By: Administration

Adopted: 02/22/10

CITY OF WASILLA
RESOLUTION SERIAL NO. 10-11

A RESOLUTION OF THE WASILLA CITY COUNCIL AUTHORIZING THE MAYOR TO EXECUTE GRANT AGREEMENTS WITH THE FEDERAL AVIATION ADMINISTRATION AND THE STATE OF ALASKA IN THE AMOUNT OF \$1,350,000

AND \$35,526 RESPECTIVELY FOR WASILLA AIRPORT APRON 1D PHASE 1.

WHEREAS, the Federal Aviation Administration (FAA) recently made the

administration aware a \$1.35 million grant (95 percent) that can be applied to the

Wasilla Airport this year, if the project can be bid and a grant application made by

March 5, 2010; and

WHEREAS, the State of Alaska, Department of Transportation and Public

Facilities, will match 2.5 percent of the project based on the FAA grant application; and

WHEREAS, the City of Wasilla as part of the FY2011 budget will provide

remaining 2.5 percent match; and

WHEREAS, this project is part of the Airport Master Plan to provide additional

apron space for aircraft parking.

NOW, THEREFORE, BE IT RESOLVED, that the Wasilla City Council

authorizes the Mayor to execute grant agreements with the Federal Aviation

Administration and the State of Alaska for the Airport Apron 1D Phase 1 project.

ADOPTED by the Wasilla City Council on February 22, 2010.

ATTEST:

VERNE E. RUPRIGHT, Mayor

[SEAL]

KRISTIE SMITHERS, MMC, City Clerk

VOTE: Hall, Harris, Katkus, Larson and Woodruff in favor. Holler absent.



CITY OF WASILLA LEGISLATION STAFF REPORT

RESOLUTION SERIAL No. 10-11: A RESOLUTION OF THE WASILLA CITY COUNCIL AUTHORIZONG THE MAYOR TO EXECUTE GRANT AGREEMENTS WITH THE FEDERAL AVIATION ADMINISTRATION AND STATE OF ALASKA IN THE AMOUNT OF \$1,350,000 AND \$35,526 RESEPCTIVELY FOR WASILLA AIRPORT APRON 1D PHASE 1.

Agenda of: February 21, 2010 Date: February 9, 2010

Originator: Administration

Route to:	Department	Signature/Date			
	Chief of Police				
Χ	Finance Director	Manh free 2/9/20			
X	Interim Deputy Administrator	Maddel			
X	Public Works Director	200			
Χ	City Clerk	Fromits.			

REVIEWED BY MAYOR VERNE E. RUPRIGHT:_

FISCAL IMPACT: ⊠ yes\$1,421,053 or □ no

Funds Available ⊠ yes ☐ no

Account name/number:

 Apron D Const. FAA/330-4379-437.45-36
 \$1,350,000
 FY2011

 Apron D Const. State/330-4379-437.45-37
 \$35,526
 FY2011

 Apron D Const. City/330-4379-437.45-38
 \$35,527
 FY2011

Attachments: FAA Grant Application

SUMMARY STATEMENT: The FAA recently contacted the administration to make available a \$1.35 million grant for the airport, if the City had an airport project that was bid ready and a grant application can be made by March 5th 2010. The administration has had the Apron 1D project bid ready since last year, waiting on funding. This grant will fund 95 percent of the cost, with the State of Alaska and City of Wasilla providing the necessary 5 percent match. This project will be part of the FY2011 Capital Improvement Program with funds appropriated in the City's capital budget for July 1, 2010 spending.

STAFF RECOMMENDATION: Approve the adoption of Resolution Serial No 10-11 authorizing the Mayor to execute grant agreements with the Federal Aviation Administration and State of Alaska for Apron 1D Phase 1.

APPLICATION FOR 2. D			2. DATE SUE	. DATE SUBMITTED		Applicant Identifier			
FEDERAL ASSISTANCE N			March 5, 20	March 5, 2010		N/A			
1. TYPE OF SUBMISSION			3. DATE RECEIVED BY STATE			State Application I	dentifier		
Application	Pre-application					N/A			
☐ Construction	Cons	truction	4. DATE RECEIVED BY AGENC		Υ	Federal identifier			
□ Non-Construction □ Non-Construction					***************************************				
5. APPLICANT INFORMATI	Construction of the St. AMILINIOIDAL AND DOD'T								
Legal Name:	Organizational Unit: MUNICIPAL AIRPORT								
CITY OF WASILLA				Department:					
Organizational DUNS: 00-218-8548				Division:	~~~	of norman to have	oted on activities	fore involving	
Address: Street: 290 E. HERNING AVENUE				Name and telephone of person to be contacted on matters involving this application (give area code)					
				Prefix:			First Name	: ARCHIE	
City: WASILLA				Middle Name:					
County:				Last Name: GIDDINGS					
State: ALASKA Zip Code: 99654				Suffix:					
Country: United States				Email: AGIDDINGS@CI.WASILLA.AK.US					
6. EMPLOYER IDENTIFICATION NUMBER (EIN):				Phone Number (give	e area code)	Fax Number	er (give area code)	
9 2 - 6 0 1 0 1 4 3				(907) 373 - 901			(907) 373		
8. TYPE OF APPLICATION					LIC	ANT (See back of form	m for Applica	ation Types)	
New Continuation Revision			С						
If Revision, enter appropriate letter(s) in box(es) (See back of form for description of letters.)			Other (Specify)						
Other (specify)				9. NAME OF FEDERAL AGENCY: Federal Aviation Administration					
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NO.						TITLE OF APPLICA		JECT:	
2 0 - 1 0 6				Apron 1D Phase 1 construction to expand apron area to provide more aircraft tie-down spaces and lease lot area.					
TITLE (Name of Program): Airport Improvement Program									
12. AREAS AFFECTED BY PROJECT (Cities, Counties, States, etc.):									
Wasilla, Mat-Su Borough, Alaska								**************************************	
13. PROPOSED PROJECT) r- ··	7 Dot-		101	NAL DISTRICTS OF	:	h Drożosł	
Start Date			g Date	a. Applicant	ı.			b. Project	
7-15-10 15. ESTIMATED FUNDING	*	9-3	30-11	Alaska 1st		N SUBJECT TO RE	VIEW RY	Alaska STATE EXECUTIVE	
	16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?								
a. Federal		\$ 1	,350,000.00	a. YES.				ICATION WAS MADE	
b. Applicant			\$ 35,527.00	1 –		AVAILABLE TO THE STATE EXECUTIVE ORDER 12 PROCESS FOR REVIEW ON:		ACCUTIVE ORDER 12372	
c. State			\$ 35,526. ⁰⁰	1	1	DATE:			
d. Local		\$.00				PROGRAM IS NOT COVERED BY E.O. 12372			
e. Other		\$.00				OR PROGRAM HAS NOT BEEN SELECTED BY STATE			
f. Program Income			17. IS THE A	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?					
g. TOTAL			\$.00	-			K		
	KNOW		I,421,053. 00			", attach an explanat		No RUE AND CORPECT THE	
18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS AF DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.									
a. Authorized Representativ	*		3. A		-				
Prefix			Middle Name: E						
Last Name: RUPRIGHT						Suffix:			
b. Title: M AYOR d. Signature of Authorized Representative:						c. Telephone: 907-373-9055 e. Date Signed:			