

Croy Engineering, LLC 200 North Cobb Parkway Building 400, Suite 413 Marietta, Georgia 30062

Phone: 770.971.5407 Fax: 770.971.0620

www.croyengineering.com

November 13, 2019

Mr. Dennis Mock, Mayor City of Dalton P. O. Box 1205 Dalton, Georgia 30720

RE: Dalton Municipal Airport FY 2021 CIP

Dear Mayor Mock:

Enclosed is the FY 2021 CIP, Program Narrative, Pre-Application Form for Federal Assistance (Form SF-424), and the Application for State Assistance (including Request for Aid Sketches), for your review and signing.

Please sign all copies where indicated and forward an electronic signed PDF to Croy Engineering for our files and uploading, retain one (1) copy for your files. Please also send a signed electronic copy to Joseph Robinson, Aviation Planning Manager, GDOT, Division of Intermodal, 600 West Peachtree Street NW, 2nd Floor, Atlanta, GA 30308, at jorobinson@dot.ga.gov. We have included a sample letter to Joseph for your use.

The Georgia Department of Transportation (GDOT) is requiring that the CIP and application be submitted electronically in the Aviation System Manager (ASM). Only the project sponsor may obtain an account and password for the ASM and you must register on-line at the GDOT web-site to obtain these items. You should have already received an email with instructions from Steve Brian. If you have not already done so, go ahead and request a new account at this time. You will receive two separate emails with the account information and password.

Once you have signed the application and obtained the GDOT account and password, you may submit the application electronically or provide the account information and password to Croy Engineering for submittal on your behalf. If Croy will be performing this work, please send us your account and login information as soon as possible.

The CIP and application must be submitted electronically in the GDOT ASM no later than November 22, 2019. If you have any questions, please feel free to contact us at (770) 971-5407.

Sincerely,

SUCEL

Katie Eleam, Project Manager Encls.

CC: Frank Meyer, GDOT, w/ enclosures Project File 1207.00

Suggested letter to GDOT Airport Authority Letterhead

Date

Mr. Joseph Robinson, Aviation Planning Manager GDOT – Division of Intermodal 600 West Peachtree Street NW, 2nd Floor Atlanta, GA 30308

RE: Franklin-Hart County Airport Canon, Georgia FY 2021 CIP & Pre-application Package

Dear Mr. Robinson:

Please find enclosed one (1) copy of our FY 2021-2025 Capital Improvement Program (CIP), Program Narrative, Application Form for Federal Assistance (Form SF-424), and Application for State Assistance (including Request for Aid Sketches). No Categorical Exclusion Checklist for the FY 2021 CIP update is included at this time, however, they will be required at the time of funding.

If you have any questions, or if you require any additional information, please feel free to contact me at (229) 928-4876 or Katie Eleam of Croy Engineering at (770) 971-5407

Sincerely,

FRANKLIN-HART COUNTY AIRPORT AUTHORITY

Eddie Addison, Chairman Encls.

