

**LNAA Development Checklist**

*Please complete the following and attach a letter of interest with all required documentation. Return to Properties@flyabe.com.*

1. **Project Name:** Click here to enter text.
2. **Date Submitted:** Click here to enter a date.
3. **Description of Project**

* Clearly identify the scope of work to be performed, including proposed location, duration of work, and delineation of permanent and temporary objects and phasing, if planned.

Click here to enter text.

**\*A Business plan must be submitted along with this form.**

1. **Sponsor Information:**

* Applicant Name: Click here to enter text.
* Applicant Address: Click here to enter text.
* Applicant Phone Number: Click here to enter text.
* Applicant Email Address: Click here to enter text.
* Company Name (if applicable): Click here to enter text.
  + Company Officers (must provide documentation): Please list names below.
  + Officer Names: Click here to enter text.

1. **Type of Development:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Apron |  | Runway |
|  | Hangar |  | Taxiway |
|  | Building |  |  |
| ☐ | Other (please specify) Click here to enter text. |  |  |

1. **Development Component:**

|  |  |
| --- | --- |
|  | New Construction |
|  | Expansion |
|  | Rehabilitation |
| ☐ | Other (please specify) Click here to enter text. |

|  |  |
| --- | --- |
|  |  |

1. **Funding:**

* Please provide information regarding all sources of project funding, investor information, etc.

Click here to enter text.

1. **Impact Review:**

* Will the airport need to be closed at any time? If so, how long? Click here to enter text.
* Will a runway need to be closed? If so, how long? Click here to enter text.
* Will apron areas need to be closed? If so, how long? Click here to enter text.
* Will any NOTAMs need to be submitted? Click here to enter text.

1. **Layout/Map of Project: Please attach.**

* Display the area of construction/work limits, haul route, temporary stockpiles, staging areas, equipment parking, fencing, etc.
* Proposed Permanent Structures
* Important points shown that may affect aeronautical operation.

1. **FAA Information:**

* Has the project been reviewed against the FAA approved Airport Layout Plan (ALP) for initial conformity? Click here to enter text.
* Link: <https://www.flyabe.com/airport-authority/documents/approved-documents/masterplan/>

1. **Timeline of Project: Please attach.**

* When does Applicant desire to start construction?
* Dates of any new builds/removal of structures on Airport Property that will take place.
* Delivery Dates of materials, equipment, etc.
* Tentative completion date.

**TO BE COMPLETED BY LNAA**

**Minimum Review Times are as follows\*:**

1. FAA Review \_\_\_\_\_\_\_\_\_\_\_\_
2. Environmental Review \_\_\_\_\_\_\_\_\_\_\_\_
3. Airport Review \_\_\_\_\_\_\_\_\_\_\_\_
4. Municipal/Other Review \_\_\_\_\_\_\_\_\_\_\_\_

**APPLICANT SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PRINT NAME:**  Click here to enter text.

**TITLE:** Click here to enter text.

**DATE:** Click here to enter text.