# Appropriations Project Request - Fiscal Year 2018-19

## For projects meeting the Definition of House Rule 5.14

- 1. Title of Project: North Miami Beach North Dade Regional Emergency Operations Center
- 2. Date of Submission: <u>11/14/2017</u>
- 3. House Member Sponsor: <u>Joseph Geller</u> Members Copied:

### 4. DETAILS OF AMOUNT REQUESTED:

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

FY:	Input Prior Year Appropriation for this project for FY 2017-18 (If appropriated in 2017-18 enter the appropriated amount, even if vetoed.)			for FY 2017-18for FY 2018-19(If appropriated in 2017-18 enter the(Requests for additional RECURRING funds are prohibited)		
Column:	А	В	С	D	E	F
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated (Recurring plus Nonrecurring: column A + column B)	Recurring Base Budget (Will equal non- vetoed amounts provided in Column A)	Additional Nonrecurring Request	TOTAL Nonrecurring plus Recurring Base Funds (Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)
Input Amounts:					610,000	610,000

5. Are funds for this issue requested in a state agency?s Legislative Budget Request submitted for FY 2018-19? 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? Executive Office of the Governor

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.

reimbursement of funds

#### 6. Requester:

- a. Name: <u>Ana Garcia</u>
- b. Organization: City of North Miami Beach
- c. Email: ana.garcia@citynmb.com
- d. Phone #: <u>(305)948-2900</u>
- 7. Contact for questions about specific technical or financial details about the project:
  - a. Name: <u>Fernando Roriguez</u>
  - b. Organization: City of North Miami Beach
  - c. Email: fernando.rodriguez@citynmb.com
  - d. Phone #: <u>(305)948-2900</u>
- 8. Is there a registered lobbyist working to secure funding for this project?
  - a. Name: <u>Rana Brown</u>
  - b. Firm: Ronald L. Book P.A.
  - c. Email: rana@rlbookpa.com
  - d. Phone #: <u>(850)224-3427</u>
- 9. Organization or Name of entity receiving funds:
  - a. Name: City of North Miami Beach
  - b. County (County where funds are to be expended): Miami-Dade
  - c. Service Area (Counties being served by the service(s) provided with funding): Miami-Dade
- 10. What type of organization is the entity that will receive the funds? (Select one)
  - O For Profit
  - O Non Profit 501(c) (3)
  - O Non Profit 501(c) (4)
  - $\odot$  Local Government
  - O University or College
  - O Other (Please describe)

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

To properly fund facility upgrades and expansion required to optimize its effectiveness in serving and protecting the city's residents and providing them highly valuable updates; furthermore, it will improve the facilities level of protection form storm-related impact.

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:				
□a. Executive Director/Project Head Salary and Benefits				
□b. Other Salary and Benefits				
□c. Expense/Equipment/Travel/Supplies/Other				
□d. Consultants/Contracted Services/Study				
Operational Costs:				
□e. Salaries and Benefits				
□f. Expenses/Equipment/Travel/Supplies/Other				
□g. Consultants/Contracted Services/Study				
Fixed Capital Construction/Major Renovation:				
☑h. Construction/Renovation/Land/Planning Engineering	Upgrade of EOC to include window sealing, replacement of shutters where needed, replacement of HVAC chillers and air handlers, replacement of emergency power generator and expansion to include a communications/public affairs	610,000		

	operation.	
TOTAL		610,000

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)

OFor Profit

ONon Profit 501(c) (3)

ONon Profit 501(c) (4)

• Local Government (e.g., police, fire or local government buildings, local roads, etc.)

OState agency owned facility (For example: college or university facility, buildings for public schools, roads in the state transportation system, etc.)

OOther (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?

<u>No</u>

- 16. Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served? <u>No</u>
- 17. Will the requested funds be used directly for services to citizens? <u>Yes</u>
  - 17a. What are the activities and services that will be provided to meet the purpose of the funds?

The EOC is where all Incident Command operations are conducted. Pre-storm, during-storm and post-storm monitoring, activities coordination, response direction, including assistance to residents; additionally, important event updates (both internal and to the media) are continuously provided from the EOC.

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

Prior to a storm event, the EOC helps to direct and coordinate preparation activities, including removal of debris that may become projectiles, boarding up community centers, sandbag distribution to residents, tree trimming and with dissemination of important

information. Post-storm activities include roadway clearing, flood mitigation, disposal of debris, tree trimming and removal, assessment of electric power loss, and providing water and other assistance to residents in need.

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)

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

O< 25

O25-50

O51-100

O101-200

O201-400

O401-800

⊙>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
□Improve physical health		
□Improve mental health		
□Enrich cultural experience		
□Improve agricultural production/promotion/education		
□Improve quality of education		
□Enhance/preserve/improve environmental or fish and wildlife quality		
☑Protect the general public from harm (environmental, criminal, etc.)	Number of roadway miles cleared post storm. This enables residents to access needed supplies, including drinking water, food, and supplies to repair their property, if needed. Additionally, flood mitigation is directly correlated to the health and safety of residents.	Documenting the roadway segments that are cleared after the storm, as well as the number of flood mitigation locations. Documenting the number of water distribution instances.
□Improve transportation conditions		
□Increase or improve economic activity		
□Increase tourism		
Create specific immediate job opportunities		
□Enhance specific individual?s economic self sufficiency		
□Reduce substance abuse		

Divert from Criminal/Juvenile justice system	
□Improve wastewater management	
□Improve stormwater management	
□Improve groundwater quality	
□Improve drinking water quality	
□Improve surface water quality	
□Other (Please describe):	

### 19. Provide the total cost of the project for FY 2018-19 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:	610,000	50.0%	N/A
2. Federal:	0	0.0%	No
3. State: (Excluding the requested Total Amount in #4d, Column F)	0	0.0%	No
4. Local:	610,000	50.0%	Yes
5. Other:	0	0.0%	No
TOTAL	1,220,000	100%	

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

<u>No</u>