

THIS SECTION FOR STATE USE ONLY

FEMA- -DR-FL

☐ Standard HMGP

☐ 5% Initiative Application

☐ Application Complete

☐ Initial Submission or

☐ Re- Submission

Support Documents

☐ Conforms w/ State 409 Plan

☐ In Declared Area

☐ Statewide P

Eligible Applicant

☐ State or Local Government

☐ Private Non-Profit (Tax ID Received)

☐ Recognized Indian Tribe or Tribal Organization

Project Type(s)

☐ Wind

☐ Flood

☐ Other:

Community NFIP Status: (Check all that apply)

☐ Participating Community ID#: _____

☐ In Good Standing

☐ Non-Participating

☐ CRS

LMS Ranking: _____

County: _____

State Application ID: _____

This application is for all Federal Emergency Management Agency (FEMA Region IV) Hazard Mitigation Grant Program (HMGP) proposals. Complete ALL sections and provide the documents requested. If you require technical assistance, contact the Florida Division of Emergency Management at DEM_HazardMitigationGrantProgram@em.myflorida.com.

Section I – Applicant

A. Applicant Instruction: Complete all sections that correspond with the type of proposed project

Application Sections I-IV:

All Applicants must complete these sections

Environmental Review:

All Applicants must complete these sections

Maintenance Agreement:

Any Applications involving public property, public ownership, or management of property

Flood Control – Drainage Improvement Worksheet:

*Acquisition, Elevation, Dry Flood Proofing, Drainage Improvements, Flood Control Measures, Floodplain and Stream Restoration, and Flood Diversion
– one worksheet per structure*

Generator Worksheet:

Permanent, portable generators, and permanent emergency standby pumps

Tornado Safe Room Worksheet:

New Safe Room, Retrofit of existing structure, Community Safe Room, Residential Safe Room

Hurricane Safe Room Worksheet:

New Safe Room, Retrofit of existing structure

Wind Retrofit Worksheet:

Wind Retrofit projects only – one worksheet per structure

Wildfire Worksheet:

Defensible Space, Hazardous Fuels Reduction, Ignition Resistant Construction, other

Drought Worksheet:

Aquifers, other

Request for Public Assistance Form:

FEMA Form 90-49 (Request for Public Assistance): All applicants must complete, if applicable.

Acquisition Forms:

If project type is Acquisition, these forms must be completed.

(Only one of the two Notice of Voluntary Interest forms is necessary.)

Model Statement of Assurances for Property Acquisition Projects

Declaration and Release

Notice of Voluntary Interest (Town Hall Version)

Notice of Voluntary Interest (Single Site Version)

Statement of Voluntary Participation

FEMA Model Deed Restriction Language

**Application Completeness
Guidance / Checklist :**

All applicants are recommended to complete this checklist and utilize the guidance for completing the application.

B. Applicant Information:

FEMA-4834-DR-FL PID #: PID-150406

Title of Project: City of North Port, Fire Station 83, Wind Retrofit

1. Applicant (Organization): City of North Port

2. Applicant Type: Municipality

3. County: Sarasota

4. State Legislative State Legislative Congressional
Senate District(s): 23 House District(s): 74 House District(s): 17

5. Federal Tax I.D.
Number: 596072227

6. Unique Entity ID (UEI): 039567821

7. Federal Information Processing Standards (FIPS) Code*: 115-49675-00

8. National Flood Insurance Program (NFIP) Community Identification Number:
(this number can be obtained from the FIRM map for your area) 120279

9. Point of Contact: (Applicant staff serving as the coordinator of project)

First Name: Kimberley Last Name: Humphrey

Title: Project Manager - Public Works

Address: 1100 N. Chamberlain Boulevard

City: North Port State: FL Zip Code: 34286-4100

Telephone: 9412408093 Email: khumphrey@northportfl.gov

10. Application Prepared by:

First Name: Michael Last Name: Davey

Title: Grants Coordinator

Address: 4970 City Hall Boulevard

City: North Port State: FL Zip Code: 34286-4100

Telephone: 9414684644 Email: mdavey@northportfl.gov

Organization: City of North Port

11. Authorized Applicant Agent (proof of authorization authority required)

First Name: Michael Last Name: Davey

Title: Grants Coordinator

Address: 4970 City Hall Boulevard

City: North Port State: FL City: North Port

Telephone: 9414684644 Email: mdavey@northportfl.gov

Signature:  Michael Davey

Date: 7/24/2025

12. Local Mitigation Strategy (LMS) Compliance

- a. All proposed projects must be included in the county's Local Mitigation Strategy (LMS) Project List, and on file with FDEM's Mitigation Bureau Planning Unit. Does your jurisdiction have a current FEMA Approved Mitigation Plan and this project is listed? ☒ Yes ☐ No
- b. Attached is a letter of endorsement for this project from the county's LMS Coordinator. ☒ Yes ☐ No
- c. The LMS project list and endorsement letter both have an estimated cost column and Federal Share amount that is within \$500.00 between the two. ☒ Yes ☐ No

13. Has this project been submitted under a previous disaster event? ☒ No ☐ Yes, provide the disaster number and project number (as applicable):

Section II – Project Description

A. Hazards to be Mitigated / Level of Protection

1. Select the type of hazards the proposed project will mitigate: Hurricane Wind; Severe Storm None
2. Identify the type of proposed project: Wind retrofit None
3. List the total number of persons that will be protected by the proposed project (include immediate population affected by the project only): 15000
4. List how many acres of “Total Impacted Area” is to be protected by the proposed project (include immediate area affected by the project only): 19886
5. Fill in the level of protection and the magnitude of event the proposed project will mitigate.
(e.g. 23 structures protected against the 100-year storm event (1% chance))
1 structure wind protected against a 500-year storm event (FS 83). However, the service area of Station 83 includes an estimated 6127 residential structures, and nearly 444 commercial parcels, all of which will directly benefit from emergency services provided by FS 83 if it is fully hardened for major storm events.
6. Check **all** item(s) the project may impact: Health & Safety
7. **Engineered projects:** If your project has been already designed and engineering information is available, attach to your application **ALL** calculations, H&H study and design plans (e.g. Drainage Improvement, Erosion Control, or other special project types).

B. Project Description, Scope of Work, and Protection Provided (Must be Completed in Detail)

Describe, in detail, the existing problem, the proposed project, and the scope of work. Explain how the proposed project will **solve** the problem(s) and provide the level(s) of protection described in Part A. Also, if available, attach a vendor’s estimate and/or a contractor’s bid for the scope of work. **Ensure that each proposed project is mitigation and not maintenance.**

1. Describe the existing problems:

Built in 2007, designed to the 2003 Florida Building Code (FBC), as a Type IIB classification. Although the wind load details are not available on the drawing files available, one can assume that the station was designed to be an essential facility, which in the 2003 FLC would meet 130 – 156 mph winds, or a cat 4 storm. In addition, the existing windows meet the SGCC/ASI 297.1-1984 (rev 1994) large missile impact rating. This level of resiliency proved insufficient during Hurricane Ian, when the structure received substantial damage, thus hazarding personell and hampering the City's emergency response capability.

2. Describe the type(s) of protection that the proposed project will provide:

The State of Florida currently follows the 8th edition of the FBC (2023), which states a fire station is to be designed as a Category IV, Essential building, and for the County of Sarasota, this requires a wind resistance of 160 – 170 mph. Glass is currently required to meet the ANSI Z97.1-2015 (R2020) large missile impact rating for essential facilities.

3. Scope of Work (describe in detail what you are planning to do):

Hardening the facility to meet current code would include:

- Replacement of the roof system with a standing-seam galvalume roof;
- Additional bracing to the trusses (most likely)
- New lightning protection, gutters and downspouts;
- Remove and replace all Windows/storefront with insulated, tinted Level E assemblies
- Remove and replace man-doors, including frame, hardware, painting, etc as necessary
- Remove and replace (4) apparatus bay doors to include new garage door openers
- Remove and replace louvers/ exhaust fans as needed

Section III – Project Location (Fully describe the location of the proposed project.)

A. Site

1. Describe the physical location of this project, including street numbers (or neighborhoods) and project site zip code(s). Provide precise longitude and latitude coordinates for the site utilizing a hand-held global positioning system (GPS) unit or the equivalent:

Fire Station 83 6301 E. Price Blvd, North Port, FL 34286

2. Title Holder	Address	Zip Code	GPS coordinates (decimal degree format):	
City of North Port	6301 E Price Blvd	34288	27.065624	-82.094834

3. Is the project site seaward of the Coastal Construction Control Line (CCCL)? ☒ No ☐ Yes
4. Provide the number of each structure type (listed below) in the project area that will be affected by the project. Include **all** structures in project area.

Residential property:	6127	Public buildings:	2
Businesses/commercial property:	444	Schools/hospitals/houses of worship	14
Other:			

B. Flood Insurance Rate Map (FIRM) Showing Project Site

1. Attach one (1) copy of the FIRM map, a copy of the panel information from the FIRM, and, if available, the Floodway Map. FIRM maps are required for this application (if published for your area). Also, all attached maps must have the project site and structures clearly marked on the map. FIRMs are typically available from your local floodplain administrator who may be located in a planning, zoning, or engineering office. Maps can also be ordered from the Map Service Center at 1-800-358-9616. For more information about FIRMs, contact your local agencies or visit the FIRM site on the FEMA Web-page at https://msc.fema.gov/portal .
2. Using the FIRM, determine the flood zone(s) of the project site (Check all zones in the project area) (See FIRM legend for flood zone explanations) (A Zone must be identified)
3. If the FIRM Map for your area is not published , attach a copy of the Flood Hazard Boundary Map (FHBM) for your area, with the project site and structures clearly marked on the map.
4. Attach a copy of a Model Acknowledgement of Conditions for Mitigation in Special Flood Hazard Area

C. Maps with Project Site and Photographs

1. Attach a copy of a city or county scale map (large enough to show the entire project area) with the project site and structures marked on the map.
2. Attach a USGS 1:24,000 TOPO map with project site **clearly** marked on the map.
3. For **acquisition** or **elevation** projects, include copy of Parcel Map (Tax Map, Property Identification Map, etc.) showing each property to be acquired or elevated. Include the Tax ID numbers for each parcel, and Parcel information – including year built and foundation.
4. Attach photographs (at a minimum 4 photographs) for each project site per application. The photographs should be representative of the project area, including any relevant streams, creeks, rivers, etc. and drainage areas that affect the project site or will be affected by the project, and labeled. For each structure, include the following angles: front, back and both sides.

Section IV – Budget/Costs

In order to assist applicants with filling out the following Budget section, we have provided the following instructions for your convenience. For this section, we ask that you provide details of all the estimated costs of the project, as it is used for the benefit-costs analysis as well as for the feasibility and effectiveness review.

