

# Grant Document Workshop

October 28, 2019



# 2019 New Hampshire Aeronautics AIP Grant Documentation Workshop

## Workshop Agenda (*times are approximate*)

|          |                                                          |
|----------|----------------------------------------------------------|
| 8:00 am  | Conference Registration<br>(light refreshments provided) |
| 9:00 am  | Welcome Message                                          |
| 9:10 am  | Overview of AIP Project Funding                          |
| 9:20 am  | Grant Applications                                       |
| 9:45 am  | Grant Offers/Grant Obligations                           |
| 10:15 am | NH Governor & Council Process                            |
| 10:30 am | Break                                                    |
| 10:40 am | Grant Reimbursements                                     |
| 11:15 am | Grant Amendments/Closeout Documentation                  |
| 11:45 am | Workshop Closing Comments/Questions & Answers            |

Monday, October  
28, 2019  
NHDOT Offices  
7 Hazen Drive  
Concord, NH

Topics will focus on the  
FAA's Airport Improvement  
Program (AIP) processes for  
both Block Grant and non-  
Block Grant airport projects  
in New Hampshire.

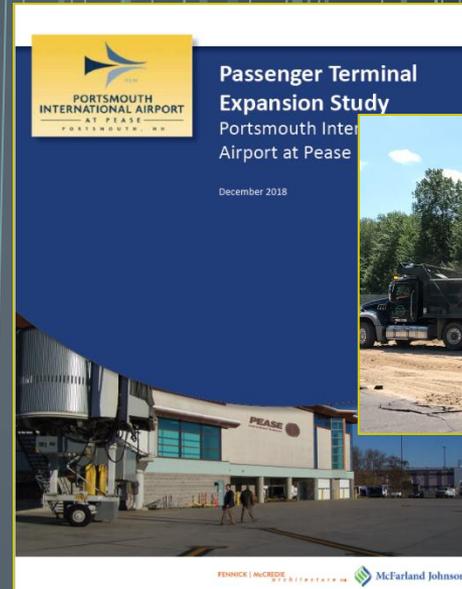
# Overview of AIP Project Funding

Items to be covered:  
Funding types  
Grant types  
Grant obligations

Resource: FAA Order 5100.38D, *Airport  
Improvement Program Handbook*



SBGP vs. non-SBGP



# AIP Project Funding

All SBGP Projects are AIP Projects, but not all AIP projects are SBGP Projects.

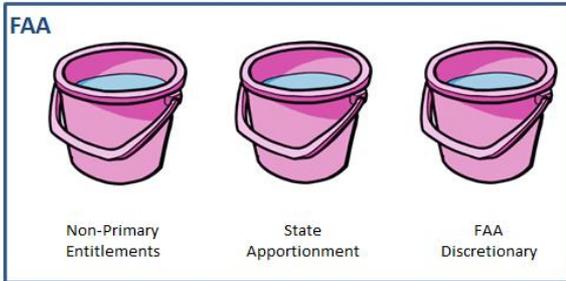
- FAA authorization act sets the target amount of AIP funding authorized by federal fiscal year.
- FAA appropriations act makes the funding available.
  - May not contain the full target amount previously authorized.

## SBGP Projects

90%

5%

5%



## Non - SBGP Projects

90%

5%

5%



# AIP Project Funding

## Grant Types

- Planning
  - Cannot get amendments.
  - Project Examples:  
planning studies, environmental studies, statewide studies.
- Development
  - Can get up to 15% funding in amendment if funding is available **or** change the scope of work\*.
  - Project Examples: design only, design-construct, equipment purchase.
- Noise Program
  - Can get up to 15% funding in amendment if funding is available.
  - Project Examples: Part 150 Study/Map, noise mitigation, noise monitoring.
- Land or Easement Acquisition
  - Can get up to 15% funding in amendment if funding is available.

### CONDITIONS

1. **Maximum Obligation.** The maximum obligation of the United States and State payable under this Offer is **\$511,252.00**.

The following amounts represent a breakdown of the maximum obligation for the purpose of establishing allowable amounts for any future grant amendment, which may increase the foregoing maximum obligation of the United States under the provisions of 49 U.S.C. § 47108(b):

\$0.00 for planning

\$511,252.00 for airport development or noise program implementation

\$0.00 for land acquisition.

\* FAA Order 5100.38D, Table 5-23(f).

# AIP Project Funding

Use the latest versions of these documents.

## Grant Obligations and Certifications

- Grant Assurances
  - Airport Sponsors must maintain and operate the airport in a safe and efficient manner.
  - Some conditions that must occur before a grant is issued.
  - Specific to grant implementation.
- Grant Conditions
  - Standard conditions apply to all project types.
  - Special conditions are specific to project type.
    - Comprehensive general liability insurance is required for SBGP projects.
- Sponsor Certifications
  - Some are specific to project type.
  - Some apply to all projects.
- Other Certifications
  - Conflict of Interest
  - Drug-Free Workplace
  - Certification Regarding Lobbying

The image shows two pages of the FAA Form 1105-136 (217) Airport Improvement Program Sponsor Certification. The top page contains the header with the U.S. Department of Transportation logo and OMB CONTROL NUMBER 3105-006. The title is "Certification and Disclosure Regarding Potential Conflicts of Interest Airport Improvement Program Sponsor Certification". It includes fields for Sponsor, Airport, Project Number, and Description of Work. The "Application" section explains that the form is required for all AIP projects and lists three categories of potential conflicts of interest: (a) The employee, officer, or agent; (b) Any member of his immediate family; and (c) An organization which employs, or is about to employ, any of the above. A "Certification Statements" section follows, with a checkbox for "Yes" and "No". The bottom page contains questions 2 and 3 regarding the sponsor's certification of accuracy and disclosure. It includes a section for "Sponsor's Certification" with fields for the sponsor's name, address, city, state, and zip, and the name and title of the authorized official. A signature line is provided at the bottom.

# Grant Applications

Items to be covered:

Overview

Contents of grant applications

Budget sheets

Unique budget items

Program narrative

Agency review of grant applications

[View Burden Statement](#)

OMB Number: 4040-0004  
Expiration Date: 12/31/2010

## Application for Federal Assistance SF-424

|                                                                                                         |  |                                           |                                         |                                                     |  |
|---------------------------------------------------------------------------------------------------------|--|-------------------------------------------|-----------------------------------------|-----------------------------------------------------|--|
| <b>* 1. Type of Submission:</b>                                                                         |  | <b>* 2. Type of Application:</b>          |                                         | <b>* If Revision, select appropriate letter(s):</b> |  |
| <input type="checkbox"/> Preapplication                                                                 |  | <input type="checkbox"/> New              |                                         | <input type="text"/>                                |  |
| <input type="checkbox"/> Application                                                                    |  | <input type="checkbox"/> Continuation     |                                         | <b>* Other (Specify):</b>                           |  |
| <input type="checkbox"/> Changed/Corrected Application                                                  |  | <input type="checkbox"/> Revision         |                                         | <input type="text"/>                                |  |
| <b>* 3. Date Received:</b>                                                                              |  | <b>4. Applicant Identifier:</b>           |                                         |                                                     |  |
| <input type="text"/>                                                                                    |  | <input type="text"/>                      |                                         |                                                     |  |
| <b>5a. Federal Entity Identifier:</b>                                                                   |  |                                           | <b>5b. Federal Award Identifier:</b>    |                                                     |  |
| <input type="text"/>                                                                                    |  |                                           | <input type="text"/>                    |                                                     |  |
| <b>State Use Only:</b>                                                                                  |  |                                           |                                         |                                                     |  |
| <b>6. Date Received by State:</b>                                                                       |  | <b>7. State Application Identifier:</b>   |                                         |                                                     |  |
| <input type="text"/>                                                                                    |  | <input type="text"/>                      |                                         |                                                     |  |
| <b>8. APPLICANT INFORMATION:</b>                                                                        |  |                                           |                                         |                                                     |  |
| <b>* a. Legal Name:</b> <input type="text"/>                                                            |  |                                           |                                         |                                                     |  |
| <b>* b. Employer/Taxpayer Identification Number (EIN/TIN):</b>                                          |  |                                           | <b>* c. Organizational DUNS:</b>        |                                                     |  |
| <input type="text"/>                                                                                    |  |                                           | <input type="text"/>                    |                                                     |  |
| <b>d. Address:</b>                                                                                      |  |                                           |                                         |                                                     |  |
| <b>* Street1:</b> <input type="text"/>                                                                  |  |                                           |                                         |                                                     |  |
| <b>Street2:</b> <input type="text"/>                                                                    |  |                                           |                                         |                                                     |  |
| <b>* City:</b> <input type="text"/>                                                                     |  |                                           |                                         |                                                     |  |
| <b>County/Parish:</b> <input type="text"/>                                                              |  |                                           |                                         |                                                     |  |
| <b>* State:</b> <input type="text"/>                                                                    |  |                                           |                                         |                                                     |  |
| <b>Province:</b> <input type="text"/>                                                                   |  |                                           |                                         |                                                     |  |
| <b>* Country:</b> <input type="text" value="USA: UNITED STATES"/>                                       |  |                                           |                                         |                                                     |  |
| <b>* Zip / Postal Code:</b> <input type="text"/>                                                        |  |                                           |                                         |                                                     |  |
| <b>e. Organizational Unit:</b>                                                                          |  |                                           |                                         |                                                     |  |
| <b>Department Name:</b>                                                                                 |  |                                           | <b>Division Name:</b>                   |                                                     |  |
| <input type="text"/>                                                                                    |  |                                           | <input type="text"/>                    |                                                     |  |
| <b>f. Name and contact information of person to be contacted on matters involving this application:</b> |  |                                           |                                         |                                                     |  |
| <b>Prefix:</b> <input type="text"/>                                                                     |  | <b>* First Name:</b> <input type="text"/> |                                         |                                                     |  |
| <b>Middle Name:</b> <input type="text"/>                                                                |  |                                           |                                         |                                                     |  |
| <b>* Last Name:</b> <input type="text"/>                                                                |  |                                           |                                         |                                                     |  |
| <b>Suffix:</b> <input type="text"/>                                                                     |  |                                           |                                         |                                                     |  |
| <b>Title:</b> <input type="text"/>                                                                      |  |                                           |                                         |                                                     |  |
| <b>Organizational Affiliation:</b>                                                                      |  |                                           |                                         |                                                     |  |
| <input type="text"/>                                                                                    |  |                                           |                                         |                                                     |  |
| <b>* Telephone Number:</b> <input type="text"/>                                                         |  |                                           | <b>Fax Number:</b> <input type="text"/> |                                                     |  |
| <b>* Email:</b> <input type="text"/>                                                                    |  |                                           |                                         |                                                     |  |

# Grant Application

NHDOT needs 1 copy of everything sent to the FAA.

|                                | SBGP                                  | Non-SBGP            |          |
|--------------------------------|---------------------------------------|---------------------|----------|
|                                | NHDOT                                 | FAA                 | NHDOT    |
| Copies needed                  | 4                                     | 3                   | 1        |
| Deadlines                      | April 1 <sup>st</sup>                 | May 1 <sup>st</sup> |          |
| Signatures                     | At least one with original signatures | 2 Original +1 Copy  | 1 Copy   |
| Permits in hand at application | Optional                              | Required            |          |
| Bid tab at application         | Required                              | Required*           | Required |

Q: Do you submit the Certification of Final Project Acceptance with the grant application? YES (SBGP) and OPTIONAL (non-SBGP)

\* Bid tabs are required for all construction/equipment projects but they are optional for grants that are submitted on estimates to the FAA (grants on estimates are a rare occurrence).

