

Appropriations Project Request - Fiscal Year 2017-18

For projects meeting the Definition of House Rule 5.14

1. Title of Project: City of Pembroke Pines - Fire Training Facility Project

2. Date of Submission: 02/03/2017

3. House Member Sponsor: Evan Jenne

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
- 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 (Note that column E will be the total of Recurring funds requested and Column F will be the total Nonrecurring funds requested, the sum of which is the Total of the Funds you are requesting in column G):

FY:	Input Prior Year Appropriation for this project for FY 2016-17 <i>(If appropriated in 2016-17 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2017-18 <i>(Requests for additional RECURRING funds are prohibited. Any additional Nonrecurring funding requested to supplement recurring funds in the base will result in the base recurring amount being converted to Nonrecurring .)</i>		
	Column:	A	B	C	D	E
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 Request <i>(Will equal the amount from the Recurring base in Column D to be CONVERTED to Nonrecurring plus the Additional Nonrecurring Request in Column E. These funds will be appropriated non-recurring if funded in the House Budget or the Final Conference Report on the budget.)</i>
Input Amounts:					1,275,000	1,275,000

5. Are funds for this issue requested in a state agency?s Legislative Budget Request submitted for FY 2017-18? 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? For example, if the requested issue pertains to services provided to inmates at correctional facilities, the Department of Corrections would be the most appropriate state agency. Department of Economic Opportunity

6. Requester:

- a. Name: Aner Gonzalez
- b. Organization: Assistant City Manager, City of Pembroke Pines
- c. Email: agonzalez@ppines.com
- d. Phone #: (954)450-1034

7. Contact for questions about specific technical or financial details about the project (Please retype if same as Requester):

- a. Name: Jonathan Bonilla
- b. Organization: Controller, City of Pembroke Pines
- c. Email: jbonilla@ppines.com
- d. Phone #: (954)518-9306

8. If there is a registered lobbyist, fill out the lobbyist information below.

- a. Name: Candice Ericks
- b. Firm: Ericks Consultants
- c. Email: candice@ericksconsultants.com
- d. Phone #: (954)648-1204

9. Organization or Name of Entity Receiving Funds(Please retype if same as Requestor or Contact):

- a. Name: City of Pembroke Pines
- 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?

The City of Pembroke Pines is requesting the funding for a new classroom building at its Fire Training Facility. The new building would provide a state of the art facility, which is safe and does not pose a health risk. It would reduce cost for repairs and maintenance and would enhance the training. The new facility would also benefit our residents who participate in the Fire Explorers Program, CERT, KAPOW and the Citizen's Fire Academy.

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

Spending Category	Description	Nonrecurring (Should equal 4d, Col. F) 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 type="checkbox"/> d. Consultants/Contracted Services/Study		
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	New classroom building to serve as a fire Training Facility	1,275,000
TOTAL		1,275,000

13. For the Fixed Capital Costs requested with this issue, what type of ownership will the facility be under when complete? (In Question 12, if ?h. Fixed Capital Outlay? was not selected, question 13 is not applicable)

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?

No

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

No

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

Yes

17a. Describe the target population to be served. 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
- Other (Please describe): ity of Pembroke Pines Fire Rescue Department

17b. 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 all 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	Increased cardiac and physical health	required annual physicals
<input checked="" type="checkbox"/> Improve mental health	increased confidence and cognition	competitive promotional testing
<input checked="" type="checkbox"/> Enrich cultural experience	increased access to job opportunities	Participation by at risk groups
<input checked="" type="checkbox"/> Improve agricultural production/promotion/education	wildland fire training	knowledge assessment
<input checked="" type="checkbox"/> Improve quality of education	Supervised Train-the-trainer programs	Assessment Pass/Fail rations
<input checked="" type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality	provide regional training	multi-agency participation
<input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)	training firefighters and police officers	performance evaluations

<input checked="" type="checkbox"/> Improve transportation conditions	vehicle accident training	Clear road data - post accident
<input checked="" type="checkbox"/> Increase or improve economic activity	courses offered and rentals	growth of paid use of facility
<input checked="" type="checkbox"/> Increase tourism	offer specialized courses	participation from out of area
<input checked="" type="checkbox"/> Create specific immediate job opportunities	Train specialized skills	Impact on specific job vacancies
<input checked="" type="checkbox"/> Enhance specific individual's economic self sufficiency	Offer certifications and specializations	Specialized course demand
<input checked="" type="checkbox"/> Reduce recidivism	Provide regional training	multi-agency participation
<input checked="" type="checkbox"/> Reduce substance abuse	Provide regional training	multi-agency participation
<input checked="" type="checkbox"/> Divert from Criminal/Juvenile justice system	Explorer Program	Track statistics of participants
<input type="checkbox"/> Improve wastewater management		
<input type="checkbox"/> Improve stormwater management		
<input type="checkbox"/> Improve groundwater quality		
<input type="checkbox"/> Improve drinking water quality		
<input type="checkbox"/> Improve surface water quality		
<input checked="" type="checkbox"/> Other (Please describe): Enhanced Services for Senior Citizens	Benefit to our members by providing a state of the art facility, which is safe and does not pose a health risk. It would reduce our costs for repairs and maintenance and would enhance the training provided to firefighters.	overall assessment

19. Provide the total cost of the project for FY 2017-18 from all sources of funding (Enter ?0? if amount is zero):

Type of Funding	Amount	Percent of Total (Automatically Calculates)	Are the other sources of funds guaranteed in writing?
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1. Amount Requested from the State in this Appropriations Project Request:	1,275,000	75.0%	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:	425,000	25.0%	Yes
5. Other:	0	0.0%	No
TOTAL	1,700,000	100%	

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

No