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CITY OF MARATHON, FLORIDA RESOLUTION 2024-58

A RESOLUTION OF THE CITY COUNCIL OF THE CITY OF MARATHON, FLORIDA, APPROVING A GRANT IN THE AMOUNT OF \$150,000.00 FROM THE DIVIONS OF STATE FIRE MARSHAL/FLORIDA DEPARTMENT OF FINANCIAL SERVICES TO ASSIST IN THE PURCHASE OF A FIRE RESCUE MARINE EMERGENCY RESPONSE VESSEL; AND PROVIDING FOR AN EFFECTIVE DATE

WHEREAS, the City of Marathon, has submitted appropriations grant application; and

WHEREAS, the City of Marathon has been awarded and will accept \$150,000.00 appropriations grant from the State Fire Marshal/Florida Department of Financial Services and provide a local match of \$150,000.00 to purchase a fire rescue marine emergency response vessel; and

WHEREAS, the City of Marathon believes that a fire rescue marine emergency response vessel will help improve life safety of all those visiting and living in the City; and

WHEREAS, the City of Marathon, in good faith, will accept this grant award which can only be reversed with a super majority vote.

NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF MARATHON, FLORIDA, THAT:

- Section 1. The above recitals are true and correct and are incorporated herein
- **Section 2**. The City of Marathon will collaborate with the Florida Department of Financial Services for reimbursement of funds expended.
- **Section 3.** This resolution shall take effect immediately upon its adoption.

PASSED AND APPROVED BY THE CITY COUNCIL OF THE CITY OF MARATHON, FLORIDA, THIS 23rd DAY OF JULY 2024.

THE CITY OF MARATHON, FLORIDA

Mayor Robyn Still

AYES:

Gonzalez, Matlock, Smith, Landry, Still

NOES:

None

ABSENT:

None

ABSTAIN:

None

ATTEST:

Diane Clavier, City Clerk

(City Seal)

APPROVED AS TO FORM AND LEGALITY FOR THE USE AND RELIANCE OF THE CITY OF MARATHON, FLORIDA ONLY:

Steve Williams, City Attorney

July 1, 2024

SENT VIA ELECTRONIC MAIL ONLY

Marathon johnsonj@ci.marathon.fl.us

Re: Notice of Grant Award for Marathon Fire Rescue Marine Emergency Response Vessel

Marathon:

My name is JoAnne E. Rice, Director of the Division of State Fire Marshal within the Department of Financial Services. On behalf of the Division of State Fire Marshal, it is my privilege to inform you that the 2024 Florida Legislature appropriated funds to support the requested equipment purchase.

This correspondence serves as the notice of the grant award in the amount of \$150,000.00. These grant award funds may be available for distribution to you as early as July 1, 2024, once the appropriate requirements are met.

First, you must complete and email the included Confirmation Form to SFMGrant@MyFloridaCFO.com. Once the Division receives the completed form, an assigned contract manager will schedule an initial meeting with the Contract Manger listed in the Confirmation Form to discuss the scope of the project and next steps. The assigned contract manager will be the main point of contact for all matters relating to this notice of grant award, the grant award funds agreement, and the reimbursement of funds.

Please note, the defined performance period for the grant is one year starting July 1, 2024, and ending June 30, 2025. If your equipment purchase will take longer than one year to complete and meet reimbursement requirements, you must notify your assigned contract manager as soon as possible. Additionally, if you do not meet the one-year requirement, you may need to resubmit your Local Initiative Funding Request Form or Appropriations Project Request Form to the appropriate local parties.

Congratulations, I look forward to working with Marathon on this important project.

Sincerely,

oAnne E. Rice, Director
Division of State Fire Marshal

LT/ct

CONFIRMATION FORM

	Contact Information
Grantee:	Marathon (Catal)
Federal ID #:	(Please confirm that this matches the name registered with the Department of State)
Mailing Address:	
City, State, Zip:	
Physical Address:	
City, State, Zip:	
	Financial Administrator
Name:	
Title:	
Phone:	
Email:	
	Contract Manager
Name:	
Title:	
Phone:	
Email:	
	All documents will be sent for signature via DocuSign.
	ifferent than the Contract Manager, please list the designated signatory:
Name:	
Title:	
Phone:	
r none.	