

FAA Form 5100-144, Bipartisan Infrastructure Law, Airport Terminal and Tower Project Information

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Instructions for FAA Form 5100-144, Bipartisan Infrastructure Law, Airport Terminal and Tower Project Information

This form is provided to assist airports in completing the submission requirements established in the related Notice of Funding Opportunity published in the Federal Register. The FRN requires requests to be submitted via email. This form lets the FAA process requests more quickly based on uniform information responsive to the FRN. Do not include any Personal Identifiable Information in the open text boxes.

Once the form is complete, save a copy of the form electronically to your files for future reference. Next, scroll to the bottom of the form and choose the "**Submit**" button. That creates a new email message with the PDF attached. Or, as a backup method, you can manually email the form to: 9-ARP-BILAirports@faa.gov.

General Airport Information

Airport Name: Enter the official airport name.

LOCID: Enter the airport's FAA location identifier code.

State Code: Choose the appropriate two letter code for the State, U. S. Territory, Independent

Country, or Department of Interior from the drop-down list.

Point of Contact's Name: The Point of Contact (POC) must be the Airport Sponsor.

Point of Contact's Title: Enter the Airport POC's Title.

POC's Phone Number: Enter the Airport POC's phone number and extension number, if any.

Example: (555) 222-4444 ext.158

POC's Email Address: Enter the Airport POC's email address.

Project Overview

Project Type

Choose the project type (Terminal or Tower).

Project Description

In 75 words or less, enter a complete project description.

Target Timeframe for Grant Award and Construction Start

Enter the month and year that grant can be accepted and the project can start.

Project Status

Total (Estimated) Project Cost

Enter most recent cost estimate for the entire project, in whole dollars.

Amount of Funding Requested

Enter amount of funding requested under this program, in whole dollars.

Match Available

Does the Sponsor have matching funds? Choose Yes or No.

Delivery Method

Choose the delivery method (Design/Bid, Design/Build, CM at Risk, Other). If "Other," state the proposed delivery method in the next field.

Bid or Guaranteed Maximum Price (GMP)

Choose whether or not project has been publicly bid. If "No," provide an estimated bid date in the next field.

Phased Project

Choose whether or not the project will be completed over multiple phases. If "Yes," list phase number and total number of phases in the next field.

Do you have a comprehensive financial plan?

Choose Yes or No to indicate if a funding plan for the entire project is currently available.

Is the project on an approved Airport Layout Plan (ALP)?

Choose Yes or No. If "Yes," enter the approval date in the next field.

Is environmental determination complete?

Choose Yes or No. If "Yes," enter the approval date in the next field.

Is airspace approval complete?

Choose Yes, No, or N/A (not applicable). If "Yes," enter the airspace case number in the next field.

Current Enplanements

Enter enplanement number from previous calendar year.

Forecast Enplanements

Based on your most recently approved forecast, provide the enplanement number from the last year of the forecast and provide forecast year.

Existing Square Footage

Provide square footage of existing terminal building or tower.

Proposed Square Footage

Provide anticipated total square footage of terminal building or tower once project is complete.

Is this project phased and/or associated with an approved Bipartisan Infrastructure Law, Airport Improvement Program (AIP) or Passenger Facility Charge (PFC) project?

Choose Yes or No. Choose "Yes" if the project is currently funded by an existing BIL grant, AIP grant or approved under a PFC application. If "Yes," provide project information such as project number (AIP grant number), amount of PFC or AIP funds, approval date of the PFC application, execution date of the grant, etc.

Program Considerations

Check all that apply to your proposed terminal building or tower project. If an item is selected, a narrative must be included describing how the project satisfies the criteria. Address the following areas within character limits defined below.

Terminal and Tower

Increase Capacity and Passenger Access

Check this box if the project will increase capacity and passenger access to the airport. Explain and provide justification in the next field. (Maximum Characters 300)

Replacing Aging Infrastructure

Check this box if the project will replace aging infrastructure that has exceeded its useful life. Explain and provide justification in the next field. (Maximum Characters 300)

Achieves Compliance with Americans with Disabilities Act and Expands Accessibility for Persons with Disabilities

Check this box if the project will expand accessibility for persons with disabilities. Explain and provide justification in the next field. (Maximum Characters 300)

Improves Airport Access for Historically Disadvantaged Populations

Check this box if the project will improve access for Historically Disadvantaged Populations. Explain and provide justification in the next field. (Maximum Characters 300)

Improves Energy Efficiency

Check this box if the project improves energy efficiency for the airport. Explain and provide justification in the next field. (Maximum Characters 300)

Improves Airfield Safety through Terminal or Tower Relocation

Check this box if the project improves airfield safety. Explain and provide justification in the next field. (Maximum Characters 300)

Encourages Actual and Potential Competition

Check this box if the project encourages actual and potential competition. Explain how this objective is met through this project in the next field. (Maximum Characters 300)

Good Paying Jobs

Check this box if the project will create good-paying jobs. Explain and provide justification in the next field. (Maximum Characters 300)

Tower Only

If the project is for a tower, also complete this section of the form.

Project Type. Choose "Airport Owned, FAA Operated" for an airport-owned tower with FAA controllers. Choose "Contract Tower Program" for an airport owned tower in the Federal Contract Tower program.

Siting Study. Has a Siting Study been completed for the Air Traffic Control Tower Project? Choose Yes or No.