# Grant Application – SBGP



- One checklist for all projects.
  - Checklist found on NHDOT website.
  - Based on FAA checklist
  - SBGP: Double-sided grant application
  - Non-SBGP: Single-sided grant application
  - SBGP: Don't include section separation pages
  - Don't include instruction pages!
  - See also FAA ARP SOP No. 6.00

**CHECKLIST FOR GRANT APPLICATION COMPLETENESS**

| Airport Name:                                                                     | Project Name/Number:      |           |                  |                            |
|-----------------------------------------------------------------------------------|---------------------------|-----------|------------------|----------------------------|
|                                                                                   | Planning or Environmental | Equipment | Land or Easement | Design and/or Construction |
| SF 424 (complete, signed, dated)                                                  |                           |           |                  |                            |
| FAA 5100-101                                                                      |                           | N/A       | N/A              | N/A                        |
| FAA Form 5100-100 (full sentences, Exhibit A statement)                           | N/A                       |           |                  |                            |
| Program Narrative                                                                 |                           |           |                  |                            |
| • Objective                                                                       |                           |           |                  |                            |
| • Benefits                                                                        |                           |           |                  |                            |
| • Approach                                                                        |                           |           |                  |                            |
| • Geographic location                                                             |                           |           |                  |                            |
| • Sponsor's representative                                                        |                           |           |                  |                            |
| • NEPA statement                                                                  |                           |           |                  |                            |
| • DBE statement                                                                   |                           |           |                  |                            |
| • Exhibit A Statement                                                             |                           | N/A       | N/A              | N/A                        |
| • Cost breakdown                                                                  |                           |           |                  |                            |
| • Project schedule                                                                |                           |           |                  |                            |
| • EO 12372 statement                                                              |                           |           |                  |                            |
| Bid Tabulation                                                                    | N/A                       |           | N/A              |                            |
| Final Engineering Scope & Fee (optional)                                          |                           |           |                  |                            |
| Organizational Chart                                                              |                           |           |                  |                            |
| Project Sketch                                                                    |                           | N/A       |                  |                            |
| Drug-Free Workplace Certification (with workplace location(s))                    |                           |           |                  |                            |
| Certification & Disclosure Regarding Potential Conflicts of Interest              |                           |           |                  |                            |
| Certification Regarding Lobbying                                                  |                           |           |                  |                            |
| Sponsor Grant Assurances (version 3/2014; AC checklist date of 4-18-2019)         |                           |           |                  |                            |
| A/C Checklist (4-18-2019)                                                         |                           |           |                  |                            |
| Exhibit A (only IF property has changed hands since last grant; hardcopy and PDF) |                           |           |                  |                            |
| Certification of:                                                                 |                           |           |                  |                            |
| • Consultant Selection                                                            |                           |           |                  |                            |
| • Project Plans & Specs                                                           | N/A                       |           |                  |                            |
| • Equip & Construct Contracts                                                     | N/A                       |           | N/A              |                            |
| • Real Property                                                                   | N/A                       | N/A       |                  | N/A                        |
| • Final Acceptance                                                                | N/A                       |           |                  |                            |

\\FDG11\Arms\ar\Bak\_Grant\_Site\ASGP\_AFP\_Checklist3 - Planning\_Cmp\_Checklist4 - Grant Offer - Grant Assurances Checklist\checklist for grant application completeness.doc

# Grant Application – Non-SBGP

For ANE AIP Development - Construction Project Application Submission:

Application Content

SF-424 (OMB Form Please do not submit instruction pages)

5100-100 form (pages 1, 2, 3, & 7 - all seven pages must be submitted)

Please do not submit instruction pages

Supplemental Narrative page(s)

Please refer to next page for required items

Sketch of Project Area (preferably printed on 8.5" x 11" paper)

Drug Free Workplace Certification form (also known as Certification of Cooperative Agreements form)

A/C Checklist (Reminder - fill in the blank for item #2)

Exhibit A Property Map (2 printed D size drawings and 2 PDF files)

Certification of Consultant Selection Form

Sponsor Certification for Project Form

Sponsor Certification for Equipment/Construction Contracts form

Sponsor Certification for Real Property

Standard DOT Title VI Assurance

ANE AIP Development-Construction App Subject to Change

For ANE AIP Environmental or Planning Project Application Submission:

Application Content

SF-424 (OMB Form Please do not submit instruction pages)

5100-100 form (pages 1, 2, 3, & 7 - all seven pages must be submitted)

Please do not submit instruction pages

Supplemental Narrative page(s)

Please refer to next page for required items

Sketch of Project Area (preferably printed on 8.5" x 11" paper)

Drug Free Workplace Certification form (also known as Certification of Cooperative Agreements form)

A/C Checklist (Reminder - fill in the blank for item #2)

Exhibit A Property Map (2 printed D size drawings and 2 PDF files)

Certification of Consultant Selection Form

Sponsor Certification for Project Form

Sponsor Certification for Equipment/Construction Contracts form

Sponsor Certification for Real Property

Standard DOT Title VI Assurance

ANE AIP Development-Planning App Subject to Change

For ANE AIP Equipment Acquisition Project Application Submission:

Application Content

SF-424 (OMB Form Please do not submit instruction pages)

5100-100 form (pages 1, 2, 3, 4, 5, 6, & 7 - all seven pages must be submitted)

Please do not submit instruction pages

Supplemental Narrative page(s)

Please refer to next page for required items

Sketch of Project Area (preferably printed on 8.5" x 11" paper)

Drug Free Workplace Certification form (also known as Certification of Cooperative Agreements form)

A/C Checklist (Reminder - fill in the blank for item #2)

Exhibit A Property Map (2 printed D size drawings and 2 PDF files)

Certification of Consultant Selection Form

Sponsor Certification for Project Form

Sponsor Certification for Equipment/Construction Contracts form

Sponsor Certification for Real Property

Standard DOT Title VI Assurance

ANE AIP Development-Equipment App Subject to Change

For ANE AIP Land and/or Easement Acquisition Project Application Submission:

Application Content

SF-424 (OMB Form Please do not submit instruction pages)

5100-100 form (pages 1, 2, 3, 4, 5, 6, & 7 - all seven pages must be submitted)

Please do not submit instruction pages

Supplemental Narrative page(s)

Please refer to following page for required items

Sketch of Project Area (preferably printed on 8.5" x 11" paper)

Drug Free Workplace Certification form (also known as Certification of Cooperative Agreements form)

A/C Checklist (Reminder - fill in the blank for item #2)

Exhibit A Property Map (2 printed D size drawings and 2 PDF files)

Certification of Consultant Selection Form

Sponsor Certification for Project Form

Sponsor Certification for Equipment/Construction Contracts form

Sponsor Certification for Real Property

Standard DOT Title VI Assurance

ANE AIP Development-Land/Easements App Subject to Change

FAA New England Region Airports Division

**AIP Application Submission Requirements for Development-Construction Projects**

Reminders pertaining to all application submissions:

- This regional office's deadline to receive AIP application submissions is May 1<sup>st</sup> (on bid).
- Airport Sponsors must use current forms as part of their application submission, we cannot accept outdated/old forms (e.g. sponsor certifications, FAA Form 5100-101, FAA Form 5100-100, etc.).
- Do not combine a construction project with either a planning project, a land/easements project, and/or an environmental project in one application.
- Rule of thumb – keep the applications "clean." So, one "stand alone" application for construction, one for planning, one for equipment, one for land/easements, and one for environmental. When in doubt, please contact our AIP Airports Program Specialist.
- There are certain projects/work elements that we do not want combined with other elements into a single application. These projects/work elements will need to be submitted as a "stand-alone" application. The projects that will need a "stand-alone" application are:
  - Wildlife Hazard Assessments
  - Remunerable Agreements
  - Land and/or Easement Acquisition
- Application descriptions must be clear on what will be done with the requested AIP funds. Anyone reading the project description should be able to figure out what the application is for.
  - If the application is for a phase of an overall project, then the description must describe what will be funded for that particular phase.
- If an Airport Sponsor is required to submit an updated Exhibit A Property Map, then the Airport Sponsor must:
  - follow FAA Airports Division Exhibit A Standard Operating Procedure (SOP);
  - submit a completed Exhibit A SOP Checklist;
    - Please note that the signature block is for FAA staff only
  - submit 2 D size paper Exhibit A drawings (24 x 36 inches); and
  - submit a CD with a PDF version of the Exhibit A drawing.

If you are unsure as to whether or not you need to submit an Exhibit A Property Map, then please check with our FAA Compliance and Land Use Specialist.

This regional office has five different application requirements documents, one for each "project type" (e.g. planning, environmental, equipment acquisition, etc.). These documents are located on our regional website ([http://www.faa.gov/airports/new\\_england/aip/](http://www.faa.gov/airports/new_england/aip/))

If you have questions regarding application submission requirements, then please contact this regional office's FAA AIP Program Specialist.

ANE AIP Development-Construction App Subject to Change | Issued on 18 NOV 2016 | ANE-410 | Page 1 of 4

- 4 unique checklists
- [https://www.faa.gov/airports/new\\_england/aip/](https://www.faa.gov/airports/new_england/aip/)
- Make sure you follow the correct checklist for your project.
- Read the whole document, not just the charts.
- Don't include instruction pages!
- See also FAA ARP SOP No. 6.00

Important information too

When in doubt, contact your FAA Project Manager!

# Grant Application

- FAA Form 5100-100 “Budget Sheets”
  - For development, equipment, & land projects
  - Answer questions with full sentences
- FAA Form 5100-101 “Budget Sheets”
  - For planning & environmental projects
  - Fill out all “Sections”

Use the latest versions of these documents.

U.S. Department of Transportation  
Federal Aviation Administration

OMB CONTROL NUMBER: 2120-0069  
EXPIRATION DATE: 9/31/2019

### Application for Federal Assistance (Planning Projects)

#### Part II – Project Approval Information

##### Section A – Statutory Requirements

The term “Sponsor” refers to the applicant name as provided in box 8 of the associated SF-424 form.

**Item 1**  
Does Sponsor maintain an active registration in the System for Award Management (www.SAM.gov)?  Yes  No

**Item 2**  
Can Sponsor commence the work identified in the application in the fiscal year the grant is made or within six months after the grant is made, whichever is later?  Yes  No  N/A

**Item 3**  
Are there any foreseeable events that would delay completion of the project? If yes, provide attachment to this form that lists the events.  Yes  No  N/A

**Item 4**  
Is the project covered by another Federal assistance program? If yes, please identify other funding sources by the Catalog of Federal Domestic Assistance (CFDA) number.  Yes  No  N/A  
CFDA: \_\_\_\_\_

**Item 5**  
Will the requested Federal assistance include Sponsor indirect costs as described in 2 CFR Appendix VII to Part 200, States and Local Government and Indian Tribe indirect cost proposal?  Yes  No  N/A

If the request for Federal assistance includes a claim for allowable indirect costs, select the applicable indirect cost rate the Sponsor proposes to apply:  
 De Minimis rate of 10% as permitted by 2 CFR § 200.414  
 Negotiated Rate equal to \_\_\_\_\_ % as approved by \_\_\_\_\_ (the Cognizant Agency) on \_\_\_\_\_ (Date) (2 CFR part 200, appendix VII)  
 Note: Refer to the instructions for limitations of application associated with claiming Sponsor indirect costs.

