

# Build Kansas Fund | Fiscal Year 2026 Application Package | Memo



To: Senator Rick Billinger, Chair, Build Kansas Advisory Committee  
Chardae Caine, Kansas Legislative Research Department  
Shauna Wake, Office of the Kansas State Treasurer

From: Jason Fizell, Interim Executive Director, Kansas Infrastructure Hub

RE: Build Kansas Fund Application #2025-145-SCKEDD

Date: July 22, 2025

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Attached, please find an application made to the Build Kansas Fund by the City of Eureka. The application packet includes the following items:

- Coversheet – provides a high-level overview of the application including a unique identification number, page 1 of 19 of the Build Kansas Fund Application Package.
- Build Kansas Fund Application – includes information submitted with the Build Kansas Fund Application, pages 2-8. Page 8 provides the table of funding sources and zip codes served by the project.
- Attachments – FAA Form 5100-100, Application for Federal Assistance, pages 9-19.

## **Project Overview**

The City of Eureka seeks funding from the U.S. Federal Aviation Administration for funding available through the Airport Infrastructure Grants (AIG) program for their Apron Reconstruction – Design Only project which includes rehabilitating existing apron and taxiway pavement to extend surface life, improve safety, and prevent damage from foreign object debris and panel cracking.

This opportunity is a formula IIJA program with a local match requirement of 5% of the total project cost. The entity is requesting \$4,037.00 from the Build Kansas Fund, and is providing a local match of \$213.00. This request has the potential to unlock \$80,750.00 in federal funds, for a total project cost of \$85,000.00.

The deadline was June 30, 2025, and this Build Kansas Fund application was received on June 13, 2025.

## **Build Kansas Fund Steering Committee Recommendation**

The Build Kansas Fund Steering Committee reviewed this application on June 25, 2025 following a successful completeness check. The Steering Committee **RECOMMENDS APPROVAL** of Build Kansas Funding to the Build Kansas Advisory Committee for final advice.

# Build Kansas Fund | Fiscal Year 2026

## Application Package | Coversheet



|  |   |
|--|---|
| Build Kansas Fund Application Number                       | 2025-145-SCKEDD   |
| Applicant Name   | City of Eureka  |
| Application Date Received                                  | 6/13/2025   |
| Project Name   | Apron Reconstruction – Design Only  |
| Project Description  | Rehabilitate existing apron and taxiway pavement to extend surface life, improve safety, and prevent damage from foreign object debris and panel cracking                         |
| Entity Type  | Local Government  |
| Economic Development District (EDD)<br>Planning Commission | South Central KS Economic Development District  |
| Infrastructure Sector(s)                                   | Transportation  |
| BIL Program  | Airport Infrastructure Grant (AIG) Program  |
| BIL Program Type   | Formula   |
| Application Type   | Implementation  |
| BIL Application Deadline                                   | 6/30/2025   |
| Build Kansas Fund Request                                  | \$4,037.00  |
| Technical Assistance Received                              | General Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>   |
|  | BIL Application Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>   |
|  | Build Kansas Fund Application Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>   |
|  | Other (Brief Description):<br>Provided General TA and BKF Application Support.  |
| Application Notes  | Build Kansas Fund contribution of \$4,037.00 will unlock \$80,750.00 in federal BIL funding, with a local cash contribution of \$213.00, for a total project cost of \$85,000.00. |
| <b>Steering Committee<br/>Funding Recommendation</b>       | <b>6/25/2025   Recommend <input checked="" type="checkbox"/> Declined <input type="checkbox"/></b>  |
| <b>Advisory Committee<br/>Funding Recommendation</b>       | <b>7/22/2025   Recommend <input type="checkbox"/> Declined <input type="checkbox"/></b>   |

|       |   |              |
|-------|---|--------------|
| Title | <b>City of Eureka</b>   | 06/13/2025   |
|       | by <b>Traci Grant</b> in <b>Build Kansas Fund Application</b> | id. 50818276 |
|       | tlgrant@garverusa.com   |              |

