**CIP DATA SHEET INSTRUCTIONS**

1. The AIP project types are those in FAA Order 5100.38, AIP Handbook, Appendices D through T, which identifies factors to consider for justification, eligibility, and the required usable unit of work/outcome.
2. Select the desired FFY that you desire the project. (*Example: FY25 is October 1st, 2024, to September 30th,2025*).
3. Provide the estimate of total cost (engineering, administrative, legal, appraisal costs, etc.) and breakout of federal, state, and local shares. Attach a detailed cost estimate showing unit costs; aggregate in square yards (S.Y.), concrete paving in square yards (S.Y.) and asphaltic paving in tons. Separate the costs for land acquired in fee and land acquired in easement. NOTE: Cost estimates cannot include an amount for contingencies.
4. Provide a detailed scope of the project and justification. Attach a separate sheet with a sketch that clearly identifies the scope of the project. This information is required to determine if the project has been properly planned and is ready for funding assistance. Failure to provide and/or verify this information in this section will result in follow-up correspondence and revisions to the Data Sheet.
   * Justification - Describe the need, objectives, method of accomplishment, and the benefit expected to be obtained from the assistance. For some projects, the FAA must determine if a project is justified based on the applicable critical aircraft for the project. Reference paragraph 3-12 in FAA Order 5100.38, AIP Handbook, and Advisory Circular (AC) 150/5000-17, Critical Aircraft and Regular Use Determination.
   * Is the proposed development project on your approved Airport Layout Plan (ALP)? Proposed projects, with the exception of planning and equipment acquisition, must be shown on the approved Airport Layout Plan (ALP).
   * All AIP funded projects must have a NEPA (environmental) determination from the FAA before a project can commence. If you have received a determination, please identify. If not, please continue working with your State Airport Planner and our Environmental Specialist.
   * Proposed pavements projects:
     + Identify most recent PCI score and date. If more than one type of pavement segment (runway, taxiway, apron) is part of the project, identify the PCI score and date of each pavement segment.
     + Include existing and proposed dimensioning (length, width, square footage, square yards, etc.).
     + For reconstruction projects provide core sample results showing the extents of the required reconstruction.
     + Do NOT combine runway, taxiway, and apron work on a single data sheet.
     + Apron expansion/reconstruction - Include calculations based on Chapter 5 of AC 150/5300-13B, Airport Design, showing justification for the size of apron needed. Central Region has prepared an apron sizing worksheet to assist with sizing aprons. Please request this worksheet from your State Airport Planner to complete and attach to your Data Sheet.
   * Verification of clear approach and departure surfaces in accordance with AC 150/5300-13B, Airport Design, and FAA Order 8260.3, The United States Standard for Terminal Instruments Procedures (TERPS). If these surfaces are not clear, you will need to coordinate with your State Airport Planner to begin the planning process to mitigate obstacles. The sponsor must demonstrate that a plan has been developed before a grant can be issued.
   * Will the proposed project impact a FAA owned facility/equipment? If so, please identify the equipment. A FAA reimbursable agreement with the Air Traffic Organization (ATO), Central Service Area, NAS Planning and Integration Office will be required as part of the proposed project.
   * Proposed snow removal equipment (SRE) acquisition – Include an inventory of the airport’s existing airport SRE and sizing calculations based on AC 150/5200-30, Airport Winter Safety and Operations, and AC 150/5220-20, Airport Snow and Ice Control Equipment. Central Region has prepared a SRE inventory and sizing worksheet to assist with these calculations. Please request this worksheet from your State Airport Planner to complete and attach to the Data Sheet.
   * Verify that the useful life of a facility, equipment, or pavement being rehabilitated, reconstructed, or replaced has been met (or prior to) grant issuance. Reference paragraph 3-13 and Table 3-8 in FAA Order 5100.38, AIP Handbook.
   * If the proposed project will involve the disposal of AIP funded equipment, reference the criteria for that effort in Table 5-39 of FAA Order 5100.38, AIP Handbook.
   * Revenue producing projects (fuel systems, hangars) - At minimum, provide the date of the submitted statement/letter that demonstrates all airside needs have been met, that runway approach/departure surfaces are clear of obstructions, and that any airside need within the next three years will be accommodated through local or nonprimary entitlement funds.
   * The sponsor must own all land upon which AIP funds will be expended for development. If the sponsor does not control the land (i.e. fee simple or easement) the project cannot commence. Verify that your required Exhibit ‘A’ Property Map reflects current conditions.

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| **SEE INSTRUCTIONS TO COMPLETE THIS INFORMATION** | | | | | | |
| **Airport Name, LOCID, City, State:** | | Click here to enter text. | | | | |
| **AIP Project Type:** | | Click here to enter text | | | | |
| **Local Priority:** | | Select Local Priority | | **Fed. Share (AIP):** | | **$** Click here to enter text. |
| **FFY Requested:** | | Click here to enter text | | **Fed. Share (BIL-AIG):** | | **$**Click here to enter text. |
| **NEPA Determination:** | | Click here to enter text | | **State Share:** | | **$**Click here to enter text. |
| **Provide Detailed Project Scope and Justification Below.** **You must attach a sketch/drawing (on a separate sheet) that clearly identifies the scope of the project.** | | | | **Local Share:** | | **$**Click here to enter text. |
| **Total Project Cost:** | | **$** Click here to enter text. |
| Click here to enter text. | | | | | | |
| **SPONSOR SIGNATURE BLOCK** | | | | | | |
| **Signature:** |  | | **Date:** | | Click here to enter a date. | |
| **Printed Name:** | Click here to enter text. | | **Title:** | | Click here to enter text. | |
| **Phone Number:** | Click here to enter text. | | **Email:** | | Click here to enter text. | |