FAA Form 5100-101 (416) SUPERSEDES PREVIOUS EDITION Page 1 of 4

Part III – Budget Information

#### Section A – Budget Summary

| New or Revised Budget | Total           |             |
|-----------------------|-----------------|-------------|
|                       | Non-Federal (B) | Federal (A) |
| 1                     | \$              | \$          |
| 2                     | \$              | \$          |
| 3                     | \$              | \$          |

(Programs)

| Other Program (D) | Adjustment + or (-) Amount (Use only for revisions) | Total |
|-------------------|-----------------------------------------------------|-------|
| Amount            |                                                     |       |
|                   | \$                                                  | \$    |
|                   | \$                                                  | \$    |
|                   | \$                                                  | \$    |

| Other Sources (E) | Total (H) |
|-------------------|-----------|
| 1                 | \$        |
| 2                 | \$        |
| 3                 | \$        |

| Year | 3 <sup>rd</sup> Year | 4 <sup>th</sup> Year |
|------|----------------------|----------------------|
| 1    | \$                   | \$                   |
| 2    | \$                   | \$                   |
| 3    | \$                   | \$                   |

FAA Form 5100-101 (316) SUPERSEDES PREVIOUS EDITION Page 3 of 4

OMB CONTROL NUMBER: 2120-0069  
OMB EXPIRATION DATE: 9/31/2019

### PART II – SECTION C

The Sponsor hereby represents and certifies as follows:

- Compatible Land Use** – The Sponsor has taken the following actions to assure compatible usage of land adjacent to or in the vicinity of the airport: \_\_\_\_\_
- Defaults** – The Sponsor is not in default on any obligation to the United States or any agency of the United States Government relative to the development, operation, or maintenance of any airport, except as stated herewith: \_\_\_\_\_
- Possible Disabilities** – There are no facts or circumstances (including the existence of effective or proposed leases, use agreements or other legal instruments affecting use of the airport or the existence of pending litigation or other legal proceedings) which in reasonable probability might make it impossible for the Sponsor to carry out and complete the Project or carry out the provisions of the Grant Assurances, either by limiting its legal or financial ability or otherwise, except as follows: \_\_\_\_\_
- Consistency with Local Plans** – The project is reasonably consistent with plans existing at the time of submission of this application of public agencies that are authorized by the State in which the project is located to plan for the development of the area surrounding the airport: \_\_\_\_\_
- Consideration of Local Interest** – It has given full consideration to the fact that the project may be located: \_\_\_\_\_
- Consultation with Users** – In making a decision to use the airport, it has consulted with airport users that will be affected: \_\_\_\_\_
- Public Hearings** – In projects involving the location of the project, the Sponsor has afforded the opportunity for public hearings for the purpose of the project to be located, designed, constructed, and operated in a manner that is consistent with the quality standards in any case where such standards have been promulgated by the Administrator. Notices of such hearings to the Secretary. Further, for such projects, if the project is located in a community where the project is located or has advised the Secretary concerning a proposed project: \_\_\_\_\_
- Air and Water Quality Standards** – In projects involving the location of the project, the Sponsor has afforded the opportunity for the Government of the State in which the project will be located, designed, constructed, and operated in a manner that is consistent with the quality standards in any case where such standards have been promulgated by the Administrator. Notices of such hearings to the Secretary. Further, for such projects, if the project is located in a community where the project is located or has advised the Secretary concerning a proposed project: \_\_\_\_\_

FAA Form 5100-100 (316) SUPERSEDES PREVIOUS EDITION

OMB CONTROL NUMBER: 2120-0069  
EXPIRATION DATE: 9/31/2019

activity at any airport

OMB CONTROL NUMBER: 2120-0069  
OMB EXPIRATION DATE: 9/31/2019

### PART III – BUDGET INFORMATION – CONSTRUCTION

#### SECTION A – GENERAL

- Federal Domestic Assistance Catalog Number: \_\_\_\_\_
- Functional or Other Breakout: \_\_\_\_\_

#### SECTION B – CALCULATION OF FEDERAL GRANT

| Cost Classification                                     | Label Approved Amount (Use only for revisions) | Adjustment + or (-) Amount (Use only for revisions) | Total Amount Required |
|---------------------------------------------------------|------------------------------------------------|-----------------------------------------------------|-----------------------|
| 1. Administration expense                               |                                                |                                                     |                       |
| 2. Preliminary expense                                  |                                                |                                                     |                       |
| 3. Land, structures, right-of-way                       |                                                |                                                     |                       |
| 4. Architectural engineering base fees                  |                                                |                                                     |                       |
| 5. Other Architectural engineering fees                 |                                                |                                                     |                       |
| 6. Project inspection fees                              |                                                |                                                     |                       |
| 7. Land development                                     |                                                |                                                     |                       |
| 8. Relocation Expenses                                  |                                                |                                                     |                       |
| 9. Relocation payments to Individuals and Businesses    |                                                |                                                     |                       |
| 10. Demolition and removal                              |                                                |                                                     |                       |
| 11. Construction and project improvement                |                                                |                                                     |                       |
| 12. Equipment                                           |                                                |                                                     |                       |
| 13. Miscellaneous                                       |                                                |                                                     |                       |
| 14. Subtotal (Lines 1 through 13)                       |                                                |                                                     |                       |
| 15. Estimated income (if applicable)                    |                                                |                                                     |                       |
| 16. Net Project Amount (Line 14 minus 15)               |                                                |                                                     |                       |
| 17. Less: Ineligible Exclusions (Section C, line 23 g.) |                                                |                                                     |                       |
| 18. Subtotal (Lines 16 through 17)                      |                                                |                                                     |                       |
| 19. Federal Share requested of Line 18                  |                                                |                                                     |                       |
| 20. Grantee share                                       |                                                |                                                     |                       |
| 21. Other shares                                        |                                                |                                                     |                       |
| 22. TOTAL PROJECT (Lines 18, 20 & 21)                   |                                                |                                                     |                       |

FAA Form 5100-100 (316) SUPERSEDES PREVIOUS EDITION Page 5 of 7

# Grant Application

Key  
Points!

- Sponsor Administration Cost
  - FAA Order 5100.38D, paragraph 3-60:  
“By FAA Policy, a line item for estimated administrative costs can be included in the grant application if the sponsor cannot accurately calculate the total administrative costs. However, these estimated administrative costs must not exceed 2% of the grant amount or \$10,000, whichever is less.”
- Sponsor Force Account
  - Is allowed under 2 CFR Part 200
  - Sponsor must request to use force account and have approval in advance of grant offer.
    - Documentation of the request and approval must be maintained by the Sponsor.
  - Written request must meet requirements in FAA Order 5100.38D, Table 3-33.
    - Work Effort Scope, Justification, Personnel Qualifications, Detailed Cost Estimate, Sponsor’s Resources, Cost Analysis.
  - Sponsor-furnished or donated materials/supplies are force account and are not used to offset local share (FAA Order 5100.38D, paragraph U-3).

# Grant Application

Key  
Points!

- Non-SBGP projects have a minimum grant threshold amount of \$25,000 unless justified to go lower.
  - FAA Order 5100.38D, paragraph 5-20a.
- No project amounts may be included for contingencies.
- Make sure to use the project title from the scoping meeting.
- Use the latest version of the grant forms.
- Fill out all forms completely...don't forget to sign in *all the right places* (and dates too).
  - Check to see if the blanks are supposed to be blank.
- Double (and triple) check that the certifications match the project and circumstances for that project...NHDOT and FAA check these!

|                                     |     |
|-------------------------------------|-----|
| <input checked="" type="checkbox"/> | Yes |
| <input type="checkbox"/>            | No  |
| <input type="checkbox"/>            | N/A |

# Grant Application

- Program narrative
  - FAA needs enough to describe the project.
  - NHDOT needs to know:
    - Why the project is needed?
    - What will the end product be?
    - Are there any unique circumstances?
    - Is this project the result of a safety inspection, elected official's request, Runway Incursion Mitigation effort?
    - Are the project shares anything other than the usual 90%-5%-5% split?
    - Is this project retroactive?
  - Make sure the project cost matches SF 424 and FAA Form 5100-10X.
  - Refer to FAA SOP 6.00 FMI.

**Part IV - Program Narrative**  
(Suggested Format)

|                                                                   |  |
|-------------------------------------------------------------------|--|
| PROJECT:                                                          |  |
| AIRPORT:                                                          |  |
| 1. Objective:                                                     |  |
| 2. Benefits Anticipated:                                          |  |
| 3. Approach: (See approved Scope of Work in Final Application)    |  |
| 4. Geographic Location:                                           |  |
| 5. If Applicable, Provide Additional Information:                 |  |
| 6. Sponsor's Representative: (include address & telephone number) |  |

# Additional NHDOT Reviews of SBGP Grant Applications



- If permits or CSPP and OE/AAA case approvals are not in hand at the time of the grant application, then there will be a grant condition added to the offer withholding grant reimbursements until permits are received.
- Note: If the engineering cost is greater than 25% of the *construction* cost, then NHDOT will require justification for engineering cost to be included into the program narrative.
- Bids must remain valid through the entire G&C process.
- No grant will be issued for projects that can't meet the Buy American Preference requirements (100% or waiver\*).

## CHECKLIST FOR GRANT OFFER READINESS

Airport Name:

Project Name/Number:

|                                                                                     | Yes, No, N/A | NHDOT Initials | Date |
|-------------------------------------------------------------------------------------|--------------|----------------|------|
| Grant Application is Complete <small>(*according to website)</small>                |              |                |      |
| Airport Sponsor has current SAM.gov registration                                    |              |                |      |
| Record of Negotiations Approved                                                     |              |                |      |
| E.O. 12372 Summary Received                                                         |              |                |      |
| <small>*check SF424 Form Box 19</small>                                             |              |                |      |
| DBE Plan Approved by FAA                                                            |              |                |      |
| <small>*if over \$250,000</small>                                                   |              |                |      |
| Consistent with ALP                                                                 |              |                |      |
| Construction Safety and Phasing Plan Approved                                       |              |                |      |
| Bid Tabulation Received with Engineer's Construction Cost Estimate                  |              |                |      |
| Construction Award Recommendation Approved                                          |              |                |      |
| Permits Received                                                                    |              |                |      |
| Fair Market Value Approved                                                          |              |                |      |
| <small>*Land or easement acquisition</small>                                        |              |                |      |
| Title Opinion Received                                                              |              |                |      |
| <small>*Land acquisition only</small>                                               |              |                |      |
| CATEX or FONSI for NEPA Compliance Received                                         |              |                |      |
| <small>*In Program Narrative</small>                                                |              |                |      |
| SRE Calculations Approved                                                           |              |                |      |
| Percent Engineering                                                                 |              |                |      |
| <small>*Design or Construction Projects only (Consult Cost/Contractor Cost)</small> |              |                |      |
| Project Org Chart                                                                   |              |                |      |
| Date Bids Expire                                                                    |              |                |      |
| <small>*In Bid Book</small>                                                         |              |                |      |

S:\Block Grant State\SBGP Overview, Checklist, Policies, Training\SBGP Checklist\checklist for grant offer readiness.doc

\*Only FAA has authorization to review and approve BA waivers.

# Grant Offers

Items to be covered:

Signatures

Special grant conditions

Period of Performance vs. Period of Availability



# Grant Offer

Key  
Points!

The grant agreement is a binding agreement obligating the sponsor and the FAA or NHDOT to the terms and conditions of the grant agreement.