|                            |            |
|----------------------------|------------|
| <b>Original Submission</b> | 06/18/2025 |
|----------------------------|------------|

|       |     |
|-------|-----|
| Score | n/a |
|-------|-----|

|                               |
|-------------------------------|
| Part 1: Applicant Information |
|-------------------------------|

|  |                |
|--|----------------|
| The name of the entity applying for the Build Kansas Fund: | City of Eureka |
|--|----------------|

|               |                                  |
|---------------|----------------------------------|
| Project Name: | Apron Reconstruction-Design Only |
|---------------|----------------------------------|

|              |                  |
|--------------|------------------|
| Entity type: | Local Government |
|--------------|------------------|

|                    |       |
|--------------------|-------|
| Entity Population: | 2,264 |
|--------------------|-------|

|                         |               |
|-------------------------|---------------|
| Applicant Contact Name: | Steve Coulter |
|-------------------------|---------------|

|                                   |       |
|-----------------------------------|-------|
| Applicant Contact Position/Title: | Mayor |
|-----------------------------------|-------|

|                                     |              |
|-------------------------------------|--------------|
| Applicant Contact Telephone Number: | +16205836140 |
|-------------------------------------|--------------|

|                                  |                               |
|----------------------------------|-------------------------------|
| Applicant Contact Email Address: | scoulter@shelterinsurance.com |
|----------------------------------|-------------------------------|

|                            |                   |
|----------------------------|-------------------|
| Applicant Contact Address: | 309 N. Oak Street |
|----------------------------|-------------------|

|  |  |
|--|--|
| Applicant Contact Address Line 2 (optional): |  |
|--|--|

|                         |        |
|-------------------------|--------|
| Applicant Contact City: | Eureka |
|-------------------------|--------|

|                          |        |
|--------------------------|--------|
| Applicant Contact State: | Kansas |
|--------------------------|--------|

|                             |       |
|-----------------------------|-------|
| Applicant Contact Zip Code: | 67045 |
|-----------------------------|-------|

Is the Project  
Contact the same as  
the Applicant  
Contact?

Yes

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Part 2: Build Kansas Fund - Eligibility Criteria

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Certify that you are  
pursuing an  
Infrastructure  
Investment and Jobs  
Act (IIJA) funding  
opportunity for which  
your entity is eligible:

Yes

Certify that the  
Infrastructure  
Investment and Jobs  
Act (IIJA) funding  
opportunity you are  
pursuing has a  
required non-federal  
match component:

Yes

What is the primary  
county that the  
project will occur in?

Greenwood County

The Build Kansas Fund is intended to support Kansas-based infrastructure projects. Please provide a list of all the zip codes this project will be located in, along with an estimated percent [%] of the project located in that zip code. For example, if seeking funding for road infrastructure, provide a rough percent of the roads expected in each zip code:

[Zip Code Percentage.xlsx](#)

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Part 3: Infrastructure Investment and Jobs Act (IIJA) - Grant Application  
Information Please Note: This information is related to the federal  
Infrastructure Investment and Jobs Act (IIJA) funding opportunity to which  
you will apply. This is NOT information for the Build Kansas Match Fund.

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Please enter the  
Infrastructure  
Investment and Jobs  
Act (IIJA) funding  
opportunity title that  
the entity is applying  
for:

Airport Infrastructure Grants (AIG)

What is the funding  
agency for this  
Infrastructure  
Investment and Jobs  
Act (IIJA) funding  
opportunity?