For the cost sections relating to Materials, Labor, and Fees, it is important to note,

- Lump sums without supporting documentation showing a breakdown of those costs are not acceptable. For those items that will not fit in the spaces provided, attach the appropriate documentation to your application.
- Identify your match sources in sections B and I.
- Sub-Total cells will auto sum the costs in their respective columns.
- Do not factor management costs into parts A-C. If management costs are being requested, see part G.
- Contingency Costs need to be justified and reported as a separate line item in part E of this section. From left to right in that part, enter the desired percentage (maximum 5% of Material/Labor), the amount the percentage is to be applied to, and the resulting amount. PLEASE NOTE- These cells will not auto-calculate across the row, but the final cell will be calculated into the Final Project Cost below it. Take care that everything is calculated correctly.
- Pre-Award Costs: costs must be identified as a separate line item, AND a completed HMGP Pre-Award Cost Request Form MUST be submitted with this application, detailing the items/cost and requested start date.
- Mark all In-kind (donated) services with (**); In-house (employee) services with (***), per each line item.
- All funding sources (In-kind, In-house, Global Match, and Other Agencies) must be identified (below) AND identified on the Funding Sources - Section IV I.

For project management costs, in compliance with Disaster Relief and Recovery Act of 2018 (DRRA) and the subsequent FEMA Interim Policy #104-11-1, the Florida Division of Emergency Management has included a section for applicants to request, or refuse, project management funds that are available to them. Under this new policy, HMGP projects awarded under disasters declared on or after August 1, 2017, are eligible for project management costs up to 5 percent of their total project costs.

Applicants choosing to apply for this funding must detail the specific administrative costs in Part G of this section. These costs must be eligible administrative costs, conforming to the requirements set in 2 CFR Part 200 Subpart E. Applicants must ensure that their administrative costs are reasonable, allowable, allocable, and necessary for the performance of the federal award.

The State will allot these management costs on a project-by-project basis per the amount requested by the sub-recipient, up to 5 percent of the total project cost. A sub-recipient may request less than this, but no higher. These management costs will be considered a separate pool of funding, and WILL NOT affect a project's benefit-cost analysis.

Management costs will be reimbursed per reimbursement request, and no more than 5 percent of any given reimbursement request amount. All management costs reimbursements will be contingent upon adequate documentation from the sub-recipient.

Management costs will be reimbursed at 100 percent of the amount of management costs requested, so far as they are adequately documented and are no more than 5 percent of the request. Any unused management costs at closeout following the final payment will be de-obligated. If the final total project cost results in an under-run, management costs will be reduced accordingly.

Applicants must make the determination to request or refuse management costs at the time of formal application submittal. The State will accept the initial determination from the applicant. There will be no recourse from the State for applicants wishing to change their initial determination after the application has been formally submitted.

Budget	
Name	Amount

Pre-Award Costs	\$0.00
Contingency	\$71,400.00
Material	\$406,000.00
Fees	\$435,000.00
Labor	\$587,000.00
Subtotal	\$1,499,400.00
Subrecipient Management Costs	\$74,400.00
Total	\$1,499,400.00

A. Funding Sources (round figures to the nearest dollar)

The maximum FEMA share for HMGP projects is 75%. The other 25% can be made up of State and Local funds as well as in-kind services. HMGP funds may be packaged with other Federal funds, but other Federal funds (except for Federal funds that lose their Federal identity at the State level, such as CDBG, and certain tribal funds) may not be used for the Non-Federal share of the costs.

Funding Sources		
Federal	Amount	Percent
Estimated Federal Share	\$1,124,550.00	75%
Non-Federal Funding Share		
Cash	\$374,850.00	25%
In-Kind		0%
In-House		0%
Global Match		0%
Other Agency Share		
		0%
Total	\$1,499,400.00	100%

B. Project Milestones/Schedule of Work

List the major milestones in this project by providing an estimated time-line for the critical activities not to exceed a period of 3 years (36-months) of performance. *(e.g. Contracting, Designing, Engineering, Permitting, Inspections, closeout, etc.)*

Milestones			
Name	Start Date	Target Completion Date	
State and Local Contracting -			
Construction Plan /Technical Specifications -			
Bidding / Local Procurement -			
Permitting -			
Construction / Installation -			
Local Inspections / Compliance -			
State Final Inspections / Compliance -			
Closeout Compliance -			

Section V. Environmental Review and Historic Preservation Compliance

(NOTE: This application cannot be processed if this section is not completed.)

Because the HMGP is a federally funded program, all projects are required to undergo an environmental and historic preservation review as part of the grant application process. Moreover, all projects must comply with the National Environmental Policy Act (NEPA) and associated Federal, State, Tribal, and Local statutes to obtain funding. **NO WORK**

can be done prior to the NEPA review process. If work is done on your proposed project before the NEPA review is completed, it will NOT be eligible for Federal funding.

A. The following information is required for the Environmental and Historic Preservation review:

All projects must have adequate documentation to determine if the proposed project complies with NEPA and associated statutes. The State Environmental Staff provide comprehensive NEPA technical assistance for Applicants, with their consent, to complete the NEPA review. The type and quantity of NEPA documents required to make this determination varies depending upon the project's size, location, and complexity. However, at a minimum, provide the applicable documentation from this section to facilitate the NEPA compliance process.

1. ☒ Detailed project description, scope of work, and budget/costs (Section II and Section IV of this application).
2. ☒ Project area maps (Section III, part B & C of this application).
3. ☒ Project area/structure photographs (Section III, part C of this application).
4. ☐ Preliminary project plans.
5. ☐ Project alternatives description and impacts (Section V of the application).
6. ☐ Complete the applicable project worksheets.
Documentation showing dates of construction are required for all structures.
7. ☐ Environmental Justice – Provide any applicable information or documentation regarding low income or minority populations in the project area. See Section V.B of this application for details.
8. ☐ Provide any applicable information or documentation referenced on the *Information and Documentation Requirements by Project Type* below.

B. Executive Order 12898; Environmental Justice for Low Income and Minority Population:

1. Are there low income or minority populations in the project area or adjacent to the project area?

☒ No ☐ Yes; describe any disproportionate and adverse effects to these populations:

There are none adjacent to the project construction area. There are LMI areas within the service area which will not be impacted by the roofing project but which WILL benefit from the hardening of the station.

2. ☐ To help evaluate the impact of the project, explain below or attach any other information that describes the population, or portion of the population, that would be either disproportionately or adversely affected. Include specific efforts to address the adverse impacts in your proposal narrative and budget.

There will be none. They will be positively impacted by a fully functional Fire Station hardened for weather emergencies.

C. Tribal Consultation (Information Required)

Section 106 of the National Historic Preservation Act (NHPA) requires federal agencies to take into account the effect of their undertakings on historic properties. The NHPA requires that agencies must complete this process prior to the expenditure of any Federal funds on the undertaking. A Tribal Consultation is required for any project disturbing ground or moving soil, including but not limited to: drainage projects; demolition; construction; elevation; communication towers; tree removal; utility improvements.

1. Describe the current and future use of the project location. A land use map may be provided in lieu of a written description.

The site is currently a fully operations Fire Rescue station in a suburban location. It will continue to be used as such following the wind retrofit. The overall footprint of the existing structure will not change given the nature of the project. There will be no ground disturbance

2. Provide information on any known site work or historic uses for project location.

There is no such work or uses on this site. There will be no ground disturbance.

- ☒ Attach a copy of a city or county scale map (large enough to show the entire project area) with the horizontal limits (feet) and vertical depths (square feet) of all anticipated ground disturbance of 3 inches or more.

D. Alternative Actions (Information Required)

The NEPA process requires that at least two alternative actions be considered that address the same problem/issue as the proposed project. In this section, list **two feasible** alternative projects to mitigate the hazards faced in the project area. One alternative is the “No Action Alternative”.

1. No Action Alternative

Discuss the impacts on the project area if no action is taken.

If no action is taken, the Fire Station 84 will continue to be heavily impacted by tropical storms and hurricanes. As a result, it will not be able to function as a Fire Station and staging area during and after weather emergencies, greatly lessening the City's ability to provide emergency services during and after such storms. It will also perpetually and regularly be damaged by storms, thus greatly reducing its effective performative lifespan.

2. Other Feasible Alternative

Describe a feasible alternative project that would be the next best solution if the primary alternative is not accomplished. This could be an entirely different mitigation method or a significant modification to the design of the current proposed project. Include a Scope of Work, engineering details (if applicable), estimated budget and the impacts of this alternative. Complete *all* of parts **a-e** (below).

a. Project Description for the Alternative

Describe, in detail, the alternative project, and explain how the alternative project will solve the problem(s) and/or provide protection from the hazard(s). Also, provide pros and cons for this alternative and a reason for why it was not selected.

The most obvious alternative project would be demolition of the structure, replacing it with a new, Category 5 rated Fire Rescue station.

b. Project Location of the Alternative (*describe briefly, if different from proposed project*)

Same as present location

- ☐ Attach a map or diagram showing the alternative site in relation to the proposed project site (*if different from proposed project*)

c. Scope of Work for Alternative Project

- 1) Demolition of existing structure
- 2) Site clearing, grading, erosion control
- 3) Temporary utilities and fencing
- 4) Design, Permitting and Engineering
- 5) New Construction - Building Core and Shell
- 6) Communications, Security and Specialty Items
- 7) FEMA 361 Safe Room/Storm Shelter
- 8) Energy and Sustainability Enhancements
- 9) Sitework and Landscaping
- 10) Finalization and Close-Out

d. Impacts of Alternative Project

Discuss the impact of this alternative on the project area. Include comments on these issues as appropriate: Environmental Justice, Endangered Species, Wetlands, Hydrology (Upstream and Downstream Surface Water Impacts), Floodplain/Floodway, Historic Preservation and Hazardous Materials.

These impacts would be minimal to non-existent given the nature of the project.

e. Estimated Budget/Costs for Alternative Project

In this section, provide details of all the estimated costs of the alternative project (round figures to the nearest dollar). A lump sum budget is acceptable.

\$8,625,000.00

Section VI – Maintenance Agreement

All applicants whose proposed project involves the retrofit or modification of existing public property or whose proposed project would result in the public ownership or management of property, structures, or facilities, must first sign the following agreement prior to submitting the application to FEMA.

(NOTE: Not applicable to projects solely related to residential or private property.)

City of North Port hereby agrees that if it receives any Federal aid as a result of the attached project application, it will accept responsibility, at its own expense if necessary, for the ***routine*** maintenance of any real property, structures, or facilities acquired or constructed as a result of such Federal aid. Routine maintenance shall include, but not be limited to, such responsibilities as keeping vacant land clear of debris, garbage, and vermin; keeping stream channels, culverts, and storm drains clear of obstructions and debris; and keeping detention ponds free of debris, trees, and woody growth.

The purpose of this agreement is to make clear the Sub-recipient's maintenance responsibilities following project award and to show the Sub-recipient's acceptance of these responsibilities. It does not replace, supersede, or add to any other maintenance responsibilities imposed by Federal law or regulation and which are in force on the date of project award.