- Offer valid for 30 days usually. Extensions must be requested in writing.
- Grant offers cannot be modified in any way.
- FAA issues 2 duplicate AIP grant offers per project for non-SBGP.
  - FAA needs 1 original back. The sponsor keeps the other copy.
  - NHDOT needs a .pdf of grant offer to submit to Governor and Council.
- NHDOT issues 3 duplicate SBG grant offers per project for SBGP.
  - NHDOT must have all 3 back with original signatures.
  - Grant offer must fit in G&C binders

# Grant Offer

- Special Conditions may be included with the grant offer depending on the project type or required documentation.
  - e.g. permits not issued yet, pavement maintenance management plan, CSPP approval, other unique circumstances

| Checklist for Grant Offer Special Conditions (Subgrant Agreement Checklist)                           |                                           |
|-------------------------------------------------------------------------------------------------------|-------------------------------------------|
| Date Checklist is Completed                                                                           |                                           |
| Sponsor Name (see next page)                                                                          |                                           |
| Project #                                                                                             |                                           |
| Project Title                                                                                         |                                           |
| Airport's DUNS #                                                                                      |                                           |
| Date of Project Grant Application                                                                     |                                           |
| FAA + State Amount: \$                                                                                | Percentage: 95%                           |
| Exhibit 'A' Plan Date                                                                                 |                                           |
| Period of Performance End Date                                                                        |                                           |
| Multi-Year Grant                                                                                      | NO YES FY to FY                           |
| Planning Grant                                                                                        | YES NO                                    |
| Airport Development Grant                                                                             | YES NO                                    |
| Yes/No                                                                                                | Other Data                                |
| <b>Special Grant Conditions - per Jean LoGiudice 8/7/2017 e-mail (APP-220 is the keeper of these)</b> |                                           |
| Multi-Year Grants - Letter of Agreement                                                               | Items completed through FY                |
| ARFF and SRE: Equipment Acquisition                                                                   |                                           |
| ARFF and SRE: Equipment Replacement                                                                   |                                           |
| ARFF: Off-Airport Storage of Vehicles                                                                 |                                           |
| AWOS                                                                                                  |                                           |
| ALP: Updated for As-Builts                                                                            |                                           |
| Lighting: Operations and Maintenance                                                                  |                                           |
| Temporary NAVADS                                                                                      | Type of equipment:                        |
| Construction on Land Not Yet Acquired: Notice to Proceed                                              | Acquire:                                  |
| Construction on Land Not Yet Acquired: Title Evidence                                                 |                                           |
| DBE Plan                                                                                              | Name: Number: Migrate: Measure: etc.      |
| Environmental Approval/Permitting                                                                     |                                           |
| EMAS: Pre-Purchase                                                                                    |                                           |
| Equipment Acquisition - Use for Airport Purpose                                                       |                                           |
| Equipment: Friction Measuring Device                                                                  |                                           |
| NAVADS: SLS Installation                                                                              |                                           |
| Fence: Wildlife                                                                                       |                                           |
| Update Exhibit 'A' for Land Project                                                                   |                                           |
| Land Acquisition: Reciprocity/Grant Agreement                                                         |                                           |
| Land Acquisition: E-File Submittal                                                                    |                                           |
| Future Development of Land Acquired with AP Funds                                                     | Years until development occurs:           |
| Master Plan: Coordination with Local Planning Agencies                                                |                                           |
| New Runway, New Airport, or Major Extension Coordination                                              | NO for medium and large hub airports only |
| NAVADS: Operation and Maintenance of Airport-Owned Navads                                             |                                           |
| New or Replacement Airport: Site Selection                                                            |                                           |
| AGIS Survey Requirements                                                                              |                                           |
| Non-AP Utility Prioritization                                                                         | Utility Name: % Allowable Costs:          |
| Obstruction Removal                                                                                   | Name: Category: Lat: Longitude: etc.      |
| Pavement Maintenance Management Program                                                               |                                           |
| Construction Management Plan (agreement exceeding \$50,000)                                           | Justification:                            |
| Preliminary Engineering - Design Only Projects                                                        |                                           |
| Use of State Highway Specifications for Pavement                                                      |                                           |
| Pavement Maintenance: 5-Year Project Life                                                             |                                           |
| Land Acquisition: RPZ Protections on Airport Property                                                 |                                           |

| Airport Name List                         | Sponsor List                                             |
|-------------------------------------------|----------------------------------------------------------|
| Berlin Regional Airport                   | City of Berlin, New Hampshire/Berlin Airport Authority   |
| Boite Field                               | Nashua Airport Authority/City of Nashua, New Hampshire   |
| Claremont Municipal Airport               | City of Claremont, New Hampshire                         |
| Concord Municipal Airport                 | City of Concord, New Hampshire                           |
| Dillant-Bojarski Airport                  | City of Seena, New Hampshire                             |
| Dean Memorial Airport                     | Town of Hawthill, New Hampshire                          |
| Laconia Municipal Airport                 | City of Laconia, New Hampshire/Laconia Airport Authority |
| Mt. Washington Regional Airport           | Town of Whitefield, New Hampshire                        |
| Portsmouth International Airport at Pease | Pease Development Authority                              |
| Slayhew Airport                           | Pease Development Authority                              |
| Various Locations in New Hampshire        | State of New Hampshire                                   |

|                                                                | Yes/No                               | Other Data                                                           |
|----------------------------------------------------------------|--------------------------------------|----------------------------------------------------------------------|
| VALE: Equipment Maintenance                                    |                                      |                                                                      |
| VALE: Recycling System                                         |                                      |                                                                      |
| Building: Priorated Allowable Costs                            | NO/Yes                               | Yes/No/NA                                                            |
| Land Acquisition: Noise Land Inventory Map and Reuse Plan      |                                      |                                                                      |
| Land Acquisition: Noise Land Annual Report                     |                                      |                                                                      |
| Preliminary Plans and Specifications Review                    |                                      |                                                                      |
| Certification: Plans and Specifications                        |                                      | Plan                                                                 |
| Grants Based on Estimates                                      |                                      |                                                                      |
| Consultant Contract and Cost Analysis                          |                                      |                                                                      |
| Design Only Grants                                             |                                      |                                                                      |
| Force Account - Prior Approval Required                        |                                      |                                                                      |
| Land Acquisition: Revenue and Program Income                   |                                      |                                                                      |
| Land Acquisition: Use of URA                                   |                                      |                                                                      |
| Noise Mitigation: Privately Owned Structures                   |                                      |                                                                      |
| Noise Mitigation: Privately Owned Property                     | Percent of Noise                     | Class of Noise                                                       |
| Non-AP Work in Project                                         |                                      |                                                                      |
| Granted Based on Preliminary Scope of Work                     |                                      |                                                                      |
| Fuel Farms: Use and Operational Requirements                   |                                      |                                                                      |
| Revenue-Producing Project                                      |                                      |                                                                      |
| Compliance with RTP Requirements, or No Grant Payments         | NO for privately owned airports only |                                                                      |
| Projects at Privately Owned Airport                            |                                      |                                                                      |
| Land Acquisition - Grant Agreement Must Get Recorded           |                                      |                                                                      |
| Noise Mitigation: Land Use Compatibility                       |                                      |                                                                      |
| Part 130 - ARFF Vehicle in Excess of Minimum Standards         | NO                                   |                                                                      |
| Sponsor's Procurement Action - Payment Restriction Legal Issue |                                      | Legal Issue                                                          |
| Claiming Real Property as Credit for Local Share               |                                      |                                                                      |
| Grant Reimbursements: No Payments Until...                     |                                      | APPROPRIATE FOR REIMBURSEMENT: REIMBURSEMENT: CONTRACTUAL: ETC. ETC. |
| Land Acquisition: List of Parcels to be Acquired               |                                      |                                                                      |
| Environmental Approval/Permitting: No Construction Until...    |                                      |                                                                      |
| Safety, Security, or Capacity Projects Not Deferred            |                                      |                                                                      |
| NHDOT's Updated Accepted RTTF Access Plan                      |                                      | Applies only to DAW and BML                                          |

# Grant Offer - SBGP



- Order of signatures
  - 1<sup>st</sup> Airport Sponsor
  - 2<sup>nd</sup> Sponsor's Attorney
  - 3<sup>rd</sup> Certificate of Vote
  - 4<sup>th</sup> Notary

Note: for property acquisition projects, a Notary signature is required for both the sponsor and the attorney.

Grant offers for property acquisition must be recorded at Registry of Deeds

**Part II - Acceptance for non-land easement projects**  
(delete box before printing) - ONLY USE IF NOT DOING LAND PROJECT

**Part II - Acceptance**  
The Sponsor does hereby ratify and adopt all assurances, statements, representations, warranties, covenants, and agreements contained in the Project Application and incorporated materials referred to in the foregoing Offer, and does hereby accept this Offer and by such acceptance agrees to comply with all of the terms and conditions in this Offer and in the Project Application.

I declare under penalty of perjury that the foregoing is true and correct.  
Executed on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
(Name of Sponsor)

\_\_\_\_\_  
(Signature of Sponsor's Authorized Official)

By: \_\_\_\_\_  
(Print Name of Sponsor's Authorized Official)

\_\_\_\_\_  
(Title of Sponsor's Authorized Official)

**CERTIFICATE OF SPONSOR'S ATTORNEY**  
I, \_\_\_\_\_, acting as Attorney for the Sponsor do hereby certify:  
That in my opinion \_\_\_\_\_ the Sponsor is empowered to enter into the foregoing Grant Agreement under the laws of the State of New Hampshire. Further, I have examined the foregoing Grant Agreement and the actions taken by said Sponsor and Sponsor's official representative has been duly authorized and that the execution of the foregoing Grant Agreement and the actions taken by said Sponsor and Sponsor's official representative in accordance with the laws of the said State of New Hampshire and the laws of the United States of America will result in the acquisition of the property interests involving projects to be carried out on property not owned by the Sponsor and Sponsor's official representative and will prevent full performance by the Sponsor. Further, it is my opinion that the foregoing Grant Agreement constitutes a legal and binding obligation of the Sponsor in accordance with the terms thereof.

Dated at \_\_\_\_\_ (location) this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

**ACKNOWLEDGMENT**  
STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_  
Do, \_\_\_\_\_ before me, a Notary Public, personally appeared \_\_\_\_\_ who, presented to me through satisfactory evidence to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the foregoing instrument in his individual capacity as \_\_\_\_\_ authorized agent by their signature on the instrument.

By: \_\_\_\_\_  
(Signature of Sponsor's Attorney)

\_\_\_\_\_  
(Title of Sponsor's Attorney)

**CERTIFICATE OF SPONSOR'S ATTORNEY**  
I, \_\_\_\_\_ acting as Attorney for the Sponsor do hereby certify:  
That in my opinion the Sponsor is empowered to enter into the foregoing Grant Agreement under the laws of the State of New Hampshire. Further, I have examined the foregoing Grant Agreement and the actions taken by said Sponsor and Sponsor's official representative has been duly authorized and that the execution thereof in all respects due and proper and in accordance with the laws of the said State and the Act. In addition, for grants involving projects to be carried out on property not owned by the Sponsor, there are no legal impediments that will prevent full performance by the Sponsor. Further, it is my opinion that the said Grant Agreement constitutes a legal and binding obligation of the Sponsor in accordance with the terms thereof.

Dated at \_\_\_\_\_ (location) this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

**ACKNOWLEDGMENT**  
STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_  
Do, \_\_\_\_\_ before me, a Notary Public, personally appeared \_\_\_\_\_ who, presented to me through satisfactory evidence to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the foregoing instrument in his individual capacity as \_\_\_\_\_ authorized agent by their signature on the instrument.

By: \_\_\_\_\_  
(Signature of Sponsor's Attorney)

\_\_\_\_\_  
(Title of Sponsor's Attorney)

**SAMPLE CERTIFICATE OF VOTE**

I, \_\_\_\_\_ do hereby certify that I am the \_\_\_\_\_ of \_\_\_\_\_ a municipality in the state of New Hampshire, county of \_\_\_\_\_ in the United States of America. I do further certify that \_\_\_\_\_ is \_\_\_\_\_ of the municipality and is duly authorized by the by-laws and laws of the State of New Hampshire to execute and deliver for on behalf of the municipality any contracts with the State of New Hampshire. This authority was given during an official meeting of the City Council of the city of \_\_\_\_\_ on the following date \_\_\_\_\_ date of vote \_\_\_\_\_

I further certify that such authority has not been repealed, rescinded, or amended.