CC: Frank Meyer, with e-mail enclosures Katie Eleam, with e-mail enclosures

DALTON MUNICIPAL AIRPORT (DNN) DALTON, GA FY2021-2025 CIP

FY		PROGRAM DESCRIPTION	то	TAL COST	FEDERAL COST	S	TATE COST	LOCAL COST
2021	1.	LAND ACQUISITION - PHASE I (EASEMENT) RPZ APPROACH RUNWAY 32 INCLUDING SURVEY, APPRAISAL, AND OBSTRUCTION REMOVAL DESIGN	\$	300,000	\$ 270,000	\$	15,000	\$ 15,000
	2.	APRON OVERLAY/REHABILITATION PHASE 2	\$	1,270,000	\$ 1,143,000	\$	63,500	\$ 63,500
	3a.	NEW T-HANGAR APRON (TO INCLUDE GRADE WORK, BASE, AND ASPHALT)	\$	320,000	\$ 288,000	\$	16,000	\$ 16,000
	3b.	DESIGN AND CONSTRUCT 8 UNIT T-HANGAR AND 2 CORPORATE HANGARS	\$	746,000	\$-	\$	-	\$ 746,000
		TOTAL, FY 2021	\$	2,636,000	\$ 1,701,000	\$	94,500	\$ 840,500
2022	1.	PHASE I - RPZ APPROACH RUNWAY 32 OBSTRUCTION REMOVAL	\$	300,000	\$ 270,000	\$	15,000	\$ 15,000
	2.	LAND ACQUISITION - PHASE II (FEE/EASEMENT) RPZ APPROACH RUNWAY 32 INCLUDING OBSTRUCTION REMOVAL DESIGN	\$	300,000	\$ 270,000	\$	15,000	\$ 15,000
	3.	REPLACE AWOS*	\$	130,000	\$ 117,000	\$	6,500	\$ 6,500
	4.	DESIGN RUNWAY 14-32 AND PARALLEL TAXIWAY REHABILITATION INCLUDING TAXIWAY EGRESS	\$	300,000	\$ 270,000	\$	15,000	\$ 15,000
		TOTAL, FY 2022	\$	1,030,000	\$ 927,000	\$	51,500	\$ 51,500
2023	1.	PHASE II - RPZ APPROACH RUNWAY 14/32 OBSTRUCTION REMOVAL	\$	300,000	\$ 270,000	\$	15,000	\$ 15,000
	2.	LAND ACQUISITION - PHASE III (FEE/EASEMENT) RPZ APPROACH RUNWAY 14/32 INCLUDING OBSTRUCTION REMOVAL DESIGN	\$	300,000	\$ 270,000	\$	15,000	\$ 15,000
	3a.	ROTATING BEACON UPGRADE	\$	10,000	\$ 9,000	\$	500	\$ 500
	3b.	RUNWAY 14-32 AND PARALLEL TAXIWAY REHABILITATION INCLUDING TAXIWAY EGRESS	\$	2,500,000	\$ 2,250,000	\$	125,000	\$ 125,000
	4.	DBE PLAN UPDATE	\$	12,000	\$ 10,800	\$	600	\$ 600
		TOTAL, FY 2023	\$	3,122,000	\$ 2,809,800	\$	156,100	\$ 156,100
2024	1.	PHASE III - RPZ APPROACH RUNWAY 14/32 OBSTRUCTION REMOVAL	\$	300,000	\$ 270,000	\$	15,000	\$ 15,000
	2.	LAND ACQUISITION - PHASE IV (FEE/EASEMENT) RPZ APPROACH RUNWAY 14/32 INCLUDING OBSTRUCTION REMOVAL DESIGN	\$	300,000	\$ 270,000	\$	15,000	\$ 15,000
	3a.	NEW T-HANGAR APRON (TO INCLUDE GRADE WORK, BASE, AND ASPHALT)	\$	320,000	\$ 288,000	\$	16,000	\$ 16,000
	3b.	DESIGN AND CONSTRUCT 8 UNIT T-HANGAR AND 2 CORPORATE HANGARS	\$	746,000	\$-	\$	-	\$ 746,000
		TOTAL, FY 2024	\$	1,666,000	\$ 828,000	\$	46,000	\$ 792,000
2025	1.	PHASE IV - RPZ APPROACH RUNWAY 14/32 OBSTRUCTION REMOVAL	\$	300,000	\$ 270,000	\$	15,000	\$ 15,000
		T-HANGAR AND CORPORATE HANGAR TAXILANE/APRON REHABILITATION DESIGN	\$	100,000	\$ 90,000	\$	5,000	\$ 4,500
		TOTAL, FY 2025	\$	400,000	\$ 360,000	\$	20,000	\$ 19,500
		TOTAL, FY 2021-2025	\$	8,854,000	\$ 6,625,800	\$	368,100	\$ 1,859,600
		*Airport would accept AWOS replacement as state project (75/25) if funds are available.						•

*Airport would accept AWOS replacement as state project (75/25) if funds are available.

Approved by:

Dennis Mock, Mayor City of Dalton SIGN HERE

To be received by 22 November, 2019 at: Georgia Department of Transportation-Aviation Programs 600 W. Peachtree St NW, 6th floor Atlanta, Georgia 30308

Fiscal Year 2021

1. LAND ACQUISITION - PHASE I (EASEMENT) RPZ APPROACH RUNWAY 32 INCLUDING SURVEY, APPRAISAL, AND OBSTRUCTION REMOVAL DESIGN

The proposed action would provide funding to acquire easements on the approach end of Runway 32 and remove obstructions. This includes surveys, appraisals, and the design of the obstruction removal.

1. Land Acquisition – Phase I (Easement) RPZ Approach Runway 32 Including Survey, Appraisal, and Obstruction Removal Design	
Federal Cost State Cost	\$ 270,000 \$ 15,000
Local Cost	\$ 15,000
Total Cost	\$ 300,000

