

Budget Detail Request - Fiscal Year 2016-17

Your request will not be officially submitted unless all questions and applicable sub parts are answered.

1. Title of Project: City of Pembroke Pines Senior Transportation Program
2. Date of Submission: 01/05/2016
3. House Member Sponsor(s): Shevrin Jones

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
- 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? No
- d. 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 2015-16 (If appropriated in FY 2015-16 enter the appropriated amount, even if vetoed.)			Develop New Funds Request for FY 2016-17 (If no new Recurring or Nonrecurring funding is requested, enter zeros.)			
	Column: A	B	C	D	E	F	G
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)	INCREASED or NEW Recurring Requested	TOTAL Nonrecurring Requested (Nonrecurring is one time funding & must be re-requested every year)	Total Funds Requested Over Base Funding (Recurring plus Nonrecurring: Column E + Column F)
Input Amounts:					0	240,000	240,000

- e. New Nonrecurring Funding Requested for FY 16-17 will be used for:
 Operating Expenses Fixed Capital Construction Other one-time costs
- f. New Recurring Funding Requested for FY 16-17 will be used for:
 Operating Expenses Fixed Capital Construction Other one-time costs

5. Requester:

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

6. Organization or Name of Entity Receiving Funds:

- 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

7. Write a project description that will serve as a stand-alone summary of the project for legislative review. The description should summarize the entire project's intended purpose, the purpose of the funds requested (if request is a sub-part of the entire project), and most importantly the detail on how the funds requested will be spent - for example how much will be spent on positions and associated salaries, specifics on capital costs, and detail of operational expenses. The summary must list what local, regional or statewide interests or areas are served. It should also document the need for the funds, the community support and expected results when applicable. Be sure to include the type and amount of services as well as the number of the specific target population that will be served (such as number of home health visits to X, # of elderly, # of school aged children to receive mentoring, # of violent crime victims to receive once a week counseling etc.)

The City of Pembroke Pines, Community Services Department, Transportation Division, operates a senior transportation service free of charge. This service provides transportation from the home of a senior to the Southwest Focal Point Senior Center to medical and dental appointments, pharmacy, other service agencies, post office, banks, grocery stores, etc. Individuals participating in the program must be a registered member of Southwest Focal Point Senior Center, 55 years of age or older, and who do not have access to other forms of transportation. This transportation is at the core of senior citizens aging in place.

With this assistance, seniors in the Pembroke Pines community can stay independent. The Southwest Focal Point Transportation Division currently consists of 16, 20-passenger busses and 5 cars. There are 7 full-time drivers and 1 part-time driver who operate these busses 5 days a week, 10 hours a day. The yearly ridership is approximately 36,700 riders. Considering that almost half of the vehicles have over 100,000 miles, and experience tells us that an aging fleet requires more repairs which equates to down time for the vehicles and ultimately inhibits our service to the community. We would ask for the state to appropriate \$240,000 which equals 3 buses at \$80,000 per bus. These new buses would enable us to enhance the services we currently offer the community.

8. Provide the total cost of the project for FY 2016-17 from all sources of funding:

- Federal: 0
- State: 0 (Excluding the requested Total Amount in #4d, Column G)
- Local: 0
- Other: 0

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

No