IN WITNESS WHEREOF, I have hereunto set my hand and attached the seal of the city of \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Signature \_\_\_\_\_ SEAL  
Title of Signatory \_\_\_\_\_

**NOTARY STATEMENT**  
As Notary Public and/or Justice of the Peace, registered in the state of New Hampshire, county of \_\_\_\_\_ upon this date \_\_\_\_\_ appeared before me \_\_\_\_\_ the abovesigned officer personally appeared \_\_\_\_\_ who acknowledged himself to be the \_\_\_\_\_ of the town/city of \_\_\_\_\_ New Hampshire, and that being authorized to do so, he/she executed the foregoing instrument for the purposes therein contained, by signing by himself in the name of the city of \_\_\_\_\_ New Hampshire. In witness whereof, I hereunto set my hand and official seal.

Signature of Notary or Justice of the Peace \_\_\_\_\_ SEAL  
Name of Notary or Justice of the Peace \_\_\_\_\_  
Date of Expiration of Commission \_\_\_\_\_

# Grant Offer - SBGP

- Contents (certificate of vote, insurances – except for DAW)
- Make sure you understand the special grant conditions (if any)

Share  
executed  
agreement  
with  
consultant  
team.



## REPLACE THIS PAGE

WITH AIRPORT SPONSOR'S INSURANCE CERTIFICATE AND ENDORSEMENTS HERE, AS APPROPRIATE

Note: must include all of the following:

- Comprehensive general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than \$1,000,000 per occurrence and \$2,000,000 in the aggregate.
- The policies described in this section shall be the standard form employed in the State of New Hampshire, issued by underwriters acceptable to the State, and authorized to do business in the State of New Hampshire.
- Each policy shall contain a clause prohibiting cancellation or modifications of the policy within 10 days after written notice thereof has been received by the State.
- The designation of the State of New Hampshire Department of Transportation as an additional insured. If an endorsement is required for this to be valid, include a copy of the endorsement. If a contract provision is required for this to be valid, please include a copy of the contract.
- The print date of the insurance certificate must be recent (within the last 4 weeks).
- The expiration date of the policy must not have expired.

## REPLACE THIS PAGE

WITH AIRPORT CONSULTANT'S INSURANCE CERTIFICATE AND ENDORSEMENTS HERE, AS APPROPRIATE

Note: must include all of the following:

- Comprehensive general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than \$1,000,000 per occurrence and \$2,000,000 in the aggregate.
- The policies described in this section shall be the standard form employed in the State of New Hampshire, issued by underwriters acceptable to the State, and authorized to do business in the State of New Hampshire.
- Each policy shall contain a clause prohibiting cancellation or modifications of the policy within 10 days after written notice thereof has been received by the State.
- The designation of the State of New Hampshire Department of Transportation as an additional insured. If an endorsement is required for this to be valid, include a copy of the endorsement. If a contract provision is required for this to be valid, please include a copy of the contract.
- The print date of the insurance certificate must be recent (within the last 4 weeks).
- The expiration date of the policy must not have expired.

# Grant Offer – non-SBGP

- Order of signatures
  - 1<sup>st</sup> Airport Sponsor
  - 2<sup>nd</sup> Sponsor's Attorney

Note: for property acquisition projects, a Notary signature is required for both the sponsor and the attorney.

Share executed agreement with consultant team.

Grant offers for property acquisition must be recorded at Registry of Deeds

**1st**

**OR**

**2nd**

**1st**

**2nd**

# Grant Offer

- **Period of Availability:** Funds that are available to be obligated for grants. Entitlements are available as follows:
  - SBGP and non-hub airports: 4 fiscal years
  - Hub airports: 3 fiscal years
- **Period of Performance:** Time when project cost can be incurred.
  - SBGP: 4 years (1,460 days) from the date NHDOT signed the FAA grant offer.
  - Non-SBGP: 4 years (1,460 days) from the date the grant offer is signed.

2. **Period of Performance.** The period of performance begins on the date the Sponsor formally accepts this agreement. Unless explicitly stated otherwise in an amendment from the State, the end date of the project period of performance is 4 years (1,460 calendar days) from the date of formal Block Grant acceptance by the State for federal funds that make up a portion of this project's funding. For this project, the period of performance end date is **June 21, 2022**.

1. **Period of Performance.** The period of performance begins on the date the State formally accepts this agreement. Unless explicitly stated otherwise in an amendment from the FAA, the end date of the project period of performance is 4 years (1,460 calendar days) from the date of formal grant acceptance by the State.

# Grant Obligations

Items to be covered:

Grant assurances (overview only)



FAA  
Airports

## ASSURANCES

### Airport Sponsors

---

#### A. General.

1. These assurances shall be complied with in the performance of grant agreements for airport development, airport planning, and noise compatibility program grants for airport sponsors.
2. These assurances are required to be submitted as part of the project application by sponsors requesting funds under the provisions of Title 49, U.S.C., subtitle VII, as amended. As used herein, the term "public agency sponsor" means a public agency with control of a public-use airport; the term "private sponsor" means a private owner of a public-use airport; and the term "sponsor" includes both public agency sponsors and private sponsors.
3. Upon acceptance of this grant offer by the sponsor, these assurances are incorporated in and become part of this grant agreement.

#### B. Duration and Applicability.

1. **Airport development or Noise Compatibility Program Projects Undertaken by a Public Agency Sponsor.**

The terms, conditions and assurances of this grant agreement shall remain in full force and effect throughout the useful life of the facilities developed or equipment acquired for an airport development or noise compatibility program project, or throughout the useful life of the project items installed within a facility under a noise compatibility program project, but in any event not to exceed twenty (20) years from the date of acceptance of a grant offer of Federal funds for the project. However, there shall be no limit on the duration of the assurances regarding Exclusive Rights and Airport Revenue so long as the airport is used as an airport. There shall be no limit on the duration of the terms, conditions, and assurances with respect to real property acquired with federal funds. Furthermore, the duration of the Civil Rights assurance shall be specified in the assurances.

2. **Airport Development or Noise Compatibility Projects Undertaken by a Private Sponsor.**

The preceding paragraph 1 also applies to a private sponsor except that the useful life of project items installed within a facility or the useful life of the facilities developed or equipment acquired under an airport development or noise compatibility program project shall be no less than ten (10) years from the date of acceptance of Federal aid for the project.

# Grant Obligations

- Grant Assurances – 3 sections
  - A. General – Grant assurances become part of the grant agreement.
  - B. Duration and Applicability – generally 20 years. Some exceptions apply.
  - C. Sponsor Certification – laws, rules, and regulations that the sponsors has to follow.

## Resources:

- [https://www.faa.gov/airports/aip/grant\\_assurances/media/airport-sponsor-assurances-aip.pdf](https://www.faa.gov/airports/aip/grant_assurances/media/airport-sponsor-assurances-aip.pdf)
- [https://www.faa.gov/airports/resources/publications/orders/compliance\\_5190\\_6/](https://www.faa.gov/airports/resources/publications/orders/compliance_5190_6/)

Grant assurances must match FAA authorization law. They are updated periodically.



U.S. DEPARTMENT OF TRANSPORTATION  
FEDERAL AVIATION ADMINISTRATION

National Policy

ORDER  
5190.6B

Effective Date:  
September 30, 2009

**SUBJ:** FAA Airport Compliance Manual

The Airport Compliance Program ensures airport sponsors' compliance with their federal obligations in the form of grant assurances, surplus and nonsurplus obligations, or other applicable federal law. The Airport Compliance Program is administered by the FAA headquarters Airport Compliance Division (ACO-100) based in Washington, DC.

This handbook provides guidance to FAA personnel on interpreting and administering the various continuing commitments airport sponsors make to the U.S. Government when they accept grants of federal funds or federal property for airport purposes. The handbook (i) analyzes the various federal obligations set forth in legislatively mandated airport sponsor assurances, (ii) addresses the nature of the assurances and the application of the assurances in the operation of public use airports, and (iii) facilitates interpretation of the assurances by FAA personnel. This manual was designed to provide guidance to FAA personnel pertaining to the Federal Aviation Administration (FAA) Airport Compliance Program.

*Randall S. Fiertz*

Randall S. Fiertz  
Director  
Airport Compliance and Field Operations Division (ACO-1)

Distribution: A-W(RP)-1

Initiated By: ACO-1

# Grant Obligations

- 39 total sponsor certifications.
- Common compliance issues come from:
  - 5. Preserving Rights and Powers
  - 19. Operations and Maintenance
  - 22. Economic Nondiscrimination (of *aeronautical* activities)
  - 23. Exclusive Rights
  - 24. Fee and Rental Structure
  - 25. Airport Revenues
- Make sure you have the correct AC Checklist date!
  - 34. Policies, Standards, and Specifications
  - A copy of the current AC Checklist will be attached to grant offer.

Grant  
assurances will  
be it's own  
workshop in the  
near future.

# Governor and Council

Items to be covered:

What is this process?

Why is this process needed?

## Official website of the New Hampshire Executive Council

This site provides information on the history, duties and responsibilities of the Executive Council, the five council districts, and the individuals who are elected to represent those districts. You will also find Governor and Council meeting schedules, agendas and minutes. We hope your visit here is informative and you find the content useful.

District 1



Councilor  
Michael J. Crivans

District 2



Councilor  
Andru Volinsky

District 3



Councilor  
Russell E. Prescott

District 4



Councilor  
Theodore L. Gatsas

District 5



Councilor  
Debora B. Pignatelli

# Governor and Council

- Approves:
  - Grant offers (over \$10,000 value)
  - Grant amendments
- No money can flow to a sponsor until G&C approval – State and Federal Money
  - Channeling Act R.S.A. 422:15
- NHDOT's actions following G&C approval:
  - Notify the airport and consultant of project approval and lapsing date of funds.
  - Now grant reimbursements can be processed for payment to the sponsor.

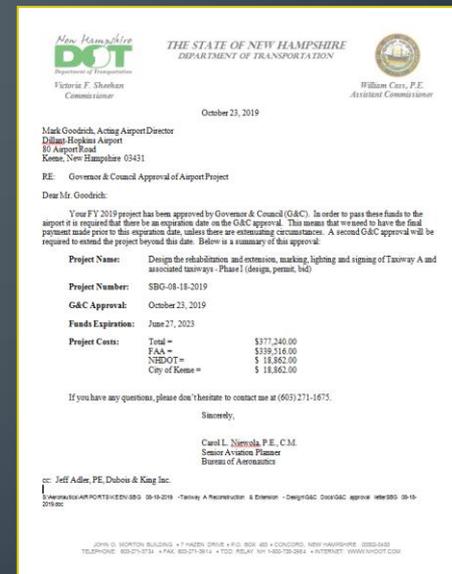
## Upcoming G&C Meetings

### NOVEMBER

Wednesday, 11/6/19 (10:00 a.m.) State House  
\*\*Monday, 11/25/19 (10:00 a.m.) State House

### DECEMBER

Wednesday, 12/18/19 (10:00 a.m.) State House



# Governor and Council

- Any project cost encumbered before G&C approval is at sponsor's own risk.
  - FAA allows for some project cost/efforts to take place in advance of a grant offer within the sponsor's entitlement funding amount if it is necessary, reasonable, and not in another grant.
  - 49 U.S.C. § 47110(c)(1) allows for cost such as field survey, plans and spec development, property interest, administration, or other incidental items that would not have been incurred except for the project.
- Retroactive G&C Approval
  - Any project where work has already commenced or been completed.
    - Except equipment acquisition, property acquisition, design-construct projects through construction bidding or real estate closing.
    - Scoping meetings and Independent Fee Estimates (IFE) are not considered retroactive efforts.

