

HURON COUNTY AIRPORT AUTHORITY

November 23, 2015

Mr. Brian Tenkhoff, Program Manager
Federal Aviation Administration
Detroit Airports District Office
11677 South Wayne Road, Suite 107
Romulus, MI 48174

Subject: Norwalk-Huron County Airport
FY 2016 Airport Improvement Program – **Pre-Application**

Dear Mr. Tenkhoff:

Enclosed you will find the Pre-application for the FY2016 Airport Improvement Program grant for planned airport improvement projects at Norwalk-Huron County Airport.

The projects which we would like to complete are as follows:

1. Planning Studies (Airport Layout Plan ALP Update along with 20:1 Obstruction Survey and Wildlife Hazard Site Visit)

Project	Total	FAA (90%)	State (5%)	Local (5%)
Planning Studies	\$166,667.00	\$150,000.00	\$8,333.50	\$8,333.50

According to the attached schedule, we anticipate submitting a Grant application in June 2016. We appreciate all of your help and assistance in the funding of this project. If you have any questions or require any additional information, please contact Melissa James, Huron County Airport Authority Vice President at (419) 668-4155.

Sincerely,

HURON COUNTY AIRPORT AUTHORITY


Harry Brady
President

cc: Lance Wanamaker, PE, PMP
Michael Baker International, Inc.

Application for Federal Assistance SF-424	
* 1. Type of Submission <input type="checkbox"/> Preapplication <input type="checkbox"/> Application <input type="checkbox"/> Changed/Corrected Application	* 2. Type of Application <input type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision * If Revision, select appropriate letter(s): - Select One - * Other (Specify)
* 3. Date Received:	4. Application Identifier: 5A1
5a. Federal Entity Identifier:	* 5b. Federal Award Identifier:
State Use Only:	
6. Date Received by State:	7. State Application Identifier:
8. APPLICANT INFORMATION:	
* a. Legal Name: Huron County Commissioners/Huron County Airport Authority	
* b. Employer/Taxpayer Identification Number (EIN/TIN): 34-6400672	*c. Organizational DUNS:
d. Address:	
* Street1: 180 Milan Ave. Suite 7 Street 2: * City: Norwalk County: Huron * State: Ohio Province: Country: USA *Zip/ Postal Code: 44857	
e. Organizational Unit:	
Department Name:	Division Name:
f. Name and contact information of person to be contacted on matters involving this application:	
Prefix: Ms. Middle Name: * Last Name: James Suffix:	First Name: Melissa
* Title: Huron County Airport Authority Vice President	
Organizational Affiliation: Norwalk-Huron County Airport	
* Telephone Number: (419) 668-4155	Fax Number:
* Email: melissa@huroncountyairport.co	

Application for Federal Assistance SF-424

*9. Type of Applicant 1: Select Applicant Type:

B. County Government

Type of Applicant 2: Select Applicant Type:

- Select One -

Type of Applicant 3: Select Applicant Type:

- Select One -

* Other (specify): Airport Authority

* 10. Name of Federal Agency:

Federal Aviation Administration

11. Catalog of Federal Domestic Assistance Number:

20.106

CFDA Title:

Airport Improvement Program

*12. Funding Opportunity Number:

Title:

13. Competition Identification Number:

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

Huron County, City of Norwalk, Ohio

* 15. Descriptive Title of Applicant's Project:

Planning Studies (Airport Layout Plan (ALP) Update with 20:1 Obstruction Survey and Wildlife Hazard Site Visit)

Attach supporting documents as specified in agency instructions.

Application for Federal Assistance SF-424

16. Congressional Districts Of:
*a. Applicant: 4th *b. Program/Project: 4th

Attach an additional list of Program/Project Congressional Districts if needed.

17. Proposed Project:
*a. Start Date: 09/30/2016 *b. End Date: 09/30/2017

18. Estimated Funding (\$):

*a. Federal	150,000.00
*b. Applicant	8,333.50
*c. State	8,333.50
*d. Local	
*e. Other	
*f. Program Income	
*g. TOTAL	166,667.00

***19. Is Application Subject to Review By State Under Executive Order 12372 Process?**
 a. This application was made available to the State under the Executive Order 12372 Process for review on _____
 b. Program is subject to E.O. 12372 but has not been selected by the State for review.
 c. Program is not covered by E.O. 12372

***20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes", provide explanation on next page.)**
 Yes No

21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)
 ** I AGREE
** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix: Mr. *First Name: Harry
Middle Name:
*Last Name: Brady
Suffix:

*Title: President, Huron County Airport Authority

*Telephone Number: (419) 681-0323 Fax Number:

* Email: harry@huroncountyairport.co

*Signature of Authorized Representative: *Harry J Brady* *Date Signed:

Application for Federal Assistance SF-424

***Applicant Federal Debt Delinquency Explanation**

The following field should contain an explanation if the Applicant organization is delinquent on any Federal Debt. Maximum number of characters that can be entered is 4,000. Try and avoid extra spaces and carriage returns to maximize the availability of space.