Relocating

Check this box if the project will be relocating an existing Air Traffic Control Tower. Explain and provide justification in the next field. (Maximum Characters: 300)

Reconstructing

Check this box if the project will reconstruct a replacement tower in the same location of the existing Air Traffic Control Tower. Explain and provide justification in the next field. (Maximum Characters: 300)

Repairing

Check this box if the project will be a repair of an existing Air Traffic Control Tower. Explain and provide justification in the next field. (Maximum Characters: 300)

Improving Airport Owned Tower

Check this box if the project will add improvements to an existing Air Traffic Control Tower. Explain and provide justification in the next field. (Maximum Characters: 300)



OMB CONTROL NUMBER: 2120-0806 EXPIRATION DATE: 8/31/2022

Bipartisan Infrastructure Law, Airport Terminal and Tower Project Information

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Airport Name: Crossville Memorial Airport - Whitson Field

LOCID: CSV

State Code: TN

Point of Contact's Name: Tim Begley

Point of Contact's Title: Director of Engineering

POC's Phone Number: 931-456-6172

POC's Email Address: timbegley@crossvilletn.gov

Project Overview

Project Type:
☐ Terminal ☐ Tower

Project Description (75 words or less):

The intent of this project is to address:

- •Compliance with ADA standards throughout the building
- Energy improvements including window tinting and HVAC systems
- * Remodel and enlarging the restrooms
- •Expanding the public meeting and/or classrooms
- •Remove pilot lounge and/or map room

Target timeframe dates: Grant Award: 09/01/2022 Construction Start: 11/01/2022

Project Status

Total (Estimated) Project Cost: \$ 500,000					
Amount of Funding	Requested: \$ 47	5,000			
Match Available:	⊠ Yes □ No				
Delivery Method (cl	hoose one):				
☐ Design/Bid	/Bid ☑ Design/Build ☐ CM at Risk ☐ Other:				
Bid or GMP:	☐ Yes No.	If "No," Estimated bid/G	MP date: 10/01/2022		
Phased Project:	☐ Yes No.	If "Yes," Phase: of			
Do you have a comprehensive financial plan? Yes No					
Is the project on an approved ALP? ☐ Yes ☑ No. If "Yes," enter the approval date:					
Is environmental determination complete? ☐ Yes ☒ No. If "Yes," enter the approval date:					
Is airspace approva	•	number:			
Current Enplaneme	ents: 0				
Approved Forecast	ted Enplanements	s: 0	Year:		
Existing Square Fo	otage:	3,616 sq. ft.			
Proposed Square F	ootage:	4,275 sq. ft.			
Is this project phased and/or associated with an approved BIL, AIP or PFC project? Yes No N/A If "Yes," describe:					

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Program Considerations (Terminal and Tower)

•	ou check a box below, you must describe how the project satisfies the criteria. eck all that apply to the proposed project.
\times	Increase Capacity and Passenger Access. Description (Maximum Characters: 300):
	Facility upgrades will provide increased capacity that will improve the passenger experience. Improved facilities will improve the airports competitiveness. Increased use of the airport will increase competitiveness and assist in growth of the local and regional economy. Improvements meet EO 14036.
\boxtimes	Replacing Aging Infrastructure. Description (Maximum Characters: 300):
	The upgrades will replace equipment and systems that have exceeded their useful life. The roof system and the HVAC systems will both be upgraded. Upgrades to the HVAC and roof will improve the overall energy efficiency and decreasing greenhouse gas emissions per EO 13990.
\boxtimes	Achieves Compliance with Americans with Disabilities Act and Expands Accessibility for Persons with Disabilities. Description (Maximum Characters: 300):
	The upgrades will allow for ADA building access throughout the facility including entrances and exits. The men's and women's toilet rooms will be made ADA accessible. The customer counter will be made ADA accessable.
	Improves Airport Access for Historically Disadvantaged Populations. Description (Maximum Characters: 300):
\boxtimes	Improves Energy Efficiency. Description (Maximum Characters: 300):
	The upgrades will replace old & obsolete HVAC systems to improve energy efficiencies & new window tinting will address heat gains into the building. Motion detecting and LED lighting will be installed. Improvements will reduce energy consumption and greenhouse gas emissions per EO 13990.
	Improves Airfield Safety through Terminal or Tower Relocation. Description (Maximum Characters: 300):

☑ Encourages Actual and Potential Competition. Description (Maximum Char.)	acters: 300):
Improved facilities will increase the likelihood of users selecting CSV over other increase use of the facility will improve competition in eastern Tennessee.	nearby facilities.
☐ Good Paying Jobs. Description (Maximum Characters: 300):	
Program Considerations (Tower Only)	
If the project is for a tower, also complete this section of the form.	
Project Type. The project type for this grant application (choose one or both):	
☐ Airport Owned, FAA Operated Tower	
☐ Contract Tower Program	
Siting Study. Has a Siting Study been completed for the Air Traffic Control Tower I	Project?"
If you check a box below, also describe how the project satisfies the criteria. Check all that apply to the proposed project.	
Relocating. Description (Maximum Characters: 300):	
☐ Reconstructing . Description (Maximum Characters: 300):	
Repairing. Description (Maximum Characters: 300):	

	Improving	Airport Owned	Tower.	Description	(Maximum	Characters:	300)):
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Certifications

By electronically signing this document, I hereby certify that we have followed, or will follow, all procurement processes required under 2 CFR 200, including but not limited to:

- Davis Bacon
- Buy American
- Consultant Selection

Name: Tim Begley

Signature:

Digitally signed by Tim Begley
DN: CN=Tim Begley, O=City of Crossville,
OU=Director of Engineering,
E=tim begley@crossvilletn.gov, C=US
Reason, I am approving this document
Location: Crossville City Hall
Date: 2022.03.29

Date (if not in signature): 03/29/2022

Title: Director of Engineering

Submit by Email