# Coffee Break!





Incorrect, incomplete, erroneous grant reimbursement requests may be returned for corrections.

# Grant Reimbursements

- Items to be covered:
- Components of grant reimbursement requests
- How are grant reimbursement requests processed
- Common mistakes made



# Grant Reimbursements – Partial Payment

- After all, this is a *reimbursement* program...
  - Special exemptions apply.
- Grant Reimbursement contents: See NHDOT and FAA webpages

|                              | SBGP | Non-SBGP  |
|------------------------------|------|-----------|
| Copies of Invoice            | Yes  | Requested |
| Invoice Summary              | Yes  | Yes       |
| FAA Form 270/271             | Yes  | Requested |
| NHDOT Form 5555              | Yes  | Yes       |
| Delphi Drawdown Confirmation | No   | Yes       |

- Make sure all forms are legible!!!
- Make sure reimbursement package is complete!



# Grant Reimbursements

Do NOT  
include the  
instruction  
pages!

- FAA Form 270
  - Reimbursement form used for planning and environmental projects.
  - 1 signature
    - Certifying Official - Airport sponsor

|                                             |                                  |                                   |
|---------------------------------------------|----------------------------------|-----------------------------------|
| SIGNATURE OR AUTHORIZED CERTIFYING OFFICIAL |                                  | DATE REQUEST SUBMITTED            |
| <input type="text"/>                        |                                  | <input type="text"/>              |
| TYPED OR PRINTED NAME AND TITLE             |                                  |                                   |
| Prefix: <input type="text"/>                | First Name: <input type="text"/> | Middle Name: <input type="text"/> |
| Last Name: <input type="text"/>             | Suffix: <input type="text"/>     |                                   |
| Title: <input type="text"/>                 |                                  |                                   |
| TELEPHONE (AREA CODE, NUMBER, EXTENSION)    |                                  |                                   |
| <input type="text"/>                        |                                  |                                   |

- FAA Form 271
  - Reimbursement form used for development projects including design only.
  - 2 signatures
    - Certifying Official – Airport sponsor
    - Certifying Official for percentage of physical completion of project – Airport sponsor or their consultant

# Federal Reimbursement Forms

## SF270 (For Planning)

## SF271 (For Development)

OMB Number: 4040-0912  
Expiration Date: 02/28/2022

### REQUEST FOR ADVANCE OR REIMBURSEMENT

**1. TYPE OF PAYMENT REQUESTED**  
 ADVANCE  
 REIMBURSEMENT  
 FINAL  
 PARTIAL

**2. BASIS OF REQUEST**  
 CASH  
 ACCRUAL

**3. FEDERAL SPONSORING AGENCY AND ORGANIZATIONAL ELEMENT TO WHICH THIS REPORT IS SUBMITTED**

**4. FEDERAL GRANT OR OTHER IDENTIFYING NUMBER ASSIGNED BY FEDERAL AGENCY**

**5. PARTIAL PAYMENT REQUEST NUMBER FOR THIS REQUEST**

**6. PERIOD COVERED BY THIS REPORT**  
 From: \_\_\_\_\_ To: \_\_\_\_\_

**7. RECIPIENT ORGANIZATION**  
 Name: \_\_\_\_\_  
 Street: \_\_\_\_\_  
 City: \_\_\_\_\_  
 County: \_\_\_\_\_  
 State: \_\_\_\_\_  
 Province: \_\_\_\_\_  
 Country: \_\_\_\_\_  
 ZIP / Postal Code: \_\_\_\_\_

**8. PAYEE (Where check is to be made)**  
 Name: \_\_\_\_\_  
 Street: \_\_\_\_\_  
 City: \_\_\_\_\_  
 County: \_\_\_\_\_  
 State: \_\_\_\_\_  
 Province: \_\_\_\_\_  
 Country: \_\_\_\_\_  
 ZIP / Postal Code: \_\_\_\_\_

**9. COMPUTATION OF AMOUNT OF REIMBURSEMENTS/ADVANCES REQUESTED**

| PROGRAMS/FUNCTIONS/ACTIVITIES                                                                                 | (a) | (b) | (c) | (d) | (e) | TOTAL |
|---------------------------------------------------------------------------------------------------------------|-----|-----|-----|-----|-----|-------|
| a. Total program outlays to date (line a minus line d)                                                        | \$  |     | \$  |     | \$  |       |
| b. Less: Cumulative program income                                                                            |     |     |     |     |     |       |
| c. Net program outlays (line a minus line b)                                                                  |     |     |     |     |     |       |
| d. Estimated net cash outlays for advance period                                                              |     |     |     |     |     |       |
| e. Total (Sum of lines c & d)                                                                                 |     |     |     |     |     |       |
| f. Non-Federal share of amount on line e                                                                      |     |     |     |     |     |       |
| g. Federal share of amount on line e                                                                          |     |     |     |     |     |       |
| h. Federal payments previously received                                                                       |     |     |     |     |     |       |
| i. Federal share now requested (line g minus line h)                                                          |     |     |     |     |     |       |
| j. Advances included in report when requested by Federal grantee (see instructions for making grantee report) |     |     |     |     |     |       |
| 1st month                                                                                                     |     |     |     |     |     |       |
| 2nd month                                                                                                     |     |     |     |     |     |       |
| 3rd month                                                                                                     |     |     |     |     |     |       |

**10. ALTERNATE COMPUTATION FOR ADVANCES ONLY**

a. Estimated Federal cash outlays that will be made during period covered by the advance \$ \_\_\_\_\_

b. Less: Estimated balance of Federal cash on hand as of beginning of advance period \$ \_\_\_\_\_

c. Amount requested (line a minus line b) \$ \_\_\_\_\_

**11. CERTIFICATION**

I certify that to the best of my knowledge and belief the data on the reverse are correct and that all outlays were made in accordance with the grant conditions or other agreement and that payment is due and has not been previously requested.

SIGNATURE OR AUTHORIZED CERTIFYING OFFICIAL: \_\_\_\_\_ DATE REQUEST SUBMITTED: \_\_\_\_\_

Typed or Printed Name and Title:  
 Prefix: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_  
 Last Name: \_\_\_\_\_ Suffix: \_\_\_\_\_  
 Title: \_\_\_\_\_

TELEPHONE (AREA CODE, NUMBER, EXTENSION): \_\_\_\_\_

This space for agency use

Public reporting burden for this collection of information is estimated to average 90 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0344-0046), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

OMB Number: 4040-0911  
Expiration Date: 02/28/2022

### OUTLAY REPORT AND REQUEST FOR REIMBURSEMENT FOR CONSTRUCTION PROGRAMS

**1. TYPE OF REQUEST**  
 FINAL  
 PARTIAL

**2. BASIS OF REQUEST**  
 CASH  
 ACCRUAL

**3. FEDERAL SPONSORING AGENCY AND ORGANIZATIONAL ELEMENT TO WHICH THIS REPORT IS SUBMITTED**

**4. FEDERAL GRANT OR OTHER IDENTIFYING NUMBER ASSIGNED BY FEDERAL AGENCY**

**5. PARTIAL PAYMENT REQUEST NUMBER FOR THIS REQUEST**

**6. PERIOD COVERED BY THIS REPORT**  
 From: \_\_\_\_\_ To: \_\_\_\_\_

**7. RECIPIENT ORGANIZATION**  
 Name: \_\_\_\_\_  
 Street: \_\_\_\_\_  
 City: \_\_\_\_\_  
 County: \_\_\_\_\_  
 State: \_\_\_\_\_  
 Province: \_\_\_\_\_  
 Country: \_\_\_\_\_  
 ZIP / Postal Code: \_\_\_\_\_

**8. PAYEE (Where check is to be made)**  
 Name: \_\_\_\_\_  
 Street: \_\_\_\_\_  
 City: \_\_\_\_\_  
 County: \_\_\_\_\_  
 State: \_\_\_\_\_  
 Province: \_\_\_\_\_  
 Country: \_\_\_\_\_  
 ZIP / Postal Code: \_\_\_\_\_

**9. STATUS OF FUNDS**

| CLASSIFICATION                                       | PROGRAMS |     |     | FUNCTIONS |     |     | ACTIVITIES |     |     | TOTAL |
|------------------------------------------------------|----------|-----|-----|-----------|-----|-----|------------|-----|-----|-------|
|                                                      | (a)      | (b) | (c) | (d)       | (e) | (f) | (g)        | (h) | (i) |       |
| a. Administrative expenses                           | \$       |     | \$  |           | \$  |     | \$         |     | \$  |       |
| b. Preliminary expenses                              |          |     |     |           |     |     |            |     |     |       |
| c. Land, structures, right-of-way                    |          |     |     |           |     |     |            |     |     |       |
| d. Architectural engineering design fees             |          |     |     |           |     |     |            |     |     |       |
| e. Other architectural engineering fees              |          |     |     |           |     |     |            |     |     |       |
| f. Project inspection fees                           |          |     |     |           |     |     |            |     |     |       |
| g. Land development                                  |          |     |     |           |     |     |            |     |     |       |
| h. Relocation expenses                               |          |     |     |           |     |     |            |     |     |       |
| i. Relocation payments to individuals and businesses |          |     |     |           |     |     |            |     |     |       |
| j. Demolition and removal                            |          |     |     |           |     |     |            |     |     |       |
| k. Construction and project improvement cost         |          |     |     |           |     |     |            |     |     |       |
| l. Equipment                                         |          |     |     |           |     |     |            |     |     |       |
| m. Miscellaneous cost                                |          |     |     |           |     |     |            |     |     |       |
| n. Total cumulative to date (sum of lines a thru m)  |          |     |     |           |     |     |            |     |     |       |
| o. Deductions for program income                     |          |     |     |           |     |     |            |     |     |       |
| p. Net cumulative to date (line n minus line o)      |          |     |     |           |     |     |            |     |     |       |
| q. Federal share to date                             |          |     |     |           |     |     |            |     |     |       |
| r. Rehabilitation grants (100% reimbursement)        |          |     |     |           |     |     |            |     |     |       |
| s. Total Federal share (sum of lines q and r)        |          |     |     |           |     |     |            |     |     |       |
| t. Federal payments previously received              |          |     |     |           |     |     |            |     |     |       |
| u. Amount requested for reimbursement                | \$       |     | \$  |           | \$  |     | \$         |     | \$  |       |
| v. Percentage of physical completion of project      | %        |     | %   |           | %   |     | %          |     | %   |       |

**10. CERTIFICATION**

I certify that the data on the reverse are correct and that all outlays were made in accordance with the grant conditions or other agreement and that payment is due and has not been previously requested.

SIGNATURE OR AUTHORIZED CERTIFYING OFFICIAL: \_\_\_\_\_ DATE REPORT SUBMITTED: \_\_\_\_\_

Typed or Printed Name and Title:  
 Prefix: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_  
 Last Name: \_\_\_\_\_ Suffix: \_\_\_\_\_  
 Title: \_\_\_\_\_

TELEPHONE (AREA CODE, NUMBER, EXTENSION): \_\_\_\_\_

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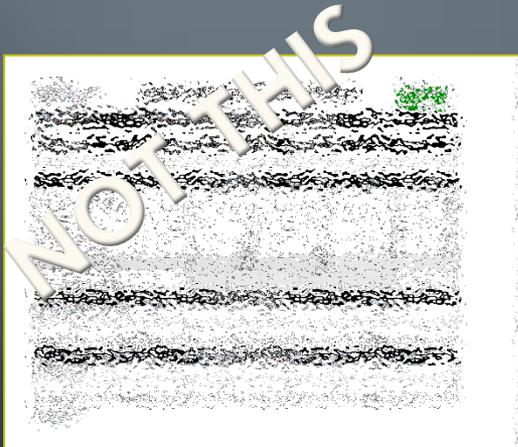
PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

# Grant Reimbursements

Do NOT include the instruction pages!