Signed by Michael Davey the duly authorized representative
(printed or typed name of signing official)

Grants Coordinator
(title)

This twenty-fourth day of July, 2025

Signature* 

****Note: The above signature must be by an individual with legal signing authority for the respective local government or county (e.g., the Chairperson, Board of County Commissioners or the County Manager, etc.)***

Attachment Index

Use the following template to list any supporting documentation that is **included on the CD or flashdrive**. Clearly and concisely label each attachment on this form to correspond with the file name on the CD or flashdrive. In the first column list which section and item (from the HMGP application) the attachment refers to. *Example: Section 2, Item 1.* **If any required documentation is not included on the CD or flashdrive, the application will be considered incomplete and will not be considered for possible funding.**

Attached Document Name
1. Budget Workbook-BUDGET Workbook FS 83.xlsx 2. City or County Scale Map-FS 83 Scale Map.pdf 3. FIRM Map-FS 83 Firm Map.pdf 4. LMS Endorsement Letter-HurricaneMilton_LMS-HMGP-endorsement-FEMA-4834DR-FL_20250714.pdf 5. Original Signed Application-authorizing-agent-approval-formFS83Signed.pdf 6. Other-Fire Station Boundaries.pdf 7. Project Photograph-FS 84 Topo Detail.png 8. Project Photograph-FS83TopoDetail.png 9. Project Photograph-Fire Station 83 Pictures.pdf 10. Project Worksheet-windretrofitworksheet_v2_Station83SIGNED.pdf 11. Proof of Authorization Authory-Delegation of Signing Authority.pdf 12. Proof of Authorization Authory-authorizing-agent-approval-formFS83Signed.pdf 13. Proof of Authorization Authory-authorizing-agent-approval-formFW120Signed.pdf 14. Scope of Work-Fire Station 83 Scope of Work.pdf 15. USGS 1:24-FL_Murdock_20230728_TM_geoFS83.pdf 16. USGS 1:24-FL_Murdock_SE_20240731_TM_geoFS83.pdf

Section IV. Budget/Costs**FEMA-4834-DR (FL)**

This section, provide details of all the estimated costs of the project. As this information is used for the Benefit-Cost Analysis, reasonable cost estimates are essential. Pre-Award Costs, Construction Management, and any Contingency (maximum 5%) need to be reported as separate line items.

All cost categories rounded to the nearest dollar (no cents).

A. Materials: All Material to be utilized to complete project (includes acquisition of property)

<u>Item</u>	<u>Unit</u>	<u>Qty</u>	<u>Cost / Unit</u>	<u>Cost</u>
Standeing Seam Galvalume Panels	SF	7000	\$20.00	\$140,000.00
Roof Truss Bacing Material	LF	1200	\$40.00	\$48,000.00
Lightning Protection System	LS	1	\$6,000.00	\$6,000.00
Gutters and Downspouts	LF	400	\$40.00	\$16,000.00
Level E Windows	SF	600	\$150.00	\$90,000.00
Exterior Man Doors	EA	6	\$4,000.00	\$24,000.00
Apparatus Bay Doors	EA	4	\$15,000.00	\$60,000.00
Garage Door Openers	EA	4	\$3,000.00	\$12,000.00
Louvers and Exhaust Fans	LS	1	\$10,000.00	\$10,000.00
Sub-Total				\$406,000.00

B. Labor: Only include labor hours/costs for implementing. Indicate all In-house labor(***), or In-kind-donated labor (**).

<u>Description of Task</u>	<u>Unit</u>	<u>Qty</u>	<u>Rate</u>	<u>Cost</u>
Phase I -	Hours			\$0.00
Phase I -	Hours			\$0.00
Phase I -	Hours			\$0.00
Phase I -	Hours			\$0.00
Phase I ONLY- Sub-total			\$0.00	
Project Leader	Hour	1000	\$85.00	\$85,000.00
Foreman	Hour	1000	\$70.00	\$70,000.00
Roofers	Hour	2000	\$60.00	\$120,000.00
Carpenters	Hour	1200	\$55.00	\$66,000.00
Door and Window Installers	Hour	1000	\$60.00	\$60,000.00
Electricians	Hours	800	\$75.00	\$60,000.00
HVAC Technicians	Hours	500	\$70.00	\$35,000.00
Laborers	Hours	2000	\$35.00	\$70,000.00
Clean-up/Demo Crew	Hours	700	\$30.00	\$21,000.00
Non-Phased or Phase II - Sub-total			\$587,000.00	
Sub-Total				\$587,000.00

C. Fees Paid Include any other costs associated with the project.

<u>Description of Task</u>	<u>Qty</u>	<u>Rate</u>	<u>Cost</u>
Phase I - Pre-Award with start date of _/_/_			\$0.00
			\$0.00
Phase I -			\$0.00
Phase I -			\$0.00
Phase I -			\$0.00
Phase I -			\$0.00
Phase I -			\$0.00
Phase I ONLY- Sub-total		\$0.00	
Non-Phased - Pre-Award with start date of _/_/_			\$0.00
			\$0.00
General Contractor OH&P + Fees	1	\$285,000.00	\$285,000.00
Engineering, Design, Permitting	1	\$150,000.00	\$150,000.00
Non-Phased or Phase II - Sub-total		\$435,000.00	
Sub-Total			\$435,000.00

D.		Sub-Total Estimated Project Cost	\$1,428,000.00
E.	<i>Contingency Costs (max 5%) Phase I</i>	0.000%	\$0.00
	<i>Contingency Costs (max 5%) Non-Phased or Phase II</i>	5.000%	\$1,428,000.00
	Total Contingency Costs (maximum 5%)		\$71,400.00

F.		Final Estimated Project Costs	\$1,499,400.00
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<i>Phase I Subtotal</i>	<i>\$0.00</i>
<i>Non-Phased or Phase II Subtotal</i>	<i>\$1,499,400.00</i>
	\$1,499,400.00

Note: Backup source documentation is required to support costs

<u>Comments:</u>	Federal	Project Cost
Federal Share Percentage Requesting (per LMS)	75.0000000000%	
Sub-Recipient Federal Amount and Project Cost Endorsed by LMS	\$ 1,125,000.00	\$ 1,500,000.00
FEMA Approval 00/00/00		

G. Sub-Recipient Management Costs

Based on the amount of federal share being requested in Part F, your project is eligible for up to an additional 5% of the project costs for Sub-Recipient Management Costs. Please indicate below whether or not you would like to request these funds and follow the directions for your selected choice. In addition a Request Form is Required.

Total Estimated Project Costs (Budget F.) **\$ 1,499,400.00**

Total Estimated SR Management Costs Available (5% of Total Project Costs) **\$ 74,970.00**

Note: This number will be generated automatically after Budget line items are completed

☒ **YES** I would like to request these funds (please fill out the itemized table below, then continue to Part I)*

☐ **NO** I do not wish to request these funds. (continue to Part I)*

	<u>Descriptions of SRMC</u>	<u>Qty</u>	<u>Rate</u>	<u>Cost</u>
	Non-Phased or Phase II SRMC (per SRMC Request Form)			
1	SRMC Application development (Non-Phased Pre-Award)			
2	Pre-Award - Personnel (Sub-Recipient In-House)	90	\$160.00	\$14,400.00
3	Pre-Award - Contractual Services			\$0.00
4	Personnel (Sub-Recipient In-House)	375	\$160.00	\$60,000.00
5	Contractual Services			\$0.00
6	Indirect Costs			\$0.00
	Sub-Total of Non-Phased or Phase II SRMC			\$74,400.00

H. **Total Estimated SRMC Requested** **\$74,400.00**
Difference **\$570.00**

Note: By selecting either "yes" or "no" the Sub-Applicant / Sub-Recipient is acknowledging that they understand what is being offered to them as it is described in this application.

All costs must be reasonable, allowable, allocable, and necessary as required by 2 CFR Part 200 Subpart E, applicable program regulations, and HMA Guidance (2015)

Maximum SRMC:	\$74,970.00
---------------	--------------------

I. Funding Sources (round figures to the nearest dollar)

FEMA-4834-DR (FL)

The maximum FEMA share for HMGP/HMA projects is 75%. The other 25% can be made up of State and Local funds as well as in-kind services. Moreover, the FMA program requires that the maximum in-kind match be no more than 12.5 % of the total projects costs. HMGP/FMA funds may be packaged with other Federal Funds, but other Federal funds (except for Federal funds which lose their Federal identity at the State level - such as CDBG, ARS, HOME) may not be used for the State or Local match.

1	Estimated FEMA Share	<u>\$ 1,124,550.00</u>	<u>75.000000000%</u>	% of Total	(maximum of 75%)
2	Non-Federal Share				
3	Estimated Local Share	<u>\$ 374,850.00</u>	<u>25.000000000%</u>	% of Total	(Cash)
4		<u>\$ -</u>	<u>0.000000000%</u>	% of Total	(In-Kind**)
5		<u>\$ -</u>	<u>0.000000000%</u>	% of Total	(In-House***)
6		<u>\$ -</u>	<u>0.000000000%</u>	% of Total	(Global Match****)
7	Other Agency Share	<u>\$ -</u>	<u>0.000000000%</u>	% of Total	
	(Identify Other Non-Federal Agency and availability date)				Amounts
				\$	-
				\$	-
8	Total Funding	<u>\$ 1,499,400.00</u>	<u>100.00%</u>	Total %	(should equal 100%)

** Identify proposed eligible activities directly related to project to be considered for In-Kind (donated) services

*** Identify proposed eligible activities directly related to project to be considered for In-House services

**** Separate project applications must be submitted for each project (Global) Match project.

Global Match Project # and Title: _____

9	Total Estimated SR Management Costs	Requested	<u>\$ 74,400.00</u>		
		Available	<u>\$ 74,970.00</u>		
			\$570.00	5% of Total	(Max Allowed)

