



INSTRUCTIONS FOR COMPLETING CAPITAL IMPROVEMENT PLAN DATA SHEET

A Capital Improvement Plan (CIP) Data Sheet must be submitted for each major work item that is requesting Federal assistance over the next 3 years. If required, evidence of State and Regional Clearinghouse coordination should be provided with the CIP Data Sheet. Submittal of this information is necessary to effectively administer the Airport Improvement Program. Collection of information for the airports grant program is addressed under OMB control number 2120-0570. Users requiring assistance or reasonable accommodation may contact the FAA Central Region at 816-329-2600.

HEADER INFORMATION - Include the name of the airport, the LOCID, the local priority of the requested work, the project description, and the desired federal fiscal year (October 1st to September 30th) that you desire the project. Contact the State Airport Planner responsible for your state regarding which federal fiscal years they are working on.

SKETCH - Color-coded sketch that depicts and identifies the scope of the proposed project.

JUSTIFICATION - The justification should be brief and describe the need, objectives, method of accomplishment, and the benefit expected to be obtained from the assistance.

COST ESTIMATE - The estimate of total cost (engineering, administrative, legal, appraisal costs, etc.) including 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.

SPONSOR'S VERIFICATION - The verification that the project is properly planned and is ready to "go" within the 1st year of the three-year CIP program period. Except for equipment acquisition, proposed development and land acquisition must be shown on an approved ALP, have cleared environmental processing, and the land already acquired or have a signed purchase agreement. These requirements must be completed before a project can be considered for funding. For the 2^{nd} and 3^{rd} years of the CIP program, the sponsor should be working towards satisfying these requirements. Date each item verifying that all project requirements are satisfied (check marks are not acceptable).

If requesting Federal assistance for snow removal equipment, include an inventory of existing airport equipment and calculations based on Chapters 4 & 5 of the Airport Winter Safety and Operations, Advisory Circular (AC) 150/5200-30 and the Airport Snow and Ice Control Equipment, AC 150/5220-20 showing the minimum equipment needed, along with the CIP Data Sheet.

If requesting Federal assistance for general aviation apron expansion, include calculations based on Appendix 5 of the Airport Design Advisory Circular 150/5300-13 showing justification for the size of apron needed, along with the CIP Data Sheet.

If requesting Federal assistance for revenue producing facilities (fuel farms, hangers), please contact the State Airport Planner responsible for your state for eligibility requirements. Submit with the CIP Data Sheet; 1) A statement that airside development projects are complete or a financial plan to fund airside needs over the next three years, 2) A statement that approach surfaces are clear of obstructions, and 3) A statement of capacity justification for the project.

CIP DATA SHEET

AIRPORT	LOCID	LOCAL PRIORITY
PROJECT DESCRIPTION		Identify FFY that you desire to construct (FFY: Oct. 1-Sept. 30)

SKETCH:

JUSTIFICATION:

Federal(%) \$	State	\$ Local (%)	\$	Total \$
SPONSOR'S VERIFICATION:	Date	(see instruction sheet or poin	t mouse	e over eac	h date box for more information)
For each and every project		- Date of approved ALP w	ith proj	ject show	n
as applicable		- Date of environmental de	etermir	nation (RC	DD, FONSI, CE), or
		cite CE paragraph # (30	7-312)	in Order	1050.1E
		- Date of land acquisition of	or sign	ed purcha	ase agreement
FAA USE ONLY		- Date of pavement mainte	enance	e program	-
FAA Verification: (initial/date)					ing worksheet (for SRE acquisition)
		 Apron sizing worksheet (,
		Revenue producing faciliti			
		 Date statement submitte 			
		 Date statement submitte 	d for ru	unway ap	proaches are clear of obstructions
SPONSOR'S SIGNATURE:			DAT	E:	

PRINTED NAME: ______ TITLE: _____

PHONE NUMBER:	
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PREAPP NUMBER	GRANT NUMBER	NPIAS CODE	WORK CODE	FAA PRIORITY	FEDERAL \$				

FAA USE ONLY