The sponsor is not delinquent of any Federal debt.



FAA
Detroit Airports District Office

Federal Assistance Request Checklist

Directions - Complete the Federal Assistance Request checklist with your pre-application and application and submit a completed package.

Airport Name: Norwalk-Huron County Airport

Airport Sponsor: Huron County Airport Authority

Location (city, state): Norwalk, Ohio

Date of Application: November 23, 2015

Type of Application (check one): Pre-Application Application

Cover Letter

- Projects identified. Any changes from previous meetings/discussions should be discussed prior to submission.
- If pre-application, proposed application date identified.
- If application, any changes to requested amount are identified and reasons provided.
- If application, identify if any changes have taken place on the Exhibit "A" property map since the last grant.
- If application, identify if any changes have taken place on Exhibit "C" Title Opinion, since the last grant

Pre-Application

- Standard Form 424 - Application for Federal Assistance
- Federal Assistance Request Checklist
- Project Narrative
- Project Cost Estimate
- Project Sketch - one for each project or one drawing with all the projects clearly labeled
- Project Schedule, including schedule to develop the CSPP/CMP
- Identification of environmental requirements
- Statement of public hearing
- Preliminary sponsor scope of work for all planning/environmental projects
- Form 5100-100, -101
- Identification of DBE requirements, if any.

Application

- Standard Form 424 - Application for Federal Assistance
- Federal Assistance Request Checklist
- Project Sketch - one for each project or one drawing with all the projects clearly labeled
- Detailed project information sheet
- Bid tabulations and recommendation for award
- Project schedules for each project
- Land appraisals and negotiated purchase agreements
- Scope of work/fee schedule
- Pre-construction photos

**FY 2016 PROJECT PRE-APPLICATION
NARRATIVE
HURON COUNTY AIRPORT**

Project Description: Planning Studies

1. **Planning Studies** – In order to perform future projects at the Huron County Airport, it is necessary to perform an Airport Layout Plan (ALP) update. In conjunction with the ALP Update, a planning study will be performed to determine the airport classification based on current usage of the airport and based aircraft, an aeronautical study to verify existing structures are not considered obstructions as well as general obstruction surveys. In addition the Runway Safety Areas (RSA) will be evaluated and a Wildlife Hazard Site Visit will be completed.

ENGINEER'S ESTIMATE OF COST FOR FY 2013 PROJECTS

	Total
Planning Studies	\$ 166,667.00
<hr/>	
TOTAL	\$ 166,667.00
	FAA Share \$150,000.00
	State Share \$8,333.50
	Local Share \$8,333.50

ANTICIPATED PROJECT SCHEDULE
HURON COUNTY AIRPORT
Planning Studies

	ITEM	DATE
1.	Scoping meeting with FAA and Sponsor	February 2016
2.	Submit Grant Application	June 2016
3.	Accept FAA Grant Offer	When Awarded
4.	Prepare Planning Studies	September 2016 – September 2017
5.	Submit Close-out Report	October 2017

Application for Federal Assistance (Planning Projects)

PART II – PROJECT APPROVAL INFORMATION

<p>Item 1. Does this assistance request require State, local, regional, or other priority rating? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Name of Governing Body: Priority:</p>
<p>Item 2. Does this assistance request require State, or local advisory, educational or health clearances? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Name of Agency or Board: (Attach Documentation)</p>
<p>Item 3. Does this assistance request require clearinghouse review in accordance with OMB Circular A-95? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>(Attach Comments)</p>
<p>Item 4. Does this assistance request require State, local, regional or other planning approval? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Name of Approving Agency: Date:</p>
<p>Item 5. Is the proposed project covered by an approved comprehensive plan? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Check one: State <input type="checkbox"/> Local <input checked="" type="checkbox"/> Regional <input type="checkbox"/> Location of Plan: Airport Layout Plan (ALP)</p>
<p>Item 6. Will the assistance requested serve a Federal installation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Name of Federal Installation: Federal Population benefitting from Project:</p>
<p>Item 7. Will the assistance requested be on Federal land or installation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Name of Federal Installation: Location of Federal Land: Percent of Project: %</p>
<p>Item 8. Will the assistance requested have an impact or effect on the environment? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>(See instruction for additional information to be provided)</p>
<p>Item 9. Will the assistance requested cause the displacement of individuals, families, businesses, or farms? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Number of: Individuals: _____ Families: _____ Businesses: _____ Farms: _____</p>
<p>Item 10. Is there other related Federal assistance on this project previous, pending, or anticipated? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>(See instructions for additional information to be provided.)</p>