If negative amount - revise SR Mgmt Costs

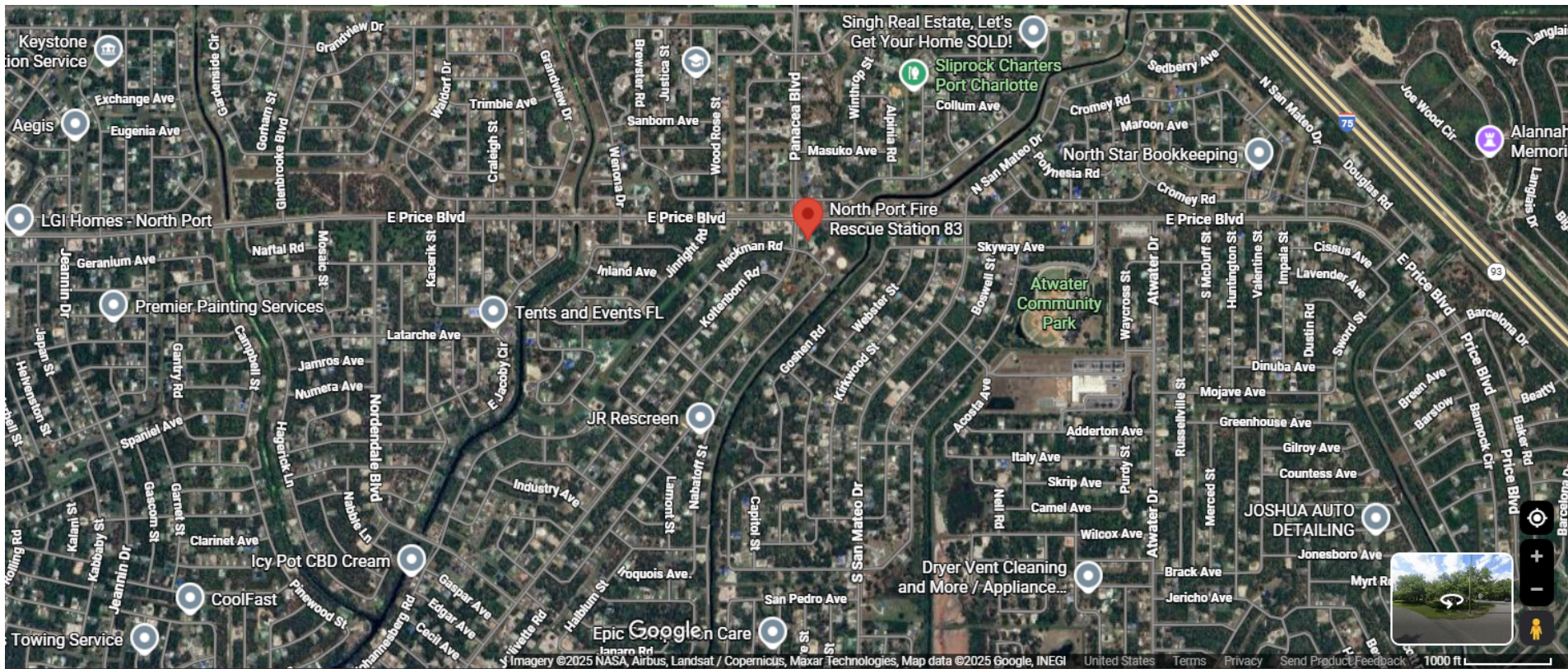
J. Project Milestones/Schedule of Work

List the major milestones in this project by providing an estimate time-line for the critical activities not to exceed a period of 36-month of performance. (e.g. **Designing, Engineering, Permitting, etc.**)

Milestone	Number of Months to Complete	
Contracting	9	Months
Design, Engineering and Permitting	6	Months
Construction	12	Months
Inspections	6	Months
Closeout	3	Months
		Months
		Months
		Months
	36	Total Months

OR

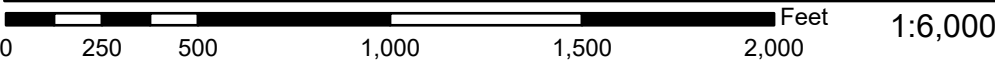
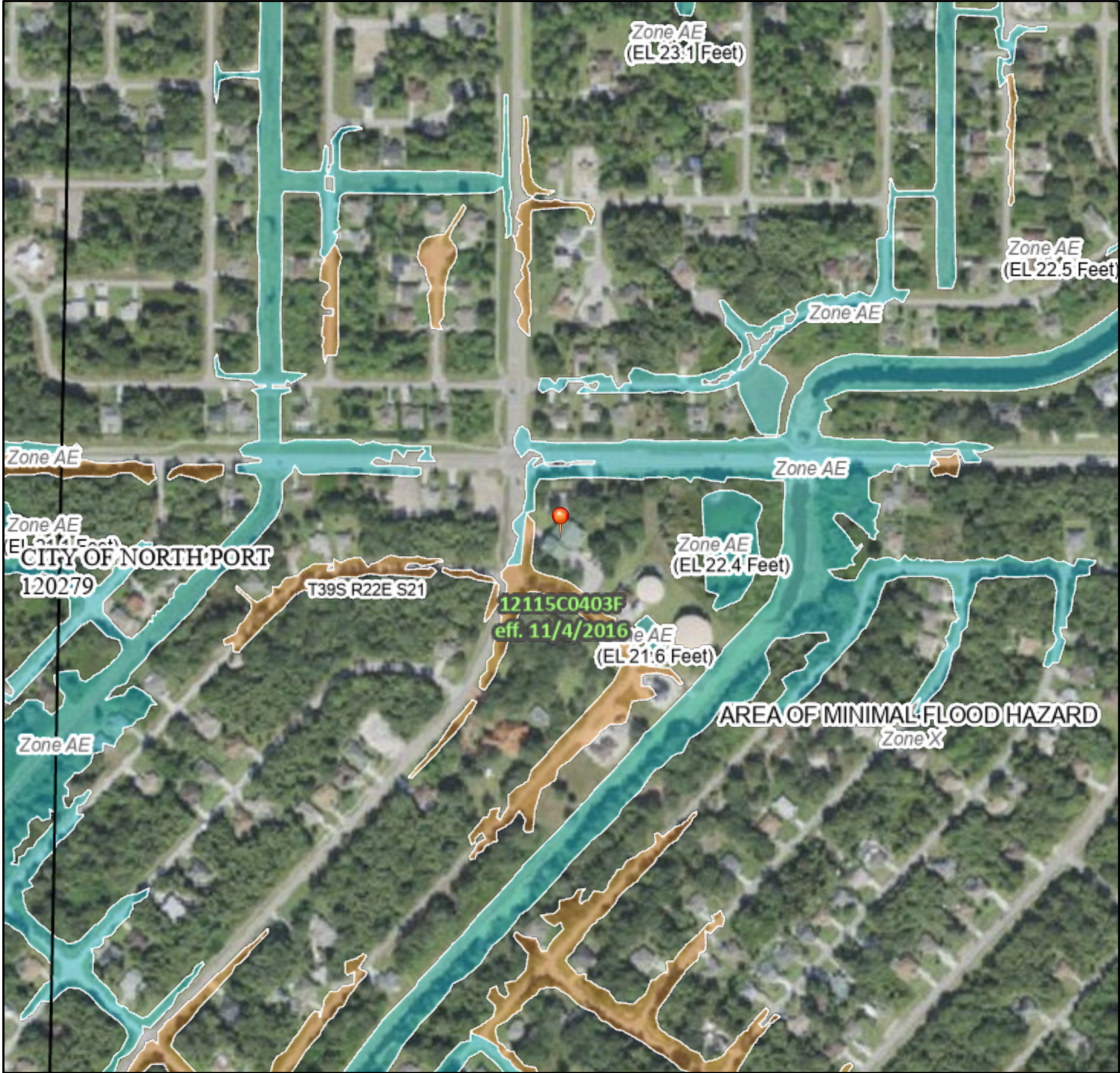
Milestone	Number of Months to Complete	
Phase I - State and Local Contracting	3	Months
Phase I - Bidding / Local Procurement	3	Months
Phase I - Design Specifications	3	Months
Phase I - Permitting	3	Months
Phase I - Compliance - Deliverables submittal to FDEM	6	Months
	18	Total Ph I Months
Phase II - State and Local Contracting	4	Months
Phase II - Construction Plan /Technical Specifications	2	Month
Phase II - Bidding / Local Procurement	3	Months
Phase II - Construction / Installation	12	Months
Phase II - Local Inspections / Compliance	3	Months
Phase II - State Final Inspections / Compliance	3	Months
Phase II - Closeout Compliance	3	Months
	30	Total Ph II Months
	48	Total Project Months



National Flood Hazard Layer FIRMMette



82°7'25"W 27°4'22"N



82°6'47"W 27°3'50"N

Basemap Imagery Source: USGS National Map 2023

Legend

SEE FIS REPORT FOR DETAILED LEGEND AND INDEX MAP FOR FIRM PANEL LAYOUT

SPECIAL FLOOD HAZARD AREAS		Without Base Flood Elevation (BFE) Zone A, V, A99
		With BFE or Depth Zone AE, AO, AH, VE, AR
		Regulatory Floodway
OTHER AREAS OF FLOOD HAZARD		0.2% Annual Chance Flood Hazard, Areas of 1% annual chance flood with average depth less than one foot or with drainage areas of less than one square mile Zone X
		Future Conditions 1% Annual Chance Flood Hazard Zone X
		Area with Reduced Flood Risk due to Levee. See Notes. Zone X
		Area with Flood Risk due to Levee Zone D
OTHER AREAS		NO SCREEN Area of Minimal Flood Hazard Zone X
		Effective LOMRs
GENERAL STRUCTURES		Area of Undetermined Flood Hazard Zone D
		Channel, Culvert, or Storm Sewer
		Levee, Dike, or Floodwall
		20.2 Cross Sections with 1% Annual Chance Water Surface Elevation
		17.5 Coastal Transect
		Base Flood Elevation Line (BFE)
		Limit of Study
		Jurisdiction Boundary
OTHER FEATURES		Coastal Transect Baseline
		Profile Baseline
		Hydrographic Feature
MAP PANELS		Digital Data Available
		No Digital Data Available
		Unmapped



The pin displayed on the map is an approximate point selected by the user and does not represent an authoritative property location.

This map complies with FEMA's standards for the use of digital flood maps if it is not void as described below. The basemap shown complies with FEMA's basemap accuracy standards

The flood hazard information is derived directly from the authoritative NFHL web services provided by FEMA. This map was exported on 6/30/2025 at 1:25 PM and does not reflect changes or amendments subsequent to this date and time. The NFHL and effective information may change or become superseded by new data over time.

This map image is void if the one or more of the following map elements do not appear: basemap imagery, flood zone labels, legend, scale bar, map creation date, community identifiers, FIRM panel number, and FIRM effective date. Map images for unmapped and unmodernized areas cannot be used for regulatory purposes.



July 15, 2025

Laura Dhuwe, Mitigation Bureau Chief
Florida Division of Emergency Management
2555 Shumard Oak Boulevard
Tallahassee, Florida 32399-2100

Re: Hazard Mitigation Grant Program (HMGP) applications for FEMA 4834-DR-FL, Hurricane Milton

Dear Ms. Dhuwe:

The Sarasota County Local Mitigation Strategy (LMS) Working Group has approved by vote and prioritized the following projects for HMGP funding from this disaster. These projects align with our LMS goals and objectives as noted, and with the State's mitigation goals and objectives (in accordance with the Code of Federal Regulations 44 §201.6).

The Sarasota County LMS Working Group therefore presents the projects listed below in the order that they are to be considered for funding.