Federal Aviation Administration

|   |   |
|---|---|
| What is the Assistance Listing Number (ALN) for this Infrastructure Investment and Jobs Act (IIJA) funding opportunity?   | 20.106  |
| What is the federal application due date for this Infrastructure Investment and Jobs Act (IIJA) funding opportunity?  | 6/30/2025   |
| Application Type:   | Implementation                                      |
| What is the federal fiscal year for this Infrastructure Investment and Jobs Act (IIJA) funding opportunity?   | 2025  |
| Enter the amount of funding being applied for, from the Infrastructure Investment and Jobs Act (IIJA) funding opportunity:  | \$80,750.00 for a total project cost of \$85,000.00 |
| Enter the total project cost:   | \$85,000.00   |
| Enter the required non-federal match percentage:  | 5%  |
| <p>Part 4: Build Kansas Fund - Match Application Information Beginning in July 2024 and moving forward, eligible applicants are expected to contribute a portion of the non-Federal match requirement. This contribution can be in the form of cash and/or in-kind contributions. The goal is to demonstrate the applicant's commitment to the project. The contribution should be significant enough relative to the Build Kansas Fund request. For a local public entity, 5% of the non-federal match is a good guideline, but not a requirement. See Build Kansas Fund Program Guidance for exceptions and more information.</p> |   |

Enter the non-federal cash match amount being requested from the Build Kansas Fund: \$4,037.00 for a total project cost of \$85,000.00

Enter the non-federal cash match amount being provided by the eligible applicant, if applicable: \$213.00 for a total project cost of \$85,000.00

Enter the estimated value of the non-federal in-kind match amount being provided by the eligible applicant, if applicable: 0

Expected breakdown of funding sources to support the project: Enter the funding source and projected amount from each source to support this project:

[Kansas+DOT+table\\_V2.xlsx](#)

#### Part 5: Build Kansas Fund - Means Test and Eligible Applicant Match

What other available funding sources that are currently planned to go unused by your entity will be leveraged for this project? Match funds are coming from the local city budgets

Will any American Rescue Plan Act (ARPA) or Coronavirus State & Local Fiscal Recovery Fund monies will be used for the non-federal match? N/A

What other sources of in-kind match will be leveraged for this project? Please list and include the actual or estimated value of each. N/A

What other funding sources (local, federal, or non-federal) will be used for this match?

N/A

Describe your efforts to find other available funding sources for this project:

No other funding has been identified / available to support this project.

#### Part 6: Additional Information

Please upload a draft or final version of the Infrastructure Investment and Jobs Act (IIJA) program grant application associated with this request OR an executive summary providing an overview of the project:

[FAA\\_Form\\_5100-100.pdf](#)

[Sponsor\\_SF\\_424\\_\\_Signed.pdf](#)

Provide any additional information about this project not covered in previous sections of this application (optional):

The funding split for Eureka Apron Design:

**\$85,000.00 Total Project with Combined Grants**

\$85,000.00 *IIJA Funded Portion*

\$0.00 *AIP Entitlement Funded Portion*

#### Part 7: Terms and Conditions

Understanding of Fund Release Requirements:

checked

Understanding of Use of Funds:

checked

Understanding of Reporting Requirements:

checked

Authority to Make Grant Application:

checked

Persons and Titles: The following persons are responsible for making this Build Kansas Fund application.

Caleb  
Coltrane

Position/Title:

PE/Aviation Leader

|                 |                  |
|-----------------|------------------|
| Additional:     | Traci Grant      |
| Position/Title: | Project Engineer |
| Additional:     |                  |
| Position/Title: |                  |
| Additional:     |                  |
| Position/Title: |                  |



| Source   | Amount             | % of Project |
|--|--------------------|--------------|
| Build Kansas Funds (non-federal match)             | \$4,037.00         | 4.75%        |
| Eligible Applicant Cash Match                      | \$213.00           | 0.25%        |
| Eligible Applicant In-Kind Match (estimated value) | \$0.00             | 0%           |
| BIL Federal Funds (applied for)                    | \$80,750.00        | 95.00%       |
| Additional Project Contribution (if applicable)    | \$0.00             | 0%           |
| <b>TOTAL PROJECT COST</b>                          | <b>\$85,000.00</b> | <b>100%</b>  |