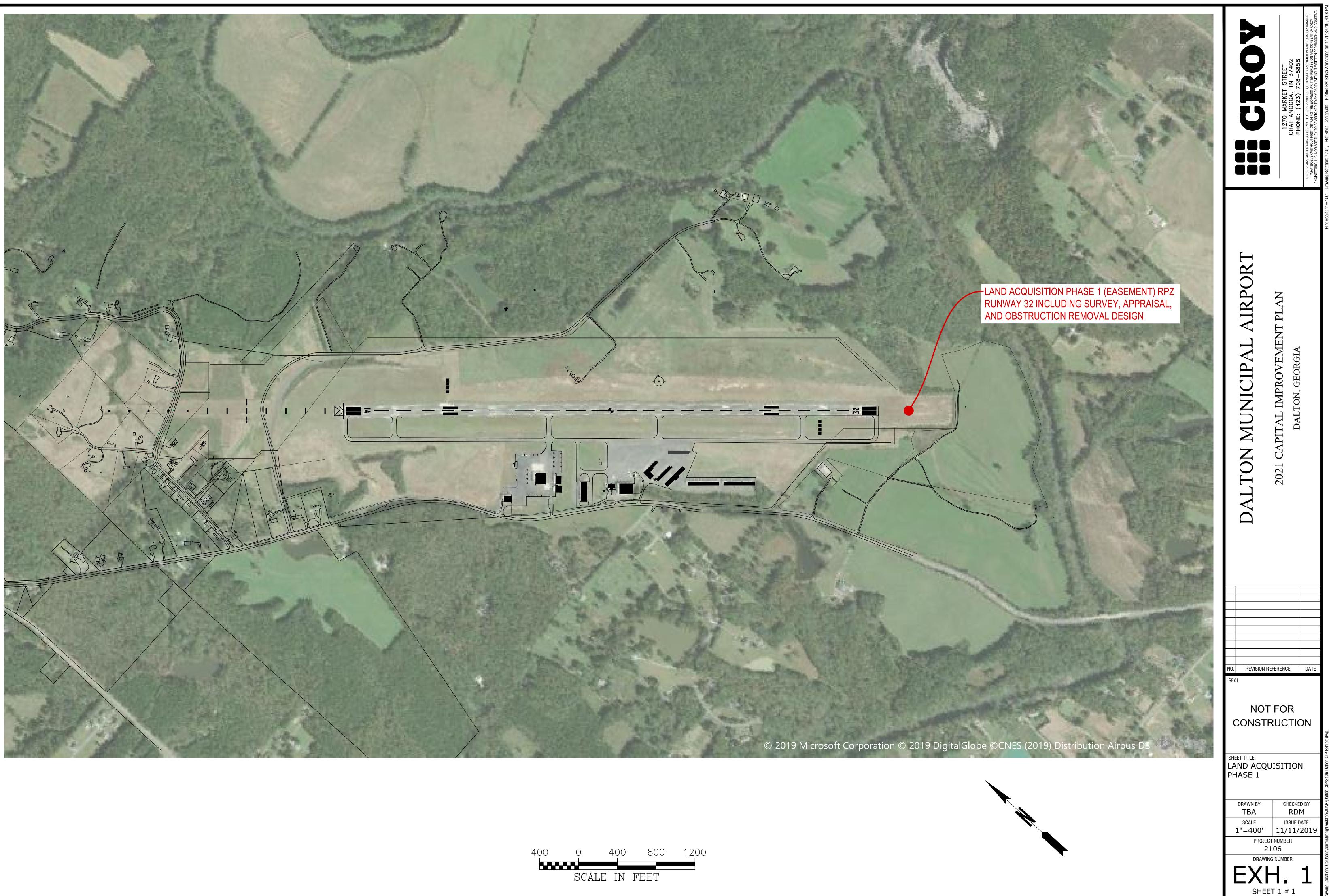
Application for	Federal Assista	ince SF	-424							
* 1. Type of Submiss			e of Application: ew ontinuation evision		Revision, select appropriate letter(s): ther (Specify):					
* 3. Date Received: 11/22/2019		4. Appli	icant Identifier:							
5a. Federal Entity Ide	entifier:	5b. Federal Award Identifier:								
State Use Only:				-						
6. Date Received by	State:		7. State Application	Ide	ntifier:					
8. APPLICANT INFO	ORMATION:									
* a. Legal Name: _C	ity of Dalton									
* b. Employer/Taxpay	yer Identification Nur	nber (EIN	J/TIN):	Iг						
d. Address:										
* Street1: Street2: * City:	Street2:									
County/Parish:	Whitfield									
* State: Province:					GA: Georgia					
* Country:	IT INFORMATION: IT INFORMATION: Ine: City of Dalton Taxpayer Identification Number (EIN/TIN): Taxpayer Iden									
* Zip / Postal Code:	30722			_						
e. Organizational U	Init:									
Department Name:				1	Division Name:					
Dalton Municip	al Airport] [
f. Name and contac	ct information of p	erson to	be contacted on m	atte	ers involving this application:					
Prefix: Mr. Middle Name: Moc * Last Name: Moc Suffix:] 	* First Nam	e:	Dennis					
Title: Mayor		<u> </u>								
Organizational Affiliat										
* Telephone Number	706-226-1534				Fax Number:					
* Email: kwither	ow@cityofdalton	n-ga.g	vc							

Application for Federal Assistance SF-424
* 9. Type of Applicant 1: Select Applicant Type:
C: City or Township Government
Type of Applicant 2: Select Applicant Type:
Type of Applicant 3: Select Applicant Type:
* Other (specify):
* 10. Name of Federal Agency:
Federal Aviation Administration
11. Catalog of Federal Domestic Assistance Number:
20.106
CFDA Title:
Airport Improvement Program
* 12. Funding Opportunity Number:
* Title:
13. Competition Identification Number:
Title:
14. Areas Affected by Project (Cities, Counties, States, etc.):
Add Attachment Delete Attachment View Attachment
* 15. Descriptive Title of Applicant's Project:
Land Acquisition - Phase 1 (Easement) RPZ Approach Runway 32 Including Survey, Appraisal, and
Obstruction Removal Design
Attach supporting documents as specified in agency instructions.
Add Attachments Delete Attachments View Attachments