## NHDOT Form 5555

- Sponsor signs box 13.
- NHDOT signs box 14.
- Make sure form is legible.
- Make sure the math is correct.



New Hampshire  
Department of Transportation  
Bureau of Aeronautics

### Application for AIP/SBG Grant Payment

New Hampshire  
**DOT**  
Department of Transportation

Must be used for all AIP and SBG grant reimbursement payments for which there is a NHDOT share.

|                            |                                                |                             |
|----------------------------|------------------------------------------------|-----------------------------|
| <b>1. Airport Name:</b>    | <b>2. Period Covered by this Application:</b>  | <b>3. Sponsor Name:</b>     |
|                            |                                                |                             |
| <b>4. Airport Address:</b> | <b>5. Progress Payment Application Number:</b> | <b>6. Project Grant No.</b> |
|                            |                                                |                             |

|                                       | Status of Funds |          |          |          |
|---------------------------------------|-----------------|----------|----------|----------|
|                                       | a. FAA          | b. NHDOT | c. Local | d. Total |
| 7. Amount of Original Grant Offer     |                 |          |          | \$0.00   |
| 8. Total Spent to Date                |                 |          |          | \$0.00   |
| 9. Total Previously Reimbursed        |                 |          |          | \$0.00   |
| 10. Amount Spent This Period          | \$0.00          | \$0.00   | \$0.00   | \$0.00   |
| 11. Amount of Payment Request         | \$0.00          | \$0.00   |          |          |
| 12. Percent Project Completed to Date |                 |          |          | #DIV/0!  |

**13. Certification of Sponsor**

I certify that the statements contained in this grant payment are true and correct and that the work referred to in this application has been performed in accordance with the approved scope of work, plans, and specifications for this project.

|      |              |       |           |
|------|--------------|-------|-----------|
|      |              |       |           |
| Date | Printed Name | Title | Signature |

**14. Certification of NHDOT Representative**

I certify that the foregoing statements contained in the Sponsor's Application for grant payment are true and correct to the best of my knowledge and belief. The application has been reviewed and payment is approved.

|      |              |       |           |
|------|--------------|-------|-----------|
|      |              |       |           |
| Date | Printed Name | Title | Signature |

NHDOT Aero Form 5555  
Revised July 2013

# How Reimbursements are Processed

## – SBGP



### All Partial Grant Reimbursement Requests – NHDOT will...

- Review the invoices and invoice summary to reconcile total AIP-eligible reimbursement EARNED to date.
- Confirm FAA share based on invoices.
- Review SF 270/271 and check for rounding issues.
- Review NHDOT Form 5555
  - Match invoice totals.
  - Validate amounts previously reimbursed.
  - Check for rounding issues.
  - Confirm airport sponsor's signature.
  - Calculate all shares to confirm accuracy of NHDOT Form 5555.
  - Check if reimbursement request is greater than 90% of project costs.
- Send airport sponsor FAA and NHDOT reimbursement shares.
- Request Delphi drawdown for FAA share of request.

### Final Grant Reimbursement Request – NHDOT will...

- All of the above.
- Review project closeout documentation.

# How Reimbursements are Processed

## – Non-SBGP

### All Partial Grant Reimbursements – NHDOT will...

- Review Invoice Summary to reconcile total AIP-eligible reimbursement EARNED to date.
- Review NHDOT Form 5555 to validate amounts requested.
- Confirm the Delphi drawdown confirmation e-mail matches rest of paperwork.
- Wait for FAA funds to be deposited into NH Treasury.
- Forward the FAA share with the NHDOT share to the airport sponsor.

### Final Grant Reimbursements – NHDOT will...

- Review Invoice Summary to reconcile total reimbursement EARNED to date.
- Review NHDOT Form 5555 to validate amounts requested.
- Review project closeout documentation to validate final reimbursement request.
- Wait for FAA to approve final grant reimbursement request and authorize final Delphi drawdown (FAA sends letter or e-mail).
- Wait for airport sponsor to complete Delphi drawdown and FAA funds to be deposited into the NH Treasury
- Forward the FAA share with the NHDOT share to the airport sponsor.

# Common Reimbursement Errors:

- Incorrect Totals: Invoice Summary vs. NHDOT Form 5555/FAA Form 270/271.

|                      | Invoice Number | Invoice Date | Due Date | Invoice Amount | AIP Eligible Costs | Non-Participating Costs | AIP Share     |
|----------------------|----------------|--------------|----------|----------------|--------------------|-------------------------|---------------|
| Engineering Services | 1              | 6/3/19       | 7/3/19   | \$ 1,157.64    | \$ 1,157.64        | \$ -                    | \$ 1,041.87   |
| Engineering Services | 2              | 6/15/19      | 7/15/19  | \$ 3,953.28    | \$ 3,953.28        | \$ -                    | \$ 3,557.95   |
|                      |                |              |          | \$ -           | \$ -               | \$ -                    | \$ -          |
|                      |                |              |          | \$ -           | \$ -               | \$ -                    | \$ -          |
|                      |                |              |          | \$ -           | \$ -               | \$ -                    | \$ -          |
| Construction Cost    | W1             | 7/1/19       | 8/1/19   | \$ 178,533.02  | \$ 178,533.02      | \$ -                    | \$ 160,679.72 |
|                      |                |              |          | \$ -           | \$ -               | \$ -                    | \$ -          |
|                      |                |              |          | \$ -           | \$ -               | \$ -                    | \$ -          |
|                      |                |              |          | \$ -           | \$ -               | \$ -                    | \$ -          |
|                      |                |              |          | \$ -           | \$ -               | \$ -                    | \$ -          |

AIP Eligible Invoice Total:  
**\$183,643.94**

|                              | a. FAA       | b. NHDOT   | c. Local   | d. Total     |
|------------------------------|--------------|------------|------------|--------------|
| 10. Amount Spent This Period | \$165,279.54 | \$9,182.19 | \$9,182.20 | \$183,643.93 |

# Common Reimbursement Errors:

- Incorrect shares on NHDOT Form 5555:

|                              | a. FAA       | b. NHDOT   | c. Local   | d. Total     |
|------------------------------|--------------|------------|------------|--------------|
| 10. Amount Spent This Period | \$165,279.54 | \$9,182.20 | \$9,182.20 | \$183,643.93 |

$$\$165,279.54 + \$9,182.20 + \$9,182.20 = \$183,643.94$$

- Rounding errors caused by Excel.
  - $\$183,643.93 \times 0.05 = \$9,182.1965$  which Excel rounds to  $\$9,182.20$
  - Since FAA share is confirmed, NHDOT share or Local share is adjusted to equal the Amount Spent this Period (needs to match invoices).

# Common Reimbursement Errors:

- Incorrect shares (continued):
  - Corrected shares may result in differing NHDOT or Local shares over several reimbursement request.
  - NHDOT tracks this error and works to cancel out (self-correct) this differing share as soon as possible, ideally the next reimbursement request. Offset shares can occur multiple times in a single grant. This is OK.

|                 | GR #1       | GR #2       | GR #3       | GR #4       | GR #5      | GR #6       | GR #7       |
|-----------------|-------------|-------------|-------------|-------------|------------|-------------|-------------|
| Requested Total | \$19,308.30 | \$32,399.26 | \$36,461.54 | \$32,380.11 | \$8,299.92 | \$15,926.51 | \$23,867.80 |
| Requested FAA   | \$17,377.47 | \$29,159.33 | \$32,815.39 | \$29,142.10 | \$7,469.93 | \$14,333.86 | \$21,481.02 |
| Requested NHDOT | \$965.42    | \$1,619.96  | \$1,823.08  | \$1,619.00  | \$415.00   | \$796.32    | \$1,193.39  |
| Requested Local | \$965.41    | \$1,619.97  | \$1,823.07  | \$1,619.01  | \$414.99   | \$796.33    | \$1,193.39  |

# Common Reimbursement Errors

- Showing incorrect *Previously Reimbursed Amounts* on forms:
  - Usually caused by previous reimbursement request containing incorrect shares.

| GR#1 |                              | a. FAA     | b. NHDOT | c. Local | d. Total   |
|------|------------------------------|------------|----------|----------|------------|
|      | 10. Amount Spent this Period | \$1,000.00 | \$55.56  | \$55.55  | \$1,111.11 |

| GR#2 |                              | a. FAA     | b. NHDOT | c. Local | d. Total   |
|------|------------------------------|------------|----------|----------|------------|
|      | 9. Total Previous Reimbursed | \$1,000.00 | \$55.56  | \$55.56  | \$1,111.12 |

**WRONG**

If your consultant is preparing the reimbursement request, the sponsor should share how much reimbursement they actually received.

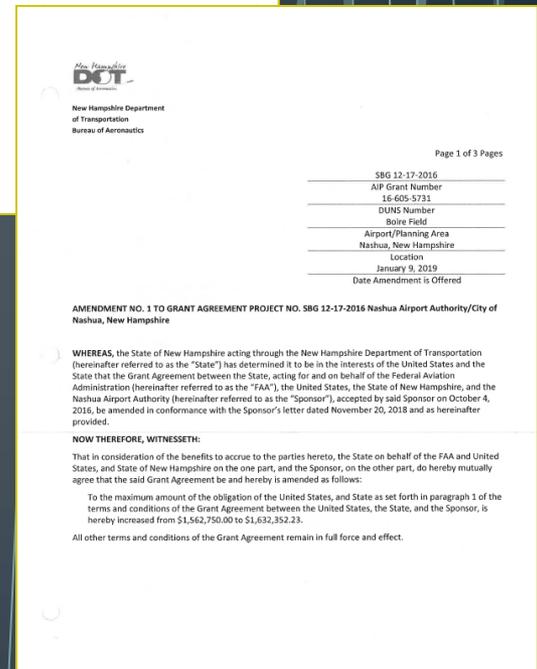
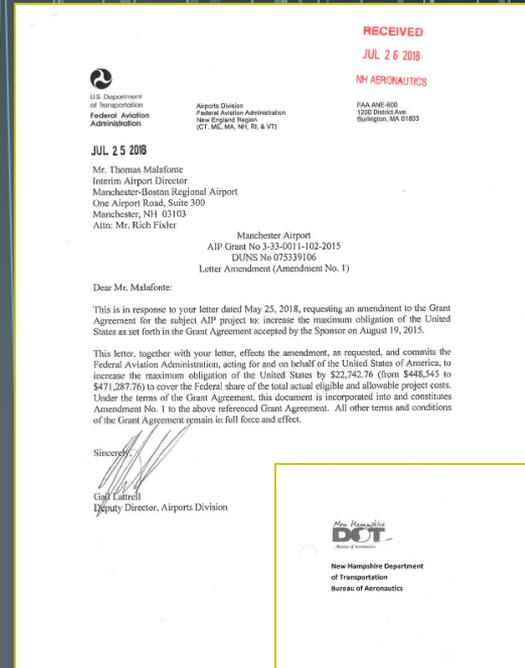
# Grant Amendments

Items to be covered:

Contents of amendment request

Limitations on amendments

Requesting final payment when there is an amendment



# Grant Amendments

- Coordinate with FAA and NHDOT well in advance of amendment request
- Requested at end of project, usually
- Airport sponsor letter and supporting documentation required requesting amendment
- Justification is required
- Work must be AIP-eligible
- What is the purpose of the amendment: Funding, time, or deliverables
- FAA and NHDOT funding not guaranteed until it's approved by G&C
- Qualifying projects for amendments (land, design-only, construct only, noise, design-construct, equipment)
  - Planning projects don't qualify for grant amendments
- Amendment limits: 15% max for development projects only
- **Must go through G&C process** for both SBGP and non-SBGP projects

Grant amendments are subject to funding availability and limitations of the original grant.