**\*Applicant satisfies recommended match contribution of 5% of the required match**

| Zip Code | % of project in zip code |
|----------|--------------------------|
| 67045    | 100%                     |
|          | <b>100% In Kansas</b>    |



U.S. Department  
of Transportation  
**Federal Aviation  
Administration**

## **FAA Form 5100-100, Application for Federal Assistance (Development and Equipment Projects)**

### **Paperwork Reduction Act Burden Statement**

A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a currently valid OMB Control Number. The OMB Control Number for this information collection is 2120-0569. Public reporting for this collection of information is estimated to be approximately 28 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing and reviewing the collection of information. All responses to this collection of information are required under 49 U.S.C. Section 47105 to retain a benefit and to meet the reporting requirements of 2 CFR 200; no assurance of confidentiality is provided. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Aviation Administration, 10101 Hillwood Parkway, Fort Worth, TX 76177-1524.

## **INSTRUCTIONS FOR FORM 5100-100**

### **PART I – Application for Federal Assistance**

Part I of the Application for Federal Assistance consists of a completed Standard Form (SF) 424. The remaining parts of Form 5100-100 (Parts II, III and IV) represent continuation pages that the Sponsor must attach to the associated SF-424 form. The signature of the Sponsor's authorized representative on the SF-424 form represents acceptance of the representations and certifications made within the corresponding FAA 5100-100 form.

### **PART II – Project Approval Information**

This information is necessary for the Federal Aviation Administration to evaluate this request for Federal assistance. Responses do not require an explanation unless explicitly requested by the question.

#### **SECTION A. STATUTORY CONDITIONS**

**Item 1** – Indicate whether the Sponsor maintains an active registration in the Federal System for Award Management (SAM). Pursuant to 2 CFR §25.200(b), a Sponsor must maintain an active registration in the Central Contractor Registration repository (housed within SAM) with current information at the time of the application and during the active period of the Federal award.

**Item 2** – Indicate whether the Sponsor can commence the project within the same fiscal year the grant is made or within 6 months of when the grant is made, whichever is later. Attach explanation for negative responses. This information is considered when allocating discretionary funds. (49 U.S.C. § 47115(d)(2))

## Application for Federal Assistance (Development and Equipment Projects)

### PART II – PROJECT APPROVAL INFORMATION

| Part II - SECTION A   |  |
|---|--|
| The term "Sponsor" refers to the applicant name provided in box 8 of the associated SF-424 form.  |  |
| <b>Item 1.</b><br>Does Sponsor maintain an active registration in the System for Award Management (www.SAM.gov)?  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              |
| <b>Item 2.</b><br>Can Sponsor commence the work identified in the application in the fiscal year the grant is made or within six months after the grant is made, whichever is later?  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| <b>Item 3.</b><br>Are there any foreseeable events that would delay completion of the project? If yes, provide attachment to this form that lists the events.   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A |
| <b>Item 4.</b><br>Will the project(s) covered by this request have impacts or effects on the environment that require mitigating measures? If yes, attach a summary listing of mitigating measures to this application and identify the name and date of the environmental document(s). | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A |
| <b>Item 5.</b><br>Is the project covered by this request included in an approved Passenger Facility Charge (PFC) application or other Federal assistance program? If yes, please identify other funding sources by checking all applicable boxes.                                       |  |
| <input type="checkbox"/> The project is included in an <i>approved</i> PFC application.<br>If included in an approved PFC application,<br>does the application <i>only</i> address AIP matching share? <input type="checkbox"/> Yes <input type="checkbox"/> No                         |  |
| <input type="checkbox"/> The project is included in another Federal Assistance program. Its CFDA number is below.   |  |
| <b>Item 6.</b><br>Will the requested Federal assistance include Sponsor indirect costs as described in 2 CFR Appendix VII to Part 200, States and Local Government and Indian Tribe Indirect Cost Proposals?  |  |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A  |  |
| If the request for Federal assistance includes a claim for allowable indirect costs, select the applicable indirect cost rate the Sponsor proposes to apply:  |  |
| <input type="checkbox"/> De Minimis rate of 10% as permitted by 2 CFR § 200.414.  |  |
| <input type="checkbox"/> Negotiated Rate equal to _____ % as approved by _____ (the Cognizant Agency)<br>on _____ (Date) (2 CFR part 200, appendix VII).  |  |
| <i>Note: Refer to the instructions for limitations of application associated with claiming Sponsor indirect costs.</i>  |  |