Application for Federal Assistance SF-424								
16. Congressi	onal Districts Of:							
* a. Applicant]			* b. Pro	gram/Project		
Attach an additi	onal list of Program	/Project Cong	ressional Distric	ts if needed.				
				Add Attachmer	nt Delete	Attachment	iew Attachment	
17. Proposed	Project:							
* a. Start Date:	07/01/2020				*	b. End Date: 06/	30/2021	
18. Estimated	Funding (\$):							
* a. Federal			270,000.00					
* b. Applicant								
* c. State			15,000.00					
* d. Local			15,000.00					
* e. Other								
* f. Program Inc	come							
* g. TOTAL			300,000.00					
* 19. Is Applic	ation Subject to R	eview By Sta	ate Under Exe	cutive Order 1237	2 Process?			
a. This ap	plication was made	e available to	the State und	er the Executive C	Order 12372 Pro	ocess for review on		
	n is subject to E.O							
	n is not covered by							
* 20. Is the Ap	plicant Delinquen	t On Any Fee	deral Debt? (If	f "Yes," provide e	xplanation in a	ttachment.)		
Yes	No No							
If "Yes", provid	de explanation and	d attach						
				Add Attachmer	nt Delete	Attachment V	iew Attachment	
 21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001) X* I AGREE ** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions. 								
Authorized Re	epresentative:							
Prefix:	Mr.		* Fin	st Name: Denni	s			
Middle Name:								
* Last Name:	Mock							
Suffix:								
* Title:	ayor							
* Telephone Nu	mber: 706-226-	1534			Fax Number:			
* Email: kwit	herow@cityofda	alton-ga.g	ION					
* Signature of A	uthorized Represer	ntative:					* Date Signed:	

Application for State Assistance

Date Submitted:	Date Received By State:
November 22, 2019	
1. APPLICANT INFORMATION	
A. Name of Airport Dalton Municipal Airport	
B. Name and Address of Applicant:	C. Name and Address of Contact Person If different from 1.B.
City of Dalton/Dalton Municipal Airport 300 West Waugh St. Dalton, GA 30722	Mr. Dennis Mock, Mayor
Telephone: (70) 226-1534	Telephone: (706) 226-1534
2. PROJECT INFORMATION	
A. Description of applicant's project: Attach	sketch if possible.
Land Acquisition - Phase 1 (Easement) RPZ A and Obstruction Removal Design.	pproach Runway 32 Including Survey, Appraisal,
B. Project justification: <i>Explain why project is sheet if more space is needed.</i>	s needed. If safety related, explain. Attach separate
The proposed action would provide funding to acqu and remove obstructions. This includes surveys, ap	ire easements on the approach end of Runway 32 praisals, and the design of the obstruction removal.
D. Estimated total cost of project:	E. Desired start date:
\$300,000	As Soon As Possible
3. CERTIFICATION	
 Plan except as follows: (attach separate sheet) B. CERTIFICATE OF OWNERSHIP – The applican actual construction of the project is performed an examination by a qualified attorney or title compathat the applicant holds such property interest exc. C. LICENSING COMPLIANCE – The airport shall b criteria. D. PROJECT DESIGN – The applicant will accompliand specifications necessary to accomplish the professory of the work in the professory of the work in the professory. E. PUBLIC USE – All elements of the work in the professory. G. FUNDS – The applicant's share of the costs for th 2.E. above and covenants to disburse funds derived. H. APPLICATION AUTHORITY – The applicant agree. 	any and that such attorney or title company has determined cept as follows: (attach separate sheet) be maintained in compliance with applicable State licensing ish, except where provided by the State, the required plans oject. Toject will be for public use. I maintain the facility constructed by the project throughout the project will be available as of the start date stated in item ed from the State solely in aid of the project. Sees that these covenants and grant application shall be rther covenants that it has the legal authority to execute this
SIGNATURE OF APPLICANT	TITLE OF APPLICANT



Fiscal Year 2021

2. APRON OVERLAY/REHABILITATION PHASE 2

The proposed action would provide funding to rehabilitate the terminal apron. This project is already designed.

2. Land Acquisition – Phase I (Easement) RPZ Approach Runway 32 Including Survey, Appraisal, and Obstruction Removal Design	
Federal Cost State Cost Local Cost	\$ 1,143,000 \$ 63,500 \$ 63,500
Total Cost	\$ 1,270,000

