

Appropriations Project Request - Fiscal Year 2018-19

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Historic Miramar Public Safety Complex

2. Date of Submission: 11/13/2017

3. House Member Sponsor: Shevrin Jones

Members Copied:

4. DETAILS OF AMOUNT REQUESTED:

a. 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

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.) | | | Develop New Funds Request for FY 2018-19 (Requests for additional RECURRING funds are prohibited.) | | |
|-----------------------|---|-------------------------------------|--|--|---------------------------------|--|
| Column: | A | B | C | 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: | | | | | 850,000 | 850,000 |

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? Department of Law Enforcement

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 allocated

6. Requester:

- a. Name: Kathleen Woods-Richardson
- b. Organization: City of Miramar
- c. Email: kwoodsrichardson@miramarfl.gov
- d. Phone #: (954)602-3115

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

- a. Name: Dexter Williams
- b. Organization: City of Miramar Police Department
- c. Email: dwilliams@miramarpd.org
- d. Phone #: (954)602-4076

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

- a. Name: Ronald Book
- b. Firm: Ronald L. Book, P.A.
- c. Email: ron@rlbookpa.com
- d. Phone #: (305)935-1866

9. Organization or Name of entity receiving funds:

- a. Name: City of Miramar
- 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 funds will be used to construct a new public safety facility complex in the historic are of Miramar that will centralize key public safety functions to serve the community at large.

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 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 | Construction of a 24,000 sq. ft. facility to consolidate key public safety functions at a central location | 850,000 |
| TOTAL | | 850,000 |

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 City of Miramar City Commission adopted a 5-year CIP (Capital Improvement Program) to include construction of the Public Safety Complex)

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

This project will include a new 24,000 sq. ft. building complex in Historic Miramar to accomodate the Historic District Police Substation, to enhance security in the high crime area of the City.

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

This project will accomodate the Historic District Police Substation, Crime Lab and Evidence Storage, and Logistics at one central location, for investigation, and to provide security, safety, emergency response, and police presence.

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): All residents in the City of Miramar and other surrounding areas

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 | Response time will be significantly improved for this area of the City | Documentation of response and persons assisted by police personnel. |

| | | |
|--|--|---|
| <input checked="" type="checkbox"/> Improve mental health | Response time will be significantly improved for this area of the City. | Documentation of response and persons assisted by police personnel. |
| <input type="checkbox"/> Enrich cultural experience | | |
| <input type="checkbox"/> Improve agricultural production/promotion/education | | |
| <input type="checkbox"/> Improve quality of education | | |
| <input type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality | | |
| <input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.) | Lower crime statistics in the area | Documentation of number of arrests; break-ins and other crimes in the area. |
| <input type="checkbox"/> Improve transportation conditions | | |
| <input type="checkbox"/> Increase or improve economic activity | | |
| <input type="checkbox"/> Increase tourism | | |
| <input type="checkbox"/> Create specific immediate job opportunities | | |
| <input type="checkbox"/> Enhance specific individual's economic self sufficiency | | |
| <input type="checkbox"/> Reduce recidivism | | |
| <input checked="" type="checkbox"/> Reduce substance abuse | Shutting down of drug operations and other crime activities in the area. | Documentation of number of arrests. |
| <input checked="" type="checkbox"/> Divert from Criminal/Juvenile justice system | Reduce number of arrests. | Documentation of number of arrests. |
| <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): Improve emergency calls response time | Response time will be significantly improved for this area of the City. | Documentation of number of calls and response times. |

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: | 850,000 | 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: | 850,000 | 50.0% | No |
| 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