# Grant Amendments

Because of the required G&C process for grant amendments, consider the following:

- Submit a grant reimbursement package to receive 100% of the original grant amount PLUS a final grant reimbursement for the 10X% of the project costs to cover the amendment amount.
  - NHDOT can flow the funding for 100% quickly.

OR

- Submit a final grant reimbursement package to receive 10X% of the project costs and wait for G&C approval for NHDOT and FAA funds.
  - All requested funds will need to wait until G&C approval of amendment.

# Grant Amendment

Sample grant reimbursements options when an amendment is needed.

## GR#8

|            |    |            |
|------------|----|------------|
| FAA        | \$ | 999.99     |
| NHDOT      | \$ | 55.56      |
| Local      | \$ | 55.56      |
| Total      |    | \$1,111.11 |
| % Complete |    | 100%       |

## GR#8 FINAL

|            |    |             |
|------------|----|-------------|
| FAA        | \$ | 9,000.00    |
| NHDOT      | \$ | 500.00      |
| Local      | \$ | 500.00      |
| Total      |    | \$10,000.00 |
| % Complete |    | 106.4%      |

## GR#9 FINAL

|            |    |            |
|------------|----|------------|
| FAA        |    | \$8,000.00 |
| NHDOT      | \$ | 444.44     |
| Local      | \$ | 444.45     |
| Total      |    | \$8,888.89 |
| % Complete |    | 106.4%     |

Note: In the two-step process, the local share is \$0.01 more than in the one-step method in this example due to truncating FAA shares.

# Project Closeout

Items to be covered:

Content for SBGP

Content for non-SBGP

## PROJECT CLOSURE SUMMARY

### I. GENERAL INFORMATION

|                            |                      |
|----------------------------|----------------------|
| Airport Name:              | Location:            |
| AIP Project No.:           | Contract No.: FA-NE- |
| Project description: _____ |                      |

### II. FISCAL SUMMARY (ELIGIBLE costs only)

|                         | Amount Claimed | Amount Approved |
|-------------------------|----------------|-----------------|
| Sponsor Administration: | _____          | _____           |
| Sponsor Force Account   | _____          | _____           |
| Eng./Cnstr.:            | _____          | _____           |
| Consultant Engineering: | _____          | _____           |
| Construction:           | _____          | _____           |
| Change Order(s):        | _____          | _____           |
| Equipment:              | _____          | _____           |
| Total:                  | _____          | _____           |
| Federal Share:          | _____          | _____           |

### III. MISCELLANEOUS

Grant Amendment Request: Letter attached  Request Amount \$ \_\_\_\_\_

Special Conditions, if applicable, met? \_\_\_\_\_ Yes \_\_\_\_\_ No (if no, explain)

ALP revisions showing project As-Built conditions: \_\_\_\_\_ (date)

Airport Master Record (FAA Form 5010-1) update submitted to FAA: \_\_\_\_\_ (date)

### IV. ENGINEERING

Consultant/Engineer: \_\_\_\_\_

Contract: \_\_\_\_\_ Eligible: \_\_\_\_\_ FAA Approval Date: \_\_\_\_\_

Engineering Amendment(s) Amount: \_\_\_\_\_ (eligible only)

Date As-Built drawings Submitted: \_\_\_\_\_

Date Electronic As-Built Submitted: \_\_\_\_\_

Date Certifications of Final Acceptance (attachment 5) signed and submitted: \_\_\_\_\_

\*\*\*\*\*EQUIPMENT ONLY\*\*\*\*\*

Date Equipment (ARFF/SRE) has been received and inspected by Sponsor: \_\_\_\_\_

Equipment meets specification(s) \_\_\_\_\_ Yes \_\_\_\_\_ No (if no, explain)

.....  
 FAA USE ONLY  
 .....  
 Reported Accepted: \_\_\_\_\_ as submitted OR \_\_\_\_\_ as annotated  
 Project Manager: \_\_\_\_\_ Date: \_\_\_\_\_

# Project Closeout - SBGP

DON'T  
PIECEMEAL  
THIS  
SUBMISSION

- Planning Study Closeout
  - Sponsor closeout cover letter
  - Final grant reimbursement request (1 copy)
  - Electronic and Hardcopy of final deliverables (2 copies)
  - NH DBE Closeout report form
- Development Project Closeout
  - Sponsor closeout cover letter
  - Final grant reimbursement request (1 copy)
  - NH DBE Closeout report form
  - FAA project closeout report with any indicated Record Drawings/As-Builts (2 copies)
  - Sponsor Certification for Construction Project Final Acceptance
  - FAA Form 5010 if project modified, added, or removed any of the existing data.

## Project Closeout (Planning Studies and Environmental Reports)

- › Sponsor's closeout coverletter stating that the sponsor certifies that all project costs being claimed are eligible under AIP requirements, the project is complete and the Sponsor has accepted or approved all deliverables.
- › One (1) copy of final grant reimbursement request package.
- › Two (2) hardcopies and two (2) PDFs of the final deliverables to NHDOT/Bureau of Aeronautics (including airport master plan, environmental assessment, airport layout plan, wildlife hazard assessment, etc.). NHDOT will forward one copy of each to FAA for their files.
- › [NH Airport Block Grant Program DBE Closeout Report Form](#)

## Project Closeout (Design Only, Design/Construction, Construct Only, Property Acquisition, Equipment Acquisition)

- › Sponsor's closeout coverletter stating that the sponsor certifies that all project costs being claimed are eligible under AIP requirements, the project is complete and the Sponsor has accepted or approved all deliverables.
- › One (1) copy of the final grant reimbursement request package (up to 100% of original grant only)
- › Sponsor's amendment request letter and grant reimbursement request package (if project exceeded 100%)
- › [NH Airport Block Grant Program DBE Closeout Report Form](#)
- › FAA's Project Closeout Report with any indicated attachments such as Record Drawings/As-Builts (one (1) full-size paper copy plus two (2) PDFs), project photos, testing results summary, change order summary, "as-built" ALP, final construction report, final equipment report, Exhibit A (two (2) full-size paper copies plus two (2) PDFs), etc.
  - › [FAA Project Closeout Report](#)
  - › [FAA Project Closeout Instructions](#)
- › FAA Form 5010 updates if the project improvements modified the existing data in this form.
- › One (1) originally signed [Construction Project Final Acceptance](#) sponsor certification.

FAA has standardized the file-naming convention it uses on the electronic versions of project record drawings/as-built drawings. Beginning with your next record drawing/as-built submission to FAA and/or NHDOT, please use the following file name: XXX AIP YYY-ZZZZ AS-BUILT.AAA OR XXX SBG YYY-ZZZZ AS-BUILT.AAA where XXX is the airport's 3-letter location ID, YYY is the sequential project number, ZZZZ is the year the grant offer was made, and AAA is the DWG or PDF file extension. AIP is for AIP project numbers and SBG is for Block Grant project numbers. FAA and NHDOT still prefer to receive both the DWG and PDF file formats. It's been noted that many AutoCAD drawings utilize Xref files with their own unique names; so long as the primary AutoCAD file (\*.DWG) follows this naming convention, the Xref files don't have to follow the naming convention.

# Project Closeout – non-SBGP

One copy  
to FAA;  
One copy  
to NHDOT

- Planning Study Closeout
  - Sponsor closeout cover letter
  - Final grant reimbursement request
  - Electronic and Hardcopy of final deliverables
- Development Projects
  - Sponsor closeout cover letter
  - Final grant reimbursement request
  - FAA project closeout report with any indicated Record Drawings/As-Builts
  - Sponsor Certification for Construction Project Final Acceptance

FAA  
New England Region Airports Division

**AIP Closeout Package Submission Requirements for Development – Construction Projects**

**Reminders pertaining to all closeout package submissions:**

- The completion of a project does not end with the physical completion of the work. The formal closeout of a grant is the process by which the Sponsor performs all necessary administrative and financial actions to satisfactory complete all requirements set forth in the grant agreement.
- Airport Sponsors must use current forms as part of their closeout package submission.
  - We cannot accept outdated/old forms (e.g. sponsor certifications; SF-270; SF-271; etc.).
- Grant assurance #13 requires Airport Sponsors that expend \$500,000 or more of Federal funds in a year to conduct a single or program-specific audit for that year in accordance with the Single Audit Act of 1984 (as amended) and OMB 2 CFR 200, "Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards." Once completed, the Airport Sponsor must submit the audit report online to the Federal Audit Clearinghouse at <http://hauwester.cemiss.gov/fac/>. Audit reports may no longer be mailed to the clearinghouse.
- Airport Sponsors may not submit their final payment reimbursement request via the DELPHI/eInvoicing system until after they have received an e-mail from our office advising them the final payment reimbursement amount that our office will authorize.

This regional office has five different closeout package submission requirements documents, one for each "project type" (e.g. planning, environmental, equipment acquisition, etc.). These documents are located on our regional website ([http://www.faa.gov/airports/new\\_england/aip/](http://www.faa.gov/airports/new_england/aip/)).

If you have questions regarding application submission requirements, then please contact this regional office's FAA AIP Program Specialist.

|                                                             |       |
|-------------------------------------------------------------|-------|
| Statement certifying the element request (if applicable)    | _____ |
| with original signature                                     | _____ |
| Construction pages                                          | _____ |
| go (if applicable), etc.                                    | _____ |
| Sponsor                                                     | _____ |
| Work Item                                                   | _____ |
| Permits Agreements                                          | _____ |
| Tests per the project observation plan (Grant)              | _____ |
| Actual test reports with information available upon request | _____ |
| As-Builts (FWL)                                             | _____ |

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Contractor's Final Statement of Completion:  
- Examples: final payment request or signed affidavit

Project Photographs:  
- Include a representative number of photographs that depict major elements of the project prior to the improvement and after completion of construction

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ANE AIP Development-Construction Closeout Subject to Change Issued on 10 FEB 2016 ANE-410 Page 3 of 3

DON'T  
PIECEMEAL  
THIS  
SUBMISSION

[https://www.faa.gov/airports/new\\_england/aip/](https://www.faa.gov/airports/new_england/aip/)

# Top Ten Take Aways

1. Check math (frontways, sideways, backwards, up, and down).
2. Watch your pennies.
3. Check your resources, have a game plan, then call NHDOT or FAA.
4. Don't piecemeal grant documentation submissions.
5. Watch order of signatures on grant documentation.
6. Watch grant deadlines.
7. Watch period of performance date.
8. Don't include instruction pages in grant documentation submissions.
9. NHDOT needs a copy of all project documents (if you sent it to the FAA, send it to NHDOT).
10. There's a checklist for that (or will be).

**BONUS:** It's better to ask for help than struggle, so just pick up the phone to reach out to NHDOT or FAA.

# Grant Documentation Workshop Wrap Up

## Next planned NHDOT Workshop:

- 5010 inspections,
- UAS/airport applicable rules,
- Aircraft emergencies, and
- OE/AAA submissions

Coming  
soon....  
April/May  
2020

## Future NHDOT Workshop Ideas:

- Grant assurances
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

# Thank you! Any questions?

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