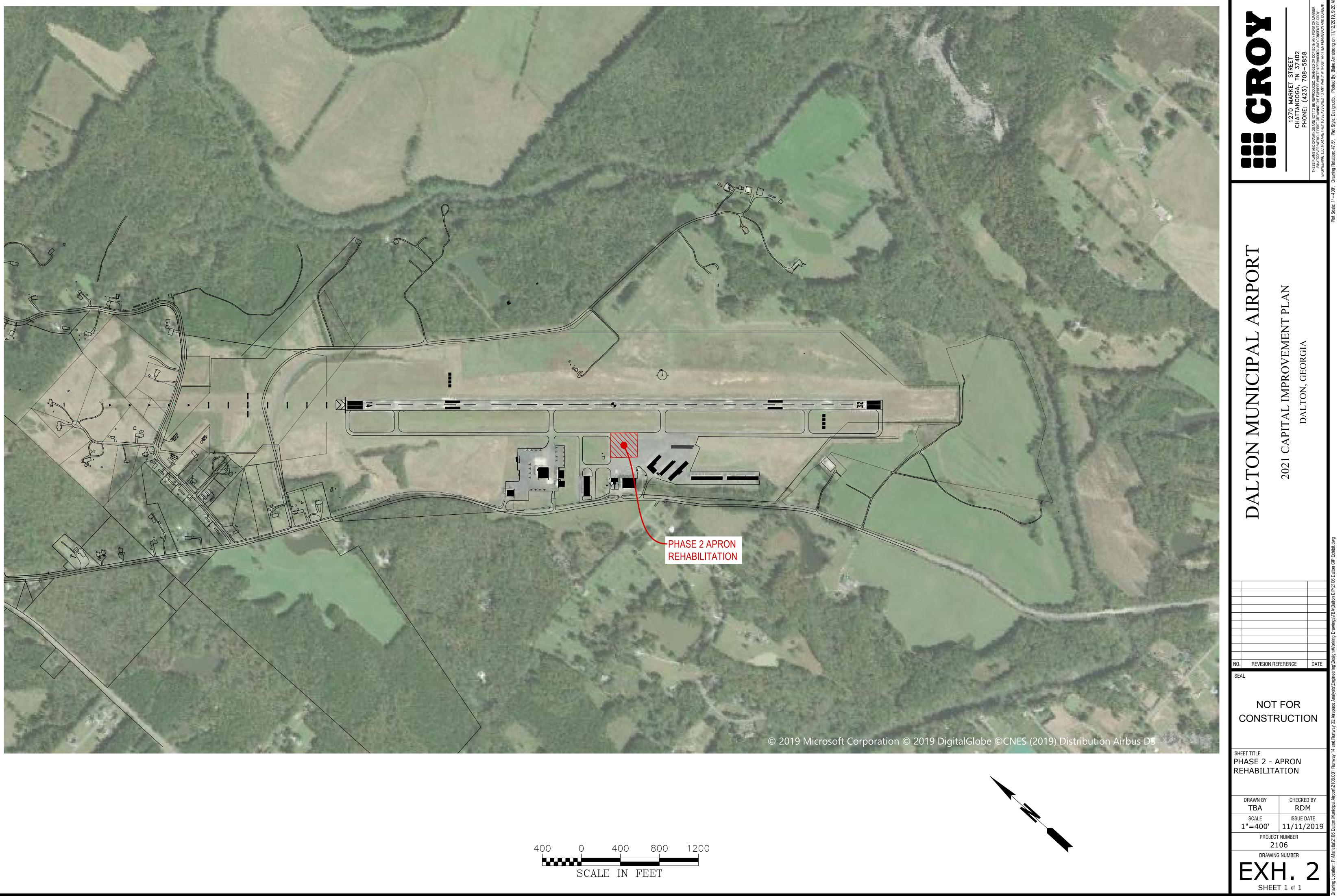
Application for	Federal Assista	ince SF	-424							
* 1. Type of Submiss			e of Application: ew ontinuation evision		Revision, select appropriate letter(s): ther (Specify):					
* 3. Date Received: 11/22/2019		4. Appli	icant Identifier:							
5a. Federal Entity Ide	entifier:	5b. Federal Award Identifier:								
State Use Only:				-						
6. Date Received by	State:		7. State Application	Ide	ntifier:					
8. APPLICANT INFO	ORMATION:									
* a. Legal Name: _C	ity of Dalton									
* b. Employer/Taxpay	yer Identification Nur	nber (EIN	J/TIN):	Iг						
d. Address:										
* Street1: Street2: * City:	Street2:									
County/Parish:	Whitfield									
* State: Province:					GA: Georgia					
* Country:	IT INFORMATION: IT INFORMATION: Ine: City of Dalton Taxpayer Identification Number (EIN/TIN): Taxpayer Iden									
* Zip / Postal Code:	30722			_						
e. Organizational U	Init:									
Department Name:				1	Division Name:					
Dalton Municip	al Airport] [
f. Name and contac	ct information of p	erson to	be contacted on m	atte	ers involving this application:					
Prefix: Mr. Middle Name: Moc * Last Name: Moc Suffix:] 	* First Nam	e:	Dennis					
Title: Mayor		<u> </u>								
Organizational Affiliat										
* Telephone Number	706-226-1534				Fax Number:					
* Email: kwither	ow@cityofdalton	n-ga.g	vc							

Application for Federal Assistance SF-424
* 9. Type of Applicant 1: Select Applicant Type:
C: City or Township Government
Type of Applicant 2: Select Applicant Type:
Type of Applicant 3: Select Applicant Type:
* Other (specify):
* 10. Name of Federal Agency:
Federal Aviation Administration
11. Catalog of Federal Domestic Assistance Number:
20.106
CFDA Title:
Airport Improvement Program
* 12. Funding Opportunity Number:
* Title:
13. Competition Identification Number:
Title:
14. Areas Affected by Project (Cities, Counties, States, etc.):
Add Attachment Delete Attachment View Attachment
* 15. Descriptive Title of Applicant's Project:
Apron Overlay/Rehabilitation Phase 2
Attach supporting documents as specified in agency instructions.
Add Attachments Delete Attachments View Attachments

