

Appropriations Project Request - Fiscal Year 2018-19

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Kissimmee Bridge Housing for the Homeless
2. Date of Submission: 11/13/2017
3. House Member Sponsor: Mike La Rosa
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 <i>(If appropriated in 2017-18 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2018-19 <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:					5,700,000	5,700,000

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 Economic Opportunity
 - 5c. Has the appropriate state agency for administering the funding, if the request were appropriated, been contacted? Yes
 - 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.
Penalties would be consistent with state grants standards that failure to complete project would result in repayment of funds to the funder.

6. Requester:

- a. Name: Desiree Matthews
- b. Organization: City of Kissimmee
- c. Email: dmatthews@kissimmee.org
- d. Phone #: (407)518-2302

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

- a. Name: Desiree Matthews
- b. Organization: City of Kissimmee
- c. Email: dmatthews@kissimmee.org
- d. Phone #: (407)518-2302

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

- a. Name: William Peebles
- b. Firm: Peebles and Smith, LLC
- c. Email: bill@peebles-smith.com
- d. Phone #: (850)681-7383

9. Organization or Name of entity receiving funds:

- a. Name: City of Kissimmee
- b. County (County where funds are to be expended): Osceola
- c. Service Area (Counties being served by the service(s) provided with funding): Orange, Osceola, Seminole

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?

Construct 48 units on the HOME campus. Designed and engineered, the project is shovel ready. As a solution to the housing gap, this Phase II will provide families with a place to stay while they wait for permanent housing to become available and receive wraparound services. More than 100 families in the coordinated entry system are waiting in places such as camps, cars and shelters, with more than 888 in motels?. Hurricane Maria evacuees will make the housing situation more dire.

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	his request is for construction of HOME Phase 2 providing for the build out of the remaining 48 units on the campus. Unit breakdown as follows: 3Bdrms -28; 2Bdrms -12; 1Bdrms-8. The design, site plan, and	5,700,000

	engineered drawings are complete. Construction could begin quickly as project is shovel ready and Phase I plans only require minor modifications to move on to permitting. \$5.7 million needed to complete development of 56,340 sq.ft of multifamily housing for the most vulnerable in Central FL.	
TOTAL		5,700,000

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): The building will be owned by the City of Kissimmee & land is owned by local nonprofit Aspire

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:

This project is supported by Osceola County, the Central Florida Commission on Homelessness, and Central Florida Continuum of Care. It is included in the legislative agenda for the Central Florida Commission and part of the County's Homelessness Strategies.

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:

The gap in housing is well documented in Central Florida. Several studies have pointed to the problem of affordable housing. While permanent housing developments are coming on line, the process is slow. With 48 units, more than 150 families could be helped annually by providing safe, stable and sanitary housing while they wait for a permanent unit to be available. Case management assists in stabilizing the client and improving self sufficiency.

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?

Housing and wraparound services- homelessness to permanent housing pipeline.

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

Furnished apartment units with case management, education and employment services

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?

< 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	Reduce health issues associated with chronic medical conditions with the homeless	improve disease management and medication compliance through case management Improve health issues related to food scarcity through housing stabilization
<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	Academic performance for K-12 Increase post secondary educational opportunities	Partner with School district to measure absenteeism, performance on standardized test and State standards, behavior occurrences. Enrollment and graduation rates for adults- benefit is employability and increased income

<input type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality		
<input type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)		
<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 checked="" type="checkbox"/> Enhance specific individual's economic self sufficiency	Increase access to education and employment programs through Project OPEN and Goodwill for homeless adults	Increase employment and wages through increased enrollment and completion of educational and training programs. Benefit is breaking the cycle of poverty and ending homelessness.
<input checked="" type="checkbox"/> Reduce recidivism	Increase permanent housing placement	Measure exits to permanent housing and housing stability after one year.
<input type="checkbox"/> Reduce substance abuse		
<input checked="" type="checkbox"/> Divert from Criminal/Juvenile justice system	Reduce homelessness and hunger related crimes	Measure diversion and prevention through programs offered in wraparound case management
<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 type="checkbox"/> 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:	5,700,000	95.4%	N/A
2. Federal:	0	0.0%	No
3. State: (Excluding the requested Total Amount in #4d, Column F)	250,000	4.2%	Yes
4. Local:	25,000	0.4%	Yes
5. Other:	0	0.0%	No
TOTAL	5,975,000	100%	

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

No