FEMA 4834-DR-FL Hurricane Milton

Sarasota County LMS Projects / Milton

Rank	Jurisdiction	Project Title	Federal Share	Local Match	LMS Goal / Objective
1	Sarasota County Public Hospital Board	Sarasota Memorial Hospital, Generator Automatic Transfer Switches at SMNRC	\$ 375,000.00	\$ 125,000.00	Goal 2 / Objective 1
2	City of Venice	City of Venice, Flamingo Ditch Flood Mitigation	\$ 750,000.00	\$ 250,000.00	Goal 2 / Objective 1
3	Town of Longboat Key	Town of Longboat Key, Purchase of 7 Emergency Sewer By-pass Pumps	\$ 315,000.00	\$ 105,000.00	Goal 2 / Objective 1
4	City of North Port	City of North Port, Water Control System 120	\$ 3,000,000.00	\$ 1,000,000.00	Goal 2 / Objective 1
5	Sarasota County (BOCC)	Sarasota County, Celery Fields, Expansion	\$ 17,326,167.94	\$ 5,775,389.32	Goal 2 / Objective 1
6	City of Sarasota	City of Sarasota, City-Wide Curb and Gutter Installation Project	\$ 7,500,000.00	\$ 2,500,000.00	Goal 2 / Objective 1
7	Englewood Fire District	Englewood Fire District Fire, Station 71 Enhanced, Construction	\$ 3,000,000.00	\$ 1,000,000.00	Goal 2 / Objective 1
8	Town of Longboat Key	Town of Longboat Key, Small-Scale Distribution Main, Replacement	\$ 922,500.00	\$ 307,500.00	Goal 2 / Objective 1
9	City of North Port	City of North Port, Fire Station 83, Hardening	\$ 1,125,000.00	\$ 375,000.00	Goal 2 / Objective 1
10	City of North Port	City of North Port, Fire Station 84, Hardening	\$ 1,462,500.00	\$ 487,500.00	Goal 2 / Objective 1
11	City of Sarasota	City of Sarasota, Bay Front Park, Sea Wall Protection	\$ 2,250,000.00	\$ 750,000.00	Goal 2 / Objective 1
12	Sarasota County (BOCC)	Sarasota County, Southgate Regional Lift Station, Expansion	\$ 3,750,000.00	\$ 1,250,000.00	Goal 2 / Objective 1
13	Ringling Museum	Ringling Museum, Campuswide Distributed Generation System	\$ 6,412,500.00	\$ 2,137,500.00	Goal 2 / Objective 1
SubTotal			\$ 48,188,667.94	\$ 2,137,500.00	

For further information, please contact the undersigned at stapfumaneyi@scgov.net or (941) 861-5713.

Sincerely,

A handwritten signature in black ink, appearing to read 'Sandra Tapfumaneyi', with a stylized flourish at the end.

Sandra Tapfumaneyi
Chair, Sarasota County LMS Working Group
Chief of Emergency Management, Sarasota County

Cc:

Jonathan Lewis
Richard Collins
Mike Nevarez
LMS Working Group



MITIGATION BUREAU HAZARD MITIGATION GRANT PROGRAM

AUTHORIZING AGENT APPROVAL

For those entities applying for the Hazard Mitigation Grant Program (HMGP), assurance is needed to ensure that non-federal funds are, or will be, secured for the proposed action by the project start date. An Authorizing Agent's signature is needed to provide this. An Authorizing Agent is the chief elected official of a local government who has signature authority, such as a Chairperson of the Board of County Commissioners for a County, the Mayor of a municipality, or an elected Board Member for a private non-profit. Any entity may delegate this authority to a subordinate official by resolution of the governing body. If this is the case, Proof of Authorization must be provided as a separate attachment in Section VI of the relevant HMGP application in DEMES. This form must be fully completed, signed, and submitted into DEMES for an application to be received by FDEM. Applicants will be prompted for this form in the final step of the DEMES HMGP application. Ensure that the information provided here matches the relevant DEMES application. For questions, please email DEM_HazardMitigationGrantProgram@em.myflorida.com.

PROJECT INFORMATION

APPLICANT (ENTITY): City of North Port
COUNTY: Sarasota
FEMA DISASTER: Milton
PROJECT TITLE: Fire Station 83 Wind Retrofit
TOTAL PROJECT COST: 1,488,900
FEDERAL SHARE: 1,116,675
NON-FEDERAL SHARE: 372,225

AUTHORIZING AGENT

FIRSTNAME: Michael
LAST NAME: Davey
TITLE: Grants Coordinator
ADDRESS: 4970 City Hall Blvd
CITY: North Port
STATE: Florida
ZIP CODE: 34286
PHONE: 941-468-4644
EMAIL: mdavey@northportfl.gov

The undersigned assures fulfillment of all requirements of the Hazard Mitigation Grant Program, as contained in the program guidelines, and affirms that all information contained in this application is true and correct to the best of my knowledge. The governing body of the applicant duly authorized the document, and hereby applies for the assistance documented in this application.

Michael Davey

 Digitally signed by Michael Davey
Date: 2025.07.22 12:37:30 -04'00'

AUTHORIZING AGENT SIGNATURE

[Click or tap here to enter text.](#)

DATE

☒ Proof of Authorization – Delegation of Authority attached in Section VI

Fire Station 83 Pictures



Fire Station 83 Front



Fire Station 83 Rear



Fire Station 83 Side from SW



Fire Station 83 Side from North East



Wind Retrofit Worksheet

For preliminary Benefit Cost Analysis conducted by the State Mitigation Technical Team

Applies for the following mitigation activities: **WIND RETROFIT which includes Opening Protection, Load Path, Roof, Code Plus activities.** For assistance, contact the State of Florida Mitigation Technical Unit.

IMPORTANT: This worksheet is required as part of your application. The State of Florida Mitigation Technical Unit will conduct a Benefit Cost Analysis (BCA) for your project and the following information is needed to evaluate cost effectiveness. Once a preliminary BCA is completed, the reviewer will contact you to collect support documentation.

NOTE: A complete worksheet will expedite the Technical Review.

Requirements

To complete a successful project application, a minimum amount of technical information is required for review. Data collected in this worksheet will provide reviewers with preliminary information necessary to evaluate project eligibility, feasibility, and cost effectiveness. Carefully review and confirm that you are aware of the following information.

Under the Hazard Mitigation Grant Program (HMGP), a wind retrofit project is only intended to protect the building envelope and the building contents. Wind retrofit projects are not evaluated by the criteria contained in the standards of FEMA P-361 Safe Rooms for Tornadoes and Hurricane Guidance; therefore, they do not provide "near-absolute protection" to building occupants during a high wind event. The sub-applicant must understand that the structure may have vulnerabilities due to age, design and location that may result in damage to the structure from wind events even after completing a wind retrofit project funded under HMGP.

Wind Retrofit (Non-Residential or Multi-Family Residential): Wind protections must follow the recommendations from a Hurricane Retrofit Building Assessment conducted by a professional engineer or licensed architect, utilizing the methodology provided in Chapter 3 of FEMA P-804 that is used to determine whether a structure is a good candidate for a wind retrofit and identifies the retrofits to be performed on the structure. Wind protections shall be provided on any other opening such as vents, louvers and exhaust fans. The project shall conform with the design criteria found in ASCE 7 standards. All installations shall be in strict compliance with the Florida Building Code or Miami Dade Specifications. All materials shall be certified to meet wind and impact standards. The local municipal or county building department shall inspect and certify installation according to the manufacture specifications.

Wind Retrofit (Residential): Wind protection shall be provided on any other opening such as vents, louvers, and exhaust fans. The project shall comply with the guidelines outlined in the Department of Homeland Security, Federal Emergency Management Agency guidance manual FEMA P-804, Wind Retrofit Guide for Residential Buildings, the recommendations from a Hurricane Retrofit Building Assessment conducted by a professional engineer or licensed architect, utilizing the methodology provided in Chapter 3 of FEMA P-804 that is used to determine whether a structure is a good candidate for a wind retrofit and identifies the retrofits to be performed on the structure, and the design criteria found in ASCE 7 standards. All installations shall be in strict compliance with the Florida Building Code or Miami Dade Specifications and all materials shall be certified to meet wind and impact standards. The local municipal or county building department shall inspect and certify installation according to the manufacture specifications.

I confirm that I have reviewed the requirements listed above (signature): **Michael Davey** Digitally signed by Michael Davey
Date: 2025.07.24 15:29:48 -04'00'

FEMA has approved an approach to demonstrating cost-effectiveness for certain projects based on pre-calculated benefits which requires minimal documentation if certain requirements are met.

BEFORE PROCEEDING TO THE NEXT SECTION PLEASE SELECT AN OPTION BELOW:

Does your project meet all the requirements from any of the below FEMA memorandums?

[Cost Effectiveness Determination for Non-Residential Hurricane Wind Retrofit Measures Funded by FEMA.](#)
[Cost Effectiveness Determination for Residential Hurricane Wind Retrofit Measures Funded by FEMA.](#)

☐ Yes (Only complete Section I of this worksheet) ☒ No (Complete all sections of this worksheet)

For additional resources, please refer to [FEMA Technical Review Job Aid](#) for Wind Retrofit projects.



MITIGATION

Wind Retrofit Worksheet

Section I – Project General Information

Project Name: Station 83 Wind Retrofit	? Worksheet completed by: Name: Michael Title: Grants Coordinator Phone: 941-468-4644 Email: mdavey@northportfl.gov
Sub-Applicant: City of North Port	

Section II – Project Cost Information

? Mitigation Project Cost: \$1,500,000	? Annual Maintenance Cost: \$350.00
--	---

Section III – Project Specific Information

The table below allows data entry for up to 6 locations. If your project has more than 6 locations, you can either submit a second Wind Retrofit Worksheet or attach a separate list, providing the information requested below and in Section IV, as applicable.

ID	? Project Location (address)	? Type of Wind Retrofit (Residential, Non-Residential, Code Plus)	? Construction Type	? Building Size (Sq.Ft.)	Number of Stories	Code Plus Only, Design Wind Speed (MPH)
1.	6301 E. Price Blvd	Code Plus	Concrete	10,300	1	170+
2.		- Select -	- Select -			
3.		- Select -	- Select -			
4.		- Select -	- Select -			
5.		- Select -	- Select -			
6.		- Select -	- Select -			

BEFORE PROCEEDING TO THE NEXT SECTION PLEASE ANSWER THE FOLLOWING QUESTIONS:

Is the existing roof of the building(s) protected to withstand the wind speed requirements in the project area in accordance with the effective code requirements and local standards?

☐ Yes (I can demonstrate the roof is in compliance with effective code requirements and local standards)

☒ No (I am proposing to retrofit / replace the existing roof)

Are you protecting all exterior openings including but not limited to doors, windows, skylights, vents, louvers, and exhaust fans?