PART III – BUDGET INFORMATION

SECTION A – BUDGET SUMMARY

Grant Program, Function or Activity (a)	Federal Catalog No. (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. AIP	20-106	\$	\$	\$ 150,000	\$ 16,667	\$ 166,667
2.						
3.						
4.						
5. TOTALS		\$	\$	\$ 150,000	\$ 16,667	\$ 166,667

SECTION B – BUDGET CATEGORIES

6. Object Class Categories	Grant Program, Function or Activity				Total
	(1)	(2)	(3)	(4)	(5)
a. Personnel	\$ 150,000.00	\$	\$	\$	\$ 150,000.00
b. Fringe Benefits					
c. Travel					
d. Equipment					
e. Supplies					
f. Contractual					
g. Construction					
h. Other					
i. Total Direct Charges					
j. Indirect Charges					
k. TOTALS	\$	\$	\$	\$	\$
7. Program Income	\$ 150,000.00	\$	\$	\$	\$ 150,000.00

SECTION C – NON-FEDERAL RESOURCES

(a) GRANT PROGRAM	(b) APPLICANT	(c) STATE	(d) OTHER SOURCES	(e) TOTALS
8. Huron County Airport Authority	\$ 8,333.50	\$	\$	\$ 8,333.50
9. ODOT, Department of Aviation		8,333.50		8,333.50
10.				
11.				
12. TOTALS	\$ 8,333.50	\$ 8,333.50	\$	\$ 16,667.00

SECTION D – FORECASTED CASH NEEDS

	Total for 1 st Year	1 st Quarter	2 nd Quarter	3 rd Quarter	4th Quarter
13. Federal	\$ 150,000.00	\$ 37,500.00	\$ 37,500.00	\$ 37,500.00	\$ 37,500.00
14. Non-Federal	16,667.00	4,166.75	4,166.75	4,166.75	4,166.75
15. TOTAL	\$ 166,667.00	\$ 41,666.75	\$ 41,666.75	\$ 41,666.75	\$ 41,666.75

SECTION E – BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT

(a) GRANT PROGRAM	FUTURE FUNDING PERIODS (YEARS)			
	(b) FIRST	(c) SECOND	(d) THIRD	(e) FOURTH
16.	\$	\$	\$	\$
17.				
18.				
19.				
20. TOTALS	\$	\$	\$	\$