**PART II - SECTION B**

**Certification Regarding Lobbying**

The declarations made on this page are under the signature of the authorized representative as identified in box 21 of form SF-424, to which this form is attached. The term "Sponsor" refers to the applicant name provided in box 8 of the associated SF-424 form.

The Authorized Representative certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the Sponsor, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the Authorized Representative shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

(3) The Authorized Representative shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

**PART II – SECTION C**

The Sponsor hereby represents and certifies as follows:

**1. Compatible Land Use** – The Sponsor has taken the following actions to assure compatible usage of land adjacent to or in the vicinity of the airport:

The Sponsor has developed a Master Plan for the airport and holds zoning rights over the area.

**2. Defaults** – The Sponsor is not in default on any obligation to the United States or any agency of the United States Government relative to the development, operation, or maintenance of any airport, except as stated herewith:

The City of Eureka is not in default on any obligations to the Federal Government

**3. Possible Disabilities** – There are no facts or circumstances (including the existence of effective or proposed leases, use agreements or other legal instruments affecting use of the Airport or the existence of pending litigation or other legal proceedings) which in reasonable probability might make it impossible for the Sponsor to carry out and complete the Project or carry out the provisions of the Grant Assurances, either by limiting its legal or financial ability or otherwise, except as follows:

There are no known circumstances that would make it impossible for the City of Eureka to complete the project or meet the provisions of Grant assurances.

**4. Consistency with Local Plans** – The project is reasonably consistent with plans existing at the time of submission of this application) of public agencies that are authorized by the State in which the project is located to plan for the development of the area surrounding the airport.

Correct.

**5. Consideration of Local Interest** – It has given fair consideration to the interest of communities in or near where the project may be located.

Correct.

**6. Consultation with Users** – In making a decision to undertake an airport development project under Title 49, United States Code, it has consulted with airport users that will potentially be affected by the project (§ 47105(a)(2)).

Correct.

**7. Public Hearings** – In projects involving the location of an airport, an airport runway or a major runway extension, it has afforded the opportunity for public hearings for the purpose of considering the economic, social, and environmental effects of the airport or runway location and its consistency with goals and objectives of such planning as has been carried out by the community and it shall, when requested by the Secretary, submit a copy of the transcript of such hearings to the Secretary. Further, for such projects, it has on its management board either voting representation from the communities where the project is located or has advised the communities that they have the right to petition the Secretary concerning a proposed project.

Not Applicable.

**8. Air and Water Quality Standards** – In projects involving airport location, a major runway extension, or runway location it will provide for the Governor of the state in which the project is located to certify in writing to the Secretary that the project will be located, designed, constructed, and operated so as to comply with applicable and air and water quality standards. In any case where such standards have not been approved and where applicable air and water quality standards have been promulgated by the Administrator of the Environmental Protection Agency, certification shall be obtained from such Administrator. Notice of certification or refusal to certify shall be provided within sixty days after the project application has been received by the Secretary.

Not Applicable.

**PART II – SECTION C (Continued)**

**9. Exclusive Rights** – There is no grant of an exclusive right for the conduct of any aeronautical activity at any airport owned or controlled by the Sponsor except as follows:

No exclusive rights for aeronautical activity have been granted.

**10. Land** – (a) The sponsor holds the