☒ Yes (I am protecting all exterior openings)

☐ No (Not all exterior openings will be protected)

Please explain:



Section IV - Loss of Service

For each project location identified in Section III, please select only **one** type of facility, as applicable, and provide responses below

Structure ID 1.		6301 E. Price Blvd
☒ Fire Station		
? How many people are served by the Fire Station?	est: 15,000	
Does the fire station provide Emergency Medical Services (EMS)?	☒ Yes ☐ No	
? Provide the address of the nearest fire station:	FS 84 1350 Citizen's Parkway, North Port, FL, 34288	
Provide the address of the nearest fire station with EMS:	Same as above. FS 84 has EMS.	
☐ Police Station		
? How many people are served by this police station?		
How many police officers work or report to this police station?		
? How many police officers have a designated office space at this police station?		
☐ Hospital		
? How many people are being served by this hospital?		
Provide the address of the nearest hospital capable of providing the same type of service:		
? How many people are being served by the nearest hospital capable of providing the same type of service?		
☐ Other Non-Residential Building		
Specify Facility Name		
? What is the Annual Operational Budget for this facility?		
☐ Residential Building		
Secondary Water Resistance?	☐ Yes ☐ No	
Roof-Wall Connection:	- Select -	
Roof-Deck Attachment:	- Select -	

Structure ID 2.	
☐ Fire Station	
? How many people are served by the Fire Station?	
Does the fire station provide Emergency Medical Services (EMS)?	☐ Yes ☐ No
? Provide the address of the nearest fire station:	
Provide the address of the nearest fire station with EMS:	
☐ Police Station	
? How many people are served by this police station?	
How many police officers work or report to this police station?	
? How many police officers have a designated office space at this police station?	
☐ Hospital	
? How many people are being served by this hospital?	
Provide the address of the nearest hospital capable of providing the same type of service:	
? How many people are being served by the nearest hospital capable of providing the same type of service?	
☐ Other Non-Residential Building	
Specify Facility Name	
? What is the Annual Operational Budget for this facility?	
☐ Residential Building	
Secondary Water Resistance?	☐ Yes ☐ No
Roof-Wall Connection:	- Select -
Roof-Deck Attachment:	- Select -



MITIGATION

Wind Retrofit Worksheet

Section IV - Loss of Service (continued)

For each project location identified in Section III, please select only **one** type of facility, as applicable, and provide responses below

Structure ID 3.

☐ **Fire Station**

? How many people are served by the Fire Station?

Does the fire station provide Emergency Medical Services (EMS)?

☐ Yes ☐ No

? Provide the address of the nearest fire station:

Provide the address of the nearest fire station with EMS:

☐ **Police Station**

? How many people are served by this police station?

How many police officers work or report to this police station?

? How many police officers have a designated office space at this police station?

☐ **Hospital**

? How many people are being served by this hospital?

Provide the address of the nearest hospital capable of providing the same type of service:

? How many people are being served by the nearest hospital capable of providing the same type of service?

☐ **Other Non-Residential Building**

Specify Facility Name

? What is the Annual Operational Budget for this facility?

☐ **Residential Building**

Secondary Water Resistance? ☐ Yes ☐ No

Roof-Wall Connection: - Select -

Roof-Deck Attachment: - Select -

Structure ID 4.

☐ **Fire Station**

? How many people are served by the Fire Station?

Does the fire station provide Emergency Medical Services (EMS)?

☐ Yes ☐ No

? Provide the address of the nearest fire station:

Provide the address of the nearest fire station with EMS:

☐ **Police Station**

? How many people are served by this police station?

How many police officers work or report to this police station?

? How many police officers have a designated office space at this police station?

☐ **Hospital**

? How many people are being served by this hospital?

Provide the address of the nearest hospital capable of providing the same type of service:

? How many people are being served by the nearest hospital capable of providing the same type of service?

☐ **Other Non-Residential Building**

Specify Facility Name

? What is the Annual Operational Budget for this facility?

☐ **Residential Building**

Secondary Water Resistance? ☐ Yes ☐ No

Roof-Wall Connection: - Select -

Roof-Deck Attachment: - Select -



MITIGATION

Wind Retrofit Worksheet

Section IV - Loss of Service (continued)

For each project location identified in Section III, please select only one type of facility, as applicable, and provide responses below

Structure ID 5.

☐ **Fire Station**

? How many people are served by the Fire Station?

Does the fire station provide Emergency Medical Services (EMS)?

☐ Yes ☐ No

? Provide the address of the nearest fire station:

Provide the address of the nearest fire station with EMS:

☐ **Police Station**

? How many people are served by this police station?

How many police officers work or report to this police station?

? How many police officers have a designated office space at this police station?

☐ **Hospital**

? How many people are being served by this hospital?

Provide the address of the nearest hospital capable of providing the same type of service:

? How many people are being served by the nearest hospital capable of providing the same type of service?

☐ **Other Non-Residential Building**

Specify Facility Name

? What is the Annual Operational Budget for this facility?

☐ **Residential Building**

Secondary Water Resistance? ☐ Yes ☐ No

Roof-Wall Connection: - Select -

Roof-Deck Attachment: - Select -

Structure ID 6.

☐ **Fire Station**

? How many people are served by the Fire Station?

Does the fire station provide Emergency Medical Services (EMS)?

☐ Yes ☐ No

? Provide the address of the nearest fire station:

Provide the address of the nearest fire station with EMS:

☐ **Police Station**

? How many people are served by this police station?

How many police officers work or report to this police station?

? How many police officers have a designated office space at this police station?

☐ **Hospital**

? How many people are being served by this hospital?

Provide the address of the nearest hospital capable of providing the same type of service:

? How many people are being served by the nearest hospital capable of providing the same type of service?

☐ **Other Non-Residential Building**

Specify Facility Name

? What is the Annual Operational Budget for this facility?

☐ **Residential Building**

Secondary Water Resistance? ☐ Yes ☐ No

Roof-Wall Connection: - Select -

Roof-Deck Attachment: - Select -



Section V – Additional Information

Please use this page to expand on the information provided above or to include any additional information relevant to the proposed mitigation project.

Built in 2007, designed to the 2003 Florida Building Code (FBC), as a Type IIB classification. Although the wind load details are not available on the drawing files available, one can assume that the station was designed to be an essential facility, which in the 2003 FLC would meet 130 - 156 mph winds, or a cat 4 storm. In addition, the existing windows meet the SGCC/ASI 297.1-1984 (rev 1994) large missile impact rating. This level of resiliency proved insufficient during Hurricane Ian, when the structure received substantial damage, thus hazarding personnel and hampering the City's emergency response capability.

The State of Florida currently follows the 8th edition of the FBC (2023), which states a fire station is to be designed as a Category IV, Essential building, and for the County of Sarasota, this requires a wind resistance of 160 - 170 mph. Glass is currently required to meet the ANSIZ97.1-2015 (R2020) large missile impact rating for essential facilities.

Hardening the facility to meet current code would include:

- Replacement of the roof system with a standing-seam galvalume roof;
- Additional bracing to the trusses (most likely)
- New lightning protection, gutters and downspouts;
- Remove and replace all Windows/storefront with insulated, tinted Level E assemblies
- Remove and replace man-doors, including frame, hardware, painting, etc as necessary
- Remove and replace (4) apparatus bay doors to include new garage door openers
- Remove and replace louvers/ exhaust fans as needed



WIND RETROFIT WORKSHEET INSTRUCTIONS

Refer to the instructions below to complete the Wind Retrofit Worksheet using the best available data.

Section I – Project General Information

Project Name: Enter the name of the project title. The title should be short but descriptive (e.g., City of Orlando, Fire Station No.5, Wind Retrofit).

Sub-Applicant: Enter your organization's legal name.

Worksheet completed by: Enter name, title, phone number, and email of the person completing this Worksheet. This person must have the knowledge and/or the resources to accurately answer all questions and provide supporting documentation, as needed. Information may come from multiple creditable sources.

Section II – Project Cost Information

Mitigation Project Cost: Enter the total cost of the project. A lump sum on this worksheet is acceptable for preliminary BCA, but a detailed breakdown attached to your application is required.

Annual Maintenance Cost: Enter the cost associated with maintaining the effectiveness of the components installed as part of the wind retrofit project.

Section III – Project Specific Information

Project Location: Provide a description of the specific geographical location(s) of the project to include full address(es) with street name and number, city, state, and zip code. For multiple locations, please provide information on Section V of this worksheet.

Type of Wind Retrofit: From the dropdown menu option, select the proposed type of project:

- **Residential Wind Retrofit:** Wind retrofit projects for one- and two-family residential buildings must be designed in conformance with the design criteria found in FEMA P-804 and the locally enforced building code. Identify the proposed action and level of wind retrofit based on the results of the building assessment outlined in the methodology indicated in Chapter 3 of FEMA P-804. Hurricane wind retrofit projects for one- and two-family residential buildings typically fall into one of three packages: basic, intermediate and advanced mitigation. An engineer, architect, building official or contractor may be required to assist in collecting the necessary information for the mitigation project.
- **Non-residential Wind Retrofit:** Wind retrofit projects for non-residential or multi-family residential buildings must be designed in conformance with the design criteria found in ASCE 7 and the locally enforced building code. Identify the proposed action and level of wind retrofit based on conducting a building assessment outlined in FEMA P-804. An engineer, architect, building official, or contractor may be required to assist in collecting the necessary information for the mitigation project.
- **Code Plus:** New construction that is designed to exceed local building code requirements. The grant will only fund the difference between building up to code and building above code requirements.

Construction Type: The type of construction refers to the primary building material of the structure. A structural engineer, contractor, or building inspector can provide assistance with determining the type of construction. From the dropdown menu option, select the construction type for each building:

- **Concrete:** Reinforced concrete construction.
- **Manufactured Home:** Manufactured building attached to a permanent foundation.
- **Masonry/CMU:** Masonry wall construction, including concrete masonry unit (concrete block).
- **Steel:** Steel frame construction.
- **Wood:** Wood frame construction.

Building Size: For both residential and non-residential buildings, enter the total size consists of the total enclosed area within the building that is being mitigated. For residences, this includes finished and unfinished basements, and the entire living space; however, it does not include porches, garages, or other outside areas. The total size of the building can be found on tax records, appraisals, and surveys.

Number of Stories: Enter the number of stories above ground for each building. This information may be verified through city or county property records or from building permit information.

Code Plus Only, Design Wind Speed (MPH): If you are proposing a Code Plus project, enter the wind speed that the building will be designed to withstand. This value must be higher than the code required wind speed for the project area.



MITIGATION

Wind Retrofit Worksheet

Section IV – Loss of Service

FIRE STATION

How many people are served by the Fire Station? Enter the number of people served by the fire station. If only one fire station serves the entire population of a community, that number may be used. For larger communities with multiple fire stations, only the population directly served by the station being mitigated can be used. Documentation for the service population can come from the fire station, local planning office, or other creditable source.

Does the fire station provide Emergency Medical Services (EMS)? Select “Yes” if the fire station provides EMS or has EMS trained personnel; Otherwise, select “No”.

Provide the address of the nearest fire station: The nearest fire station would serve as an alternative station to provide fire protection due to loss of function of the fire station being mitigated.