SECTION F – OTHER BUDGET INFORMATION

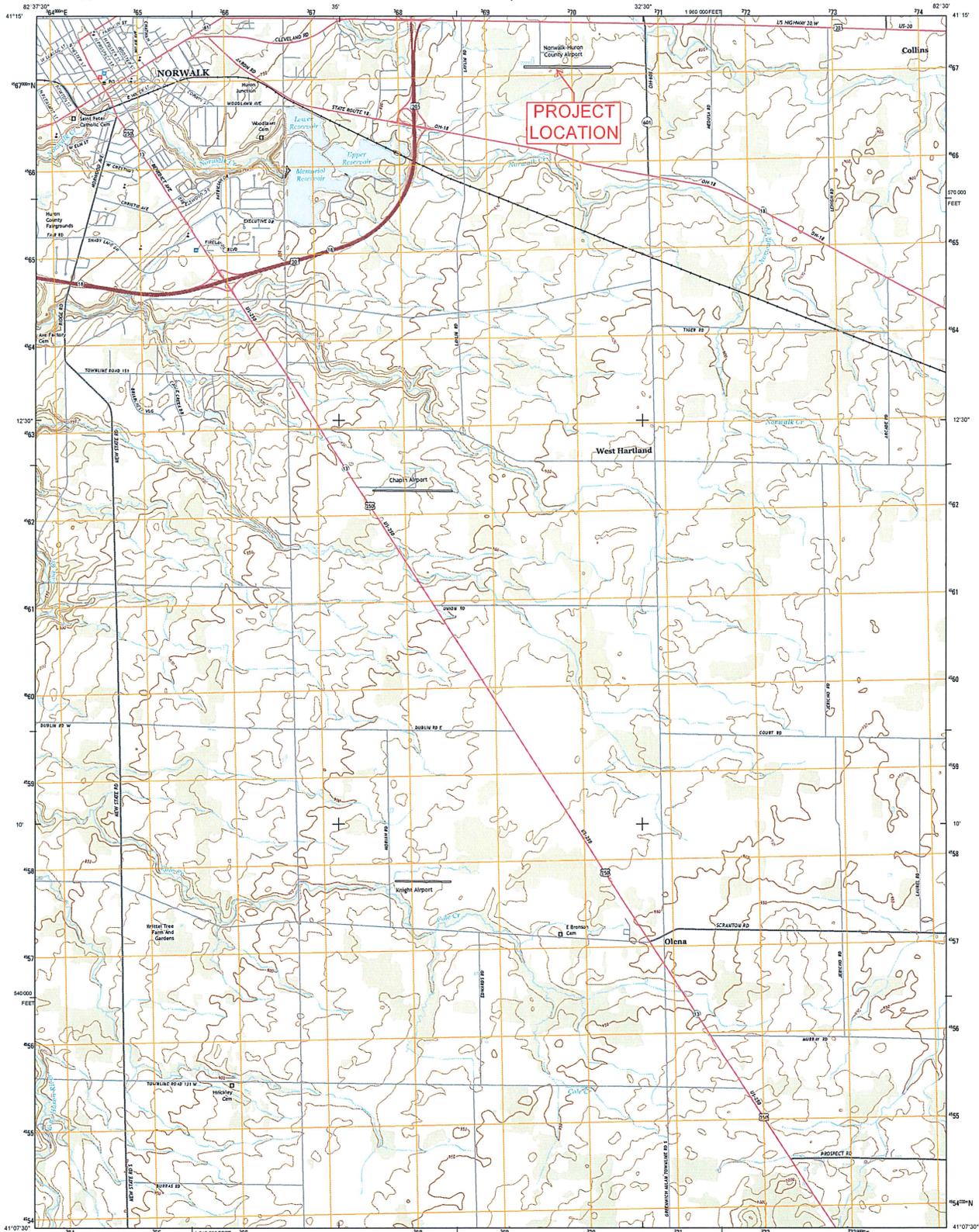
(Attach additional sheets if necessary)

<p>21. Direct Charges:</p> <p>22. Indirect Charges:</p> <p>23. Remarks:</p>

PART IV PROGRAM NARRATIVE (Attach per instructions)

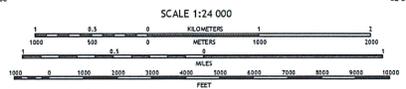
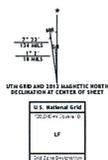
PART IV - PROGRAM NARRATIVE
(Suggested Format)

PROJECT: Planning Studies
AIRPORT: Huron County Airport
1. Objective: 1. Planning Studies – In order to perform future projects at the Huron County Airport, it is necessary to perform an Airport Layout Plan (ALP) update. In conjunction with the ALP Update, a planning study will be performed to determine the airport classification based on current usage of the airport and based aircraft, an aeronautical study to verify existing structures are not considered obstructions as well as general obstruction surveys. In addition the Runway Safety Areas (RSA) will be evaluated and a Wildlife Hazard Site Visit will be completed.
2. Benefits Anticipated: Increase the level of safety of airport operations.
3. Approach: <i>(See approved Scope of Work in Final Application)</i> The Design will be to current FAA design criteria and Advisory circulars including but not limited to 150/5300-13A "Airport Design".
4. Geographic Location: See Attached USGS Map
5. If Applicable, Provide Additional Information: N/A
6. Sponsor's Representative: <i>(include address & telephone number)</i> Ms. Melissa James, HCAA Vice President Huron County Airport 961 U.S. Route 20 East Norwalk, OH 44857 (419) 668-4155



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 17T
10 000-foot grid (Old Coordinate System of 1983 North Zone)
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:NIP, August 2011
Roads:C1008-1013 TopoTom
Name:National Hydrography Dataset, 2011
Contour:National Elevation Dataset, 2010
Boundary:Census, 18WC, BC, USGS, 1972, 2012
Public Land Survey System:BLM, 2013



QUADRANGLE COORDINATES		
82°30'	82°30'	82°30'
82°30'	82°30'	82°30'
82°30'	82°30'	82°30'
82°30'	82°30'	82°30'

NORWALK, OH
2013

ADJACENT 7.5 QUADRANGLES