Application for Federal Assistance SF-424									
16. Congressional Districts Of:									
* a. Applicant				* b. Prog	gram/Project				
Attach an addit	ional list of Program/F	Project Congressional Distric	ts if needed.						
			Add Attachmer	t Delete	Attachment Vie	w Attachment			
17. Proposed	Project:								
* a. Start Date:	07/01/2020			*	b. End Date: 06/30	0/2021			
18. Estimated	Funding (\$):								
* a. Federal		1,143,000.00							
* b. Applicant									
* c. State		63,500.00							
* d. Local		63,500.00							
* e. Other									
* f. Program In	come								
* g. TOTAL		1,270,000.00							
* 19. Is Applic	ation Subject to Re	view By State Under Exe	cutive Order 1237	2 Process?					
🗌 a. This ap	plication was made	available to the State und	er the Executive O	rder 12372 Pro	ocess for review on				
b. Program	n is subject to E.O.	12372 but has not been so	elected by the Stat	e for review.					
C. Program	n is not covered by	E.O. 12372.							
* 20. Is the Ap	plicant Delinquent	On Any Federal Debt? (If	f "Yes," provide ex	cplanation in at	ttachment.)				
Yes	No No								
lf "Yes", provi	de explanation and	attach							
	Add Attachment Delete Attachment View Attachment								
 21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001) ^{**} I AGREE ^{**} The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions. 									
Authorized Re	epresentative:								
Prefix:	Mr.	* First	st Name: Dennis	3			_		
Middle Name:									
* Last Name:	Dennis								
Suffix:									
* Title:	ayor								
* Telephone Nu	imber: 706-226-1	534		Fax Number:					
* Email: kwit	herow@cityofda]	lton-ga.gov							
* Signature of A	uthorized Represent	ative:				* Date Signed:			

Application for State Assistance

Date Submitted:	Date Received By State:
November 22, 2019	Date Received by State.
-	
1. APPLICANT INFORMATION	
A. Name of Airport Dalton Municipal Airport	
B. Name and Address of Applicant:	C. Name and Address of Contact Person
City of Dalton/Dalton Municipal Airport	If different from 1.B.
300 West Waugh St.	Mr. Dennis Mock, Mayor
Dalton, GA 30722	
Telephone: (70) 226-1534	Telephone: (706) 226-1534
2. PROJECT INFORMATION	
A. Description of applicant's project: <i>Attach</i>	sketch if possible.
The proposed action would provide funding to r already designed.	
sheet if more space is needed.	r needed. If safety related, explain. Attach separate
Apron Overlay/Rehabilitation Phase 2	
D. Estimated total cost of project:	arate sheet if more space is needed. E. Desired start date:
\$1,270,000	As Soon As Possible
3. CERTIFICATION	
Plan except as follows: (attach separate sheet)	
 C. LICENSING COMPLIANCE – The airport shall b criteria. D. PROJECT DESIGN – The applicant will accompliand specifications necessary to accomplish the processory. E. PUBLIC USE – All elements of the work in the profixed of the second s	ept as follows: (attach separate sheet) e maintained in compliance with applicable State licensing sh, except where provided by the State, the required plans ject. oject will be for public use. maintain the facility constructed by the project throughout e project will be available as of the start date stated in item d from the State solely in aid of the project. es that these covenants and grant application shall be ther covenants that it has the legal authority to execute this
 C. LICENSING COMPLIANCE – The airport shall b criteria. D. PROJECT DESIGN – The applicant will accompliand specifications necessary to accomplish the pro E. PUBLIC USE – All elements of the work in the pro F. PROJECT MAINTENANCE – The applicant shall its normal useful life as determined by the State. G. FUNDS – The applicant's share of the costs for the 2.E. above and covenants to disburse funds derive H. APPLICATION AUTHORITY – The applicant agree binding on itself, successors, and assignees and fungrant application. 	ept as follows: (attach separate sheet) e maintained in compliance with applicable State licensing sh, except where provided by the State, the required plans ject. oject will be for public use. maintain the facility constructed by the project throughout e project will be available as of the start date stated in item d from the State solely in aid of the project. es that these covenants and grant application shall be ther covenants that it has the legal authority to execute this



Fiscal Year 2021

3a. NEW T-HANGAR APRON (TO INCLUDE GRADE WORK, BASE, AND ASPHALT)

The proposed action would provide funding to construct a new t-hangar apron. This project includes the grade work, base, and asphalt.

3a. New T-Hang	ar Apron (To Include Grade Work, Base, and Asphalt)	
	Federal Cost	\$ 288,000
	State Cost	\$ 16,000
	Local Cost	\$ 16,000
	Total Cost	\$ 320,000

