

AUGUSTA, GEORGIA
New Grant Proposal/Application

Before a Department/agency may apply for the grant/award on behalf of Augusta Richmond County, they must first obtain approval signature from the Administrator and the Finance Director. The Administrator will obtain information on the grant program and requirements from the funding agency and review these for feasibility to determine if this grant/award will benefit Augusta Richmond County. The Finance Director will review the funding requirement to determine if the grant will fit within our budget structure and financial goals.

Proposal Project No. Project Title

PR000650 DANIEL FIE Taxiway D Rehab, Land Reimburse & Hangar Const-Phase 2

Requesting grant funds for the following projects:

Rehabilitate Taxiway D in order to be in FAA compliance by eliminating multiple access areas from Taxiway D to Runway 5/23. (FAA & STATE)

Reimbursement of land purchased by airport as runway protection zone area for Approach End to Runway 5 (FAA only)

New Hangar Construction-Phase 2 (STATE & TIA)

NOTE: Local match of \$209,629 less the \$14,000 for land reimbursement is being funded by TIA. *band 2*

EEO REQUIRED: YES

EEO NOTIFIED: NO

FUNDING SOURCE 552000000

Start Date: 09/15/2026

End Date: 12/31/2028

Submit Date: 08/13/2026

Department: 082

Daniel Field

Cash Match?

N

Total Budgeted Amount: 2,243,261.00

Total Funding Agency:

2,243,261.00

Total Cash Match:

0.00

Sponsor: GM0004

Fed Aviation Adm

Sponsor Type: F

Federal

Purpose: 19

Airport improvement

Flow Thru ID: GM0006 GDOT

Type	ID	Name	Contacts	Phone
I	GM1019	Shealy, Becky		(706)922-0408

Type	By	Date
FA	B SHEALY	08/13/2026

Approvals

Dept. Signature: *Becky Shealy*

Grant Coordinator Signature: *Nida 8/14/2026*

1.) I have reviewed the Grant application and enclosed materials and:

☒ Find the grant/award to be feasible to the needs of Augusta Richmond County

☐ Deny the request

Morgan
Finance Director

8/14/26
Date

2.) I have reviewed the Grant application and enclosed materials and:

☒ Approve the Department Agency to move forward with the application

☐ Deny the request

[Signature]
Administrator

8/20/2026
Date