporting standards
<input type="checkbox"/> Improve mental health		
<input type="checkbox"/> Enrich cultural experience		
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input checked="" type="checkbox"/> Improve quality of education	Design will be used to teach others valuable engineering standards	Local Area Planning reporting standards
<input checked="" type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality	New station provides safer conditions and prompt response to local residents and merchants	Local Area Planning reporting standards
<input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)	New station provides safer conditions and prompt response to local residents and merchants	Local Area Planning reporting standards
<input type="checkbox"/> Improve transportation conditions		
<input checked="" type="checkbox"/> Increase or improve economic activity	New station provides safer conditions and prompt response to local residents and merchants	Local Area Planning reporting standards
<input type="checkbox"/> Increase tourism		
<input checked="" type="checkbox"/> Create specific immediate job opportunities	New station provides new design and construction jobs.	Local Area Planning reporting standards
<input type="checkbox"/> Enhance specific individual's economic self sufficiency		

<input type="checkbox"/> Reduce recidivism		
<input type="checkbox"/> Reduce substance abuse		
<input type="checkbox"/> Divert from Criminal/Juvenile justice system		
<input type="checkbox"/> Improve wastewater management		
<input checked="" type="checkbox"/> Improve stormwater management	Station design will address stormwater impacts caused by runoff accumulation in the vicinity. Slopes and grading will be improved.	Local Area Planning reporting standards
<input checked="" type="checkbox"/> Improve groundwater quality	Station design will address stormwater impacts caused by runoff accumulation in the vicinity. Slopes and grading will be improved.	Local Area Planning reporting standards
<input type="checkbox"/> Improve drinking water quality		
<input checked="" type="checkbox"/> Improve surface water quality	Station design will address stormwater impacts caused by runoff accumulation in the vicinity. Slopes and grading will be improved	Local Area Planning reporting standards
<input checked="" type="checkbox"/> Other (Please describe): Improved emergency response	Service will ensure response time is consistent with ISO 1 classification. Response time to be less than 5-6 minutes.	Local Area Planning reporting standards

19. Provide the total cost of the project for FY 2020-21 from all sources of funding (Enter "0" if amount is zero):

Type of Funding	Amount	Percent of Total	Are the other sources of funds guaranteed in writing?
1. Amount Requested from the State in this Appropriations Project Request:	2,439,000	29.5%	N/A

2. Federal:	0	0.0%	No
3. State: (Excluding the requested Total Amount in #4d, Column F)	2,439,000	29.5%	Yes
4. Local:	3,400,000	41.1%	Yes
5. Other:	0	0.0%	No
TOTAL	8,278,000	100%	

20. Is this a multi-year project requiring funding from the state for more than one year?

No