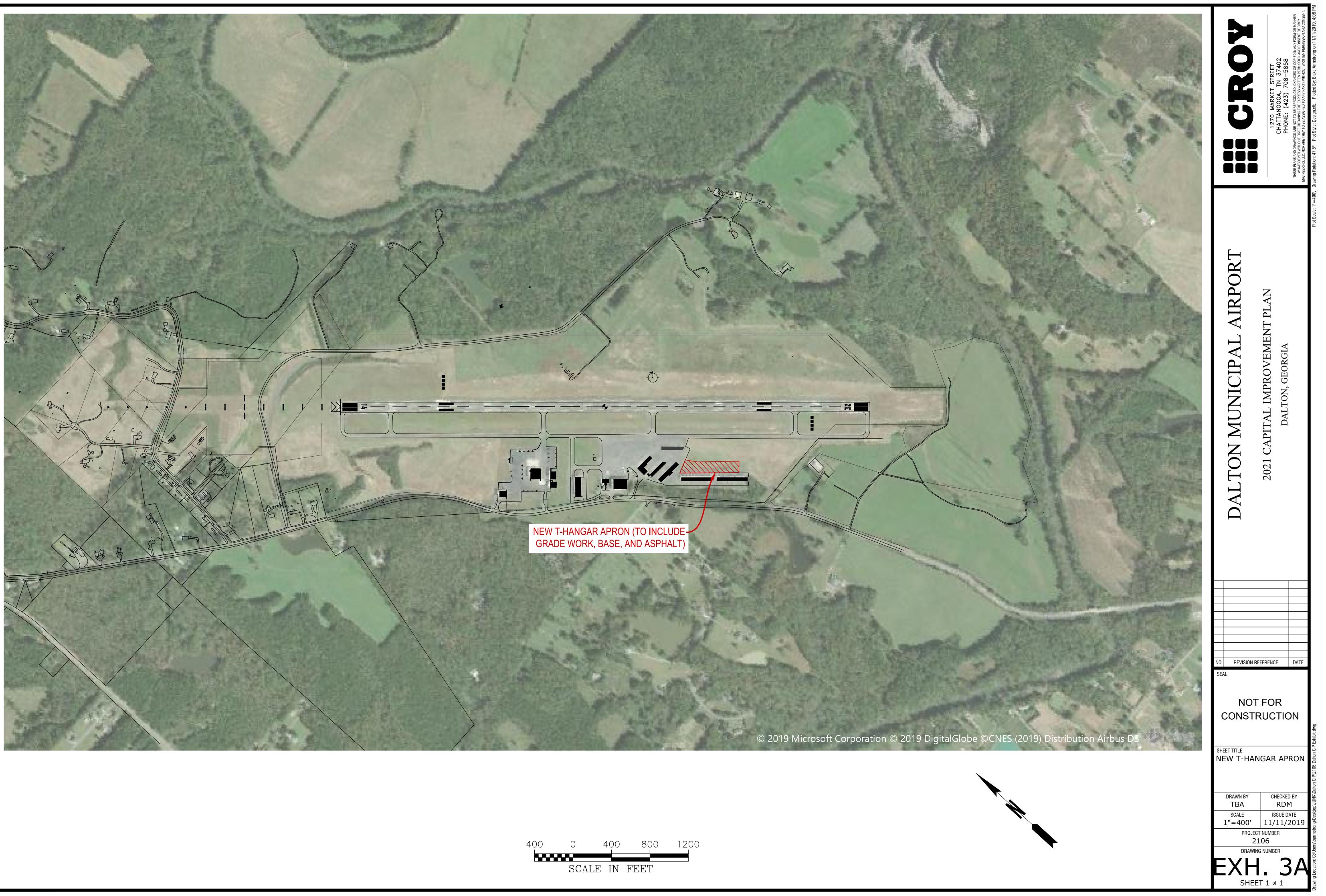
Application for	Federal Assista	ince SF	-424					
* 1. Type of Submissi			e of Application: ew ontinuation evision		Revision, select appropriate letter(s): ther (Specify):			
* 3. Date Received: 4.			icant Identifier:					
5a. Federal Entity Ide	entifier:				5b. Federal Award Identifier:			
I I I I I I I I I I I I I I I I I I I								
6. Date Received by	State:		7. State Application	Ide	entifier:			
8. APPLICANT INFO	ORMATION:							
* a. Legal Name: C	ity of Dalton							
* b. Employer/Taxpayer Identification Number (EIN/TIN): * c. Organizational DUNS: 58-6000557 0758692300000								
d. Address:								
* Street1: Street2: * City:	300 West Waug	h St.						
County/Parish: * State: Province:	Whitfield				GA: Georgia			
* Country:					USA: UNITED STATES			
* Zip / Postal Code:	30722			_				
e. Organizational U	init:							
Department Name:	al Airport] [Division Name:			
f. Name and contac	t information of p	erson to	be contacted on m	atte	ers involving this application:			
Prefix: Mr. Middle Name:]]	* First Nam	e:	Dennis			
Title: Chairman								
Organizational Affiliat								
* Telephone Number	: 706-226-1534				Fax Number:			
* Email: kwitherc	ow@cityofdalton	n-ga.g	vc					

Application for Federal Assistance SF-424	
* 9. Type of Applicant 1: Select Applicant Type:	
C: City or Township Government	
Type of Applicant 2: Select Applicant Type:	
Type of Applicant 3: Select Applicant Type:	
* Other (specify):	
* 10. Name of Federal Agency:	
Federal Aviation Administration	
11. Catalog of Federal Domestic Assistance Number:	
20.106	
CFDA Title:	
Airport Improvement Program	
* 12. Funding Opportunity Number:	
* Title:	
13. Competition Identification Number:	
Title:	
14. Areas Affected by Project (Cities, Counties, States, etc.):	
Add Attachment Delete Attachment View Attachment	
* 15. Descriptive Title of Applicant's Project:	
New T-Hangar Apron (To include Grade Work, Base, and Asphalt)	
Attach supporting documents as specified in agency instructions.	
Add Attachments Delete Attachments View Attachments	

