



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2024-2025

LFIR # 3338

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Equipment and technology renovations for the MCC are needed to allow the City to communicate more effectively locally and regionally during times of crisis. The MCC will facilitate much-needed ICS command and control components. Also, it provides fail safe support of infrastructure, logistics and apparatus, as well as allowing for interoperability communications between public safety agencies.

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2024-2025

Type of Funding	Amount
Operations	500,000
Fixed Capital Outlay	0
Total State Funds Requested	500,000

7. Total Project Cost for Fiscal Year 2024-2025 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	500,000	100%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
Total Project Costs for Fiscal Year 2024-2025	500,000	100%

8. Has this project previously received state funding?

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. Is future 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.

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

If yes, indicate the amount of funds received and what the funds were used for.



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Complete questions 11 and 12 for Fixed Capital Outlay Projects

11. 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?

12. 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.

13. 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: Other		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other	The equipment the City needs for the MCC includes: LEO mobile satellite system, remote tactical cameras with microwave link to set up remote situational awareness back to C.P., bonded cellular data device, 30KW generator, mast cameras, video distribution systems, multi-band radio consoles, replacement monitors and ruggedized fiber optic data cable systems.	500,000
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)		500,000

14. Program Performance

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

Equipment and technology renovations for the MCC are needed to allow the City to communicate more effectively locally and regionally during times of crisis. The MCC will facilitate much-needed ICS command and control components. Also, it provides fail safe support of infrastructure, logistics and apparatus, as well as allowing for interoperability communications between public safety agencies.



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

The equipment needed includes: LEO mobile satellite system, remote tactical cameras with microwave link to set up remote situational awareness back to C.P., bonded cellular data device, 30KW generator, mast cameras, video distribution systems, multi-band radio consoles, replacement monitors and ruggedized fiber optic data cable systems.

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

Statewide Hurricane Disaster Response, urban disaster response, task force operations investigates human trafficking, crime prevention efforts, youth drug awareness, D.U.I. checkpoints, Mini Station coordinating evacuations, support critical incidents (homicide scenes, hostage negotiation, large crime scenes, assist other agencies), hurricane preparation & awareness training, mass gatherings, etc.

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

The 15,000 residents of Florida City.

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

To protect the general public from harm by providing Statewide Hurricane Disaster Response, urban disaster response, task force operations investigates human trafficking, crime prevention efforts, youth drug awareness, D.U.I. checkpoints, Mini Station coordinating evacuations, support critical incidents (homicide scenes, hostage negotiation, large crime scenes, assist other agencies), hurricane preparation & awareness training, mass gatherings, etc. We will evaluate the effectiveness of the mobile command post using the equipment specified in this grant request.

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 the contract?

The penalties for non-deliverables would be the withholding of funds

15. Requester Contact Information

a. First Name **Last Name**

b. Organization

c. E-mail Address

d. Phone Number **Ext.**

16. 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)



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d. First Name Last Name

e. E-mail Address

f. Phone Number

17. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number