Provide the address of the nearest fire station with EMS: The nearest fire station would serve as an alternative station to provide EMS and fire protection due to loss of function of the fire station being mitigated. (If the nearest fire station also provides EMS, please provide same address).

POLICE STATION

How many people are served by this police station? Enter the number of people served by the police station. If only one police station serves the entire population of a community, that number may be used. For larger communities with multiple police stations, only the population directly served by the station being mitigated can be used. Documentation for the service population can come from the police station, local planning office, or other creditable source.

How many police officers work or report to this police station? Enter the number of sworn officers that work or report at this location.

How many police officers have a designated office space at this police station? Enter the number of police officers that have a designated office space at this police station. It is assumed that police officers with a designated office space would be restricted to perform their regular duties if the police station were shut down due to a disaster. This information is necessary to estimate the loss of function due to the increased crime caused by a reduction of police officers in service.

HOSPITAL

How many people are being served by this hospital? Enter the number of people being served by this hospital. Only the population directly served by the hospital being mitigated can be used. Documentation for the service population can come from the hospital, local planning office, or other creditable source.

Provide the address of the nearest hospital capable of providing the same type of service: Identify the nearest

hospital capable of providing similar services as the hospital being mitigated.

How many people are being served by the nearest hospital capable of providing the same type of service? Enter the number of people served by the nearest hospital capable of providing the same service. Only the population directly served by the alternative hospital can be used. Documentation for the service population can come from the alternative hospital, local planning office, or other creditable source.

OTHER NON-RESIDENTIAL BUILDING

Specify Facility Name: Enter the name of the facility that will be mitigated.

What is the Annual Operational Budget for this critical facility? Enter the annual budget for the building that is being mitigated. If the building houses multiple local agencies, the cumulative budget should be used. Alternately, if the annual budget is for an entire school district and one of the buildings is being mitigated, documentation should include how the annual budget was calculated for the single school building.

RESIDENTIAL BUILDING

Secondary Water Resistance: Select “Yes” if there is a secondary water resistance barrier to prevent water penetration through the roof decking after the loss of the roof covering. Otherwise, select “No”.

Roof-Wall Connection: Indicates if the structural system of a building can transfer loads from the roof to the foundation. In general, a strap would provide positive connection from the roof framing to the walls, better connections within the wall framing, and connections from the wall framing to the foundation system. From the dropdown menu option, select the existing roof-wall connection:

- Strap
- Toe-Nail

Roof-Deck Attachment: Refers to the spacing of the nails that support the roof decking. From the dropdown menu option, select the existing roof-deck attachment:

- 6d @ 6”/12”
- 6d/8d Mix @ 6”/6”
- 8d @ 6”/12”
- 8d @ 6”/6”



Office of the City Manager

July 22, 2025

Re: City Manager Designee to Execute Annual Grant Applications and Related Non-Binding Documents

To whom it may concern,

Please accept this letter to confirm that the following City of North Port employees are permitted to act as Authorized Agents on my behalf to sign grant applications and related non-binding documents for all City of North Port grants and grant related programs:

Valerie Malingowski, Grant Division Manager
Jennifer Sadonis, Grants Coordinator
Michael Davey, Grants Coordinator
Sherry Austin, Disaster Cost Recovery Coordinator

Attached to this letter is City of North Port Resolution 2023-R-63 which authorizes the City Manager or designee to select, execute and submit all grant applications and related non-binding documents, including but not limited to: grant applications, close out documents, certifications, financial documents, and reimbursement requests for specified agencies listed in the Resolution.

If you need any additional information, please let me know.

Sincerely,

A. Jerome Fletcher II, ICMA-CM, MPA
City Manager



City of North Port

RESOLUTION NO. 2023-R-63

A RESOLUTION OF THE CITY COMMISSION OF THE CITY OF NORTH PORT, FLORIDA, REPEALING RESOLUTION NO 2021-R-09; AUTHORIZING THE CITY MANAGER OR DESIGNEE TO EXECUTE ANNUAL GRANT APPLICATIONS AND RELATED NON-BINDING DOCUMENTS; PROVIDING FOR INCORPORATION OF RECITALS; PROVIDING FOR CONFLICTS; PROVIDING FOR SEVERABILITY; AND PROVIDING AN EFFECTIVE DATE.

WHEREAS, each fiscal year, the City of North Port, Florida routinely applies for multiple grants and authorizes related non-binding documents; and

WHEREAS, the City Commission of the City of North Port, Florida desires to identify and approve the combined annual grant applications for execution and submission; and

WHEREAS, on February 9, 2021, the City Commission adopted Resolution No. 2021-R-09 authorizing the City Manager or designee to execute annual grant applications and related non-binding documents for specified agencies, including for the Florida Department of Economic Opportunity; and

WHEREAS, on May 31, 2023, Governor DeSantis approved House Bill 5 with an effective date of July 1, 2023, creating Laws of Florida Chapter 2023-173, and renaming the Florida Department of Economic Opportunity as the Florida Department of Commerce; and

WHEREAS, the Commission desires to include the Florida House of Representatives and the United States House of Representatives as agencies the City Manager or designee are authorized to submit grant applications and non-binding documents for grant funding when available; and

WHEREAS, the Commission desires to repeal Resolution No. 2021-R-09 and replace it with this resolution identifying the Florida Department of Commerce as an authorized agency.

NOW, THEREFORE, BE IT RESOLVED BY THE CITY COMMISSION OF THE CITY OF NORTH PORT, FLORIDA:

SECTION 1 – INCORPORATION OF RECITALS

1.01 The above recitals are true and correct and are incorporated in this resolution by reference.

SECTION 2 – REPEAL OF RESOLUTION NO. 2021-R-09

- 2.01 The City Commission of the City of North Port, Florida hereby repeals Resolution No. 2021-R-09 in its entirety.

SECTION 3 – RESOLUTION

- 3.01 The City Commission directs the City Manager or designee to select, execute, and submit all relevant grant applications and non-binding documents, including but not limited to, close out documents, certifications, financial documents and reimbursement requests, for the following agencies, when grant funding is available to assist with the budget.

Granting Agency
Gulf Coast Community Foundation
The Harry Shapiro Charitable Foundation
Sarasota County
Florida Department of Commerce
Florida Division of Emergency Management
Florida Department of Environmental Protection
Florida Department of Law Enforcement
Florida Department of Transportation
Florida Division of Historical Resources
Florida Fish and Wildlife Conservation Commission
Florida House of Representatives
Federal Emergency Management Agency
U.S. Department of Justice
U.S. Department of Transportation
U.S. Environmental Protection Agency
U.S. House of Representatives

- 3.02 All binding contracts and contract amendments will continue to require Commission approval.

- 3.03 The City Commission directs the City Manager or designee to distribute a memo to the City Commission identifying all City-submitted grant applications.

SECTION 4 – CONFLICTS

- 4.01 In the event of any conflict between the provisions of this resolution and any other resolution, in whole or in part, the provisions of this resolution will prevail to the extent of the conflict.

SECTION 5 – SEVERABILITY

- 5.01 If a court of competent jurisdiction finds that any section, subsection, sentence, clause, phrase, or provision of this resolution is for any reason invalid or unconstitutional, that provision will be deemed a separate, distinct, and independent provision and will not affect the validity of the remaining portions of the resolution.

SECTION 6 – EFFECTIVE DATE

- 6.01 This resolution takes effect immediately.

ADOPTED by the City Commission of the City of North Port, Florida, in public session on October 10, 2023.

CITY OF NORTH PORT, FLORIDA


BARBARA LANGDON
MAYOR

ATTEST


HEATHER FAUST, MMC
CITY CLERK

APPROVED AS TO FORM AND CORRECTNESS


AMBER L. SLAYTON, B.C.S.
CITY ATTORNEY

Fire Station 83

Scope of Work

Project Summary:

This project proposes a wind retrofit of Fire Station 83, located at 6301 E. Price Blvd, North Port, FL 34286. The building, constructed in 2007 under the 2003 Florida Building Code (FBC), suffered significant damage during Hurricane Ian. The structure is a critical facility that serves as a Fire Rescue station and emergency operations staging area. The proposed retrofit will bring the facility into compliance with the 2023 8th Edition of the Florida Building Code, enhancing its ability to withstand 160–170 mph wind events, as required for Category IV essential facilities in Sarasota County.

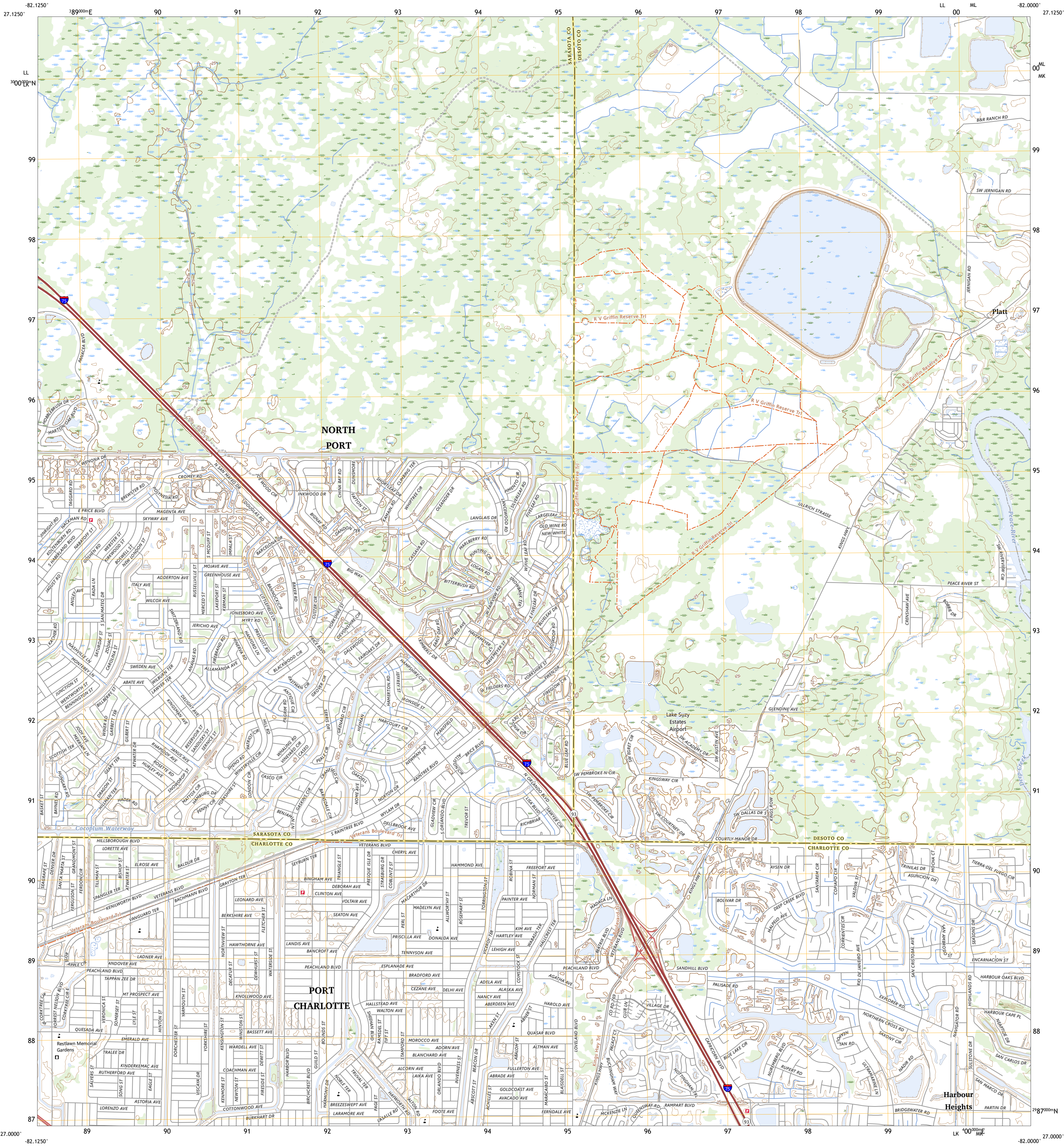
Detailed Scope of Work:

The proposed project will include the following wind mitigation activities:

- **Roof Replacement:** Remove the existing roof system and install a new standing-seam galvalume metal roof system, meeting or exceeding wind-load resistance as per FBC (2023).
- **Structural Reinforcement:** Install additional bracing to the roof trusses to enhance structural integrity and resistance to uplift forces.
- **Drainage and Lightning Protection:** Install new gutters, downspouts, and a lightning protection system to ensure safe water shedding and electrical discharge control.
- **Window and Glazing Replacement:** Remove and replace all exterior windows and storefront systems with insulated, tinted Level E assemblies compliant with ANSI Z97.1-2015 (R2020) large missile impact rating.
- **Door Systems Upgrade:** Remove and replace exterior man doors as needed, including frames, hardware, and finishes. Also, replace four (4) overhead apparatus bay doors with wind-rated assemblies and new garage door openers.
- **Mechanical Ventilation Systems:** Replace existing louvers and exhaust fans as needed to ensure system resilience during high-wind events.

Expected Outcomes & Protection Provided:

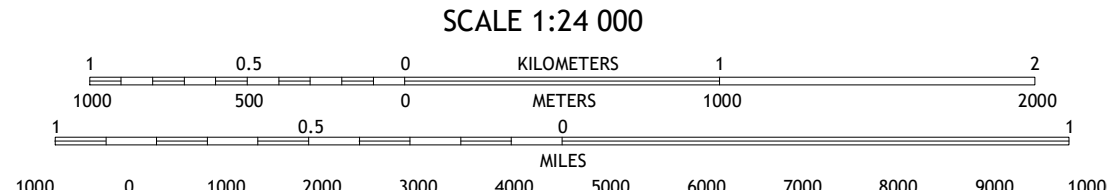
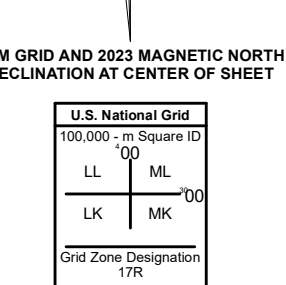
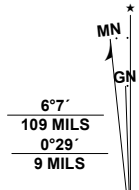
- Brings the facility into compliance with Category IV standards under current FBC.
- Ensures continuity of fire and emergency response services during and after windstorm events.
- Reduces risk of damage from future hurricanes and severe storms, extending the facility's operational lifespan.
- Protects 12–24 personnel on-site during normal operations and storm events.



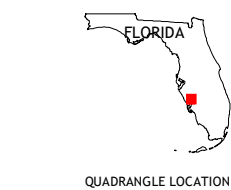
Produced by the United States Geological Survey

North American Datum of 1983 (NAD83)
World Geodetic System of 1984 (WGS84) Projection and
1 000-meter grid/Universal Transverse Mercator, Zone 17R
This map is not a legal document. Boundaries may be
generalized for this map scale. Private lands within government
reservations may not be shown. Obtain permission before
entering private lands.

Imagery.....NAIP, November 2019 - November 2019
Roads.....U.S. Census Bureau, 2016
Names.....GNS, 1979 - 2023
Hydrography.....National Hydrography Dataset, 2002 - 2022
Contours.....National Elevation Dataset, 2022
Boundaries.....Multiple sources: see metadata file 2021 - 2022
Public Land Survey System.....BLM, 2020
Wetlands.....FWS National Wetlands Inventory Not Available



CONTOUR INTERVAL 5 FEET
NORTH AMERICAN VERTICAL DATUM OF 1988
This map was produced to conform with the
National Geospatial Program US Topo Product Standard.



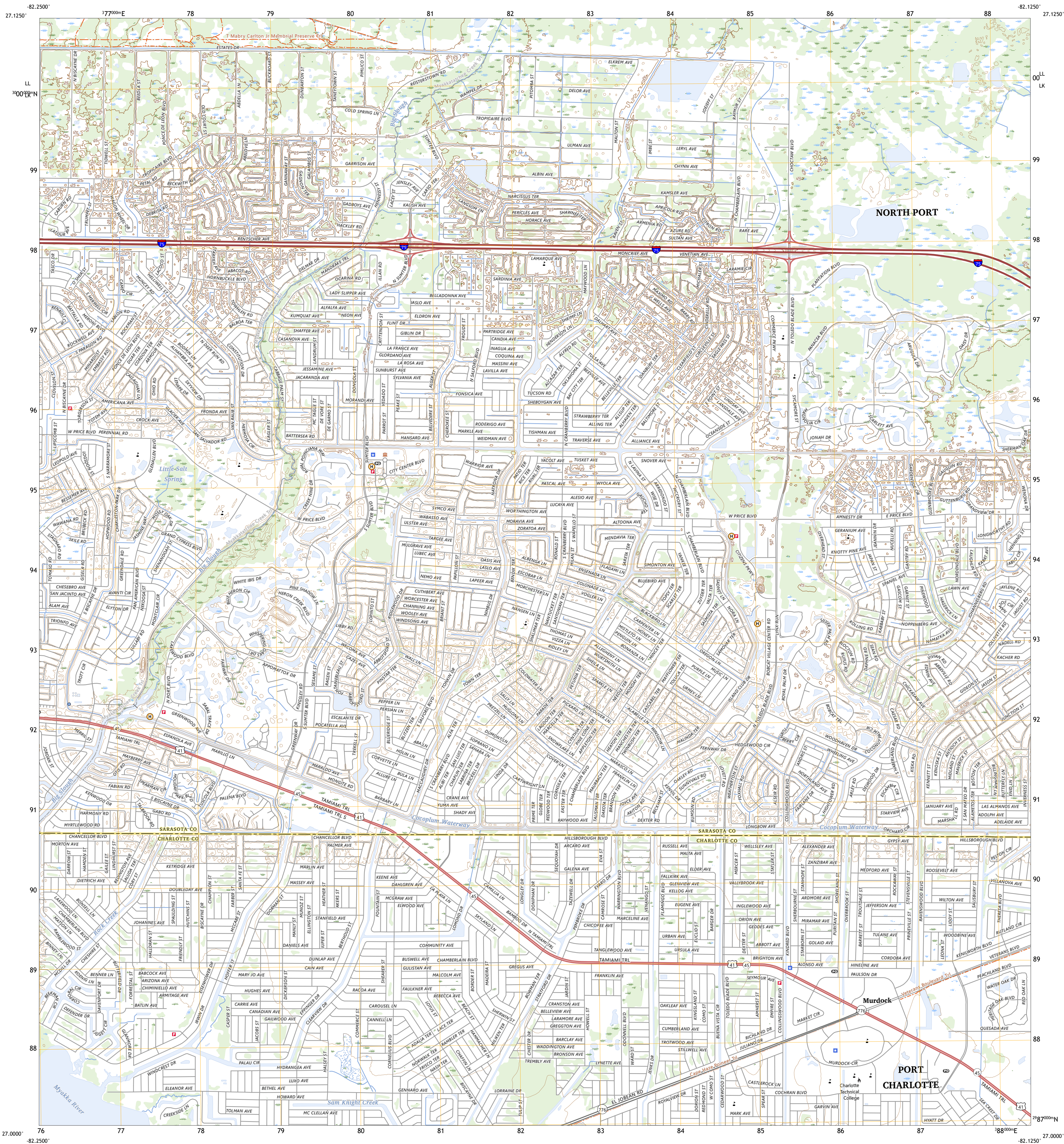
QUADRANGLE LOCATION

1	2	3
4	5	6
7	8	9

1 Murdock NW
2 Murdock NE
3 Nocatee
4 Murdock
5 Fort Ogden
6 El Jobean
7 Punta Gorda
8 Cleveland

ROAD CLASSIFICATION		
Expressway	Local Connector	
Secondary Hwy	Local Road	
Ramp	4WD	
Interstate Route	US Route	State Route

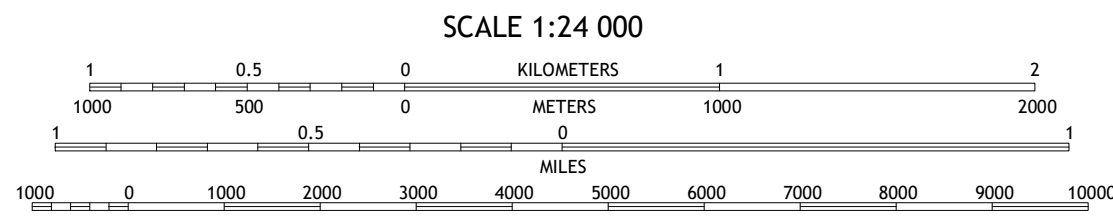
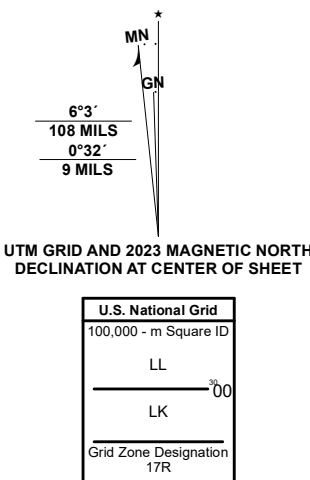




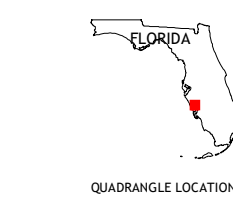
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1	2	3
4	5	6
7	8	

- 1 Lower Myakka Lake
- 2 Murdock NW
- 3 Murdock NE
- 4 Myakka River
- 5 Murdock SE
- 6 Englewood
- 7 El Jobean
- 8 Punta Gorda

ROAD CLASSIFICATION		
Expressway	Local Connector	
Secondary Hwy	Local Road	
Ramp	4WD	
Interstate Route	US Route	State Route

MURDOCK, FL
2023