Application	for Federal As	sistance S	F-424							
16. Congress	ional Districts Of:									
* a. Applicant						* b. Pro	gram/Projec	xt		
Attach an addit	ional list of Progran	n/Project Cong	ressional Distri	cts if neede	d.					
				Add Att	tachment	Delete	Attachmen	t Viev	w Attachment	
17. Proposed	Project:									
* a. Start Date:	07/01/2020					*	b. End Date	e : 06/30	/2021	
18. Estimated	Funding (\$):									
* a. Federal			288,000.00]						
* b. Applicant]						
* c. State			16,000.00]						
* d. Local			16,000.00]						
* e. Other]						
* f. Program In	come]						
* g. TOTAL			320,000.00]						
* 19. Is Applic	ation Subject to I	Review By St	ate Under Exe	cutive Ord	ler 12372	Process?				
🗌 a. This ap	plication was mad	le available to	o the State und	ler the Exe	cutive Or	der 12372 Pro	ocess for re	eview on].
b. Program	m is subject to E.C). 12372 but l	has not been s	elected by	the State	for review.				
🔀 c. Program	m is not covered b	y E.O. 12372	2.							
* 20. Is the Ap	plicant Delinquer	nt On Any Fe	deral Debt? (I	f "Yes," pr	ovide exp	lanation in a	ttachment.)		
Yes	No No									
lf "Yes", provi	de explanation an	d attach								
				Add Att	tachment	Delete	Attachmen	t Viev	w Attachment	
 21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001) ^{**} I AGREE ^{**} The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions. 										
Authorized R	epresentative:									
Prefix:	Mr.		* Fir	st Name:	Dennis]
Middle Name:										
* Last Name:	Mock									
Suffix:										
* Title:	ayor									
* Telephone Nu	umber: 706-226-	-1534				Fax Number:				
* Email: kwit	herow@cityofd	alton-ga.c	lon							
* Signature of A	Authorized Represe	ntative:							* Date Signed:	
									SIGN HERE	

Application for State Assistance

Date Submitted:	Date Received By State:						
November 22, 2019							
1. APPLICANT INFORMATION							
A. Name of Airport Dalton Municipal Airport							
B. Name and Address of Applicant:	C. Name and Address of Contact Person						
City of Dalton/Dalton Municipal Airport	If different from 1.B.						
300 West Waugh St. Dalton, GA 30722	Mr. Dennis Mock, Mayor						
Telephone: (70) 226-1534	Telephone: (706) 226-1534						
2. PROJECT INFORMATION							
A. Description of applicant's project: <i>Attach</i> s	ketch if possible.						
New T-Hangar Apron (To Include Grade Work,							
 B. Project justification: Explain why project is needed. If safety related, explain. Attach separate sheet if more space is needed. The proposed action would provide funding to construct a new T-Hangar apron. This project includes the grade work, base, and asphalt. C. Will the project have the potential to enhance economic development in the area? Ves Vo If yes, explain. Attach separate sheet if more space is needed. 							
D. Estimated total cost of project: \$1,270,000	E. Desired start date: As Soon As Possible						
3. CERTIFICATION							
 Plan except as follows: (attach separate sheet) B. CERTIFICATE OF OWNERSHIP – The applicant actual construction of the project is performed and examination by a qualified attorney or title compatibut the applicant holds such property interest exc C. LICENSING COMPLIANCE – The airport shall b criteria. D. PROJECT DESIGN – The applicant will accompliand specifications necessary to accomplish the project. E. PUBLIC USE – All elements of the work in the project. 	ny and that such attorney or title company has determined ept as follows: (attach separate sheet) e maintained in compliance with applicable State licensing sh, except where provided by the State, the required plans ject. oject will be for public use.						
its normal useful life as determined by the State. G. FUNDS – The applicant's share of the costs for the 2.E. above and covenants to disburse funds derived H. APPLICATION AUTHORITY – The applicant agree binding on itself, successors, and assignees and fur grant application.	es that these covenants and grant application shall be ther covenants that it has the legal authority to execute this Mayor						
its normal useful life as determined by the State. G. FUNDS – The applicant's share of the costs for the 2.E. above and covenants to disburse funds derive. H. APPLICATION AUTHORITY – The applicant agree binding on itself, successors, and assignees and fur grant application.	e project will be available as of the start date stated in item d from the State solely in aid of the project. es that these covenants and grant application shall be ther covenants that it has the legal authority to execute this						



Fiscal Year 2021

3b. DESIGN AND CONSTRUCT 8 UNIT T-HANGAR AND 2 CORPORATE HANGARS

The proposed action would provide funding to construct a new t-hangar apron. This project includes the grade work, base, and asphalt.

3b.	Design and Construct 8 Unit T-Hangar and 2 Corporate Hangars	
	Federal Cost	\$ 0
	State Cost	\$ O
	Local Cost	\$ 746,000
	Total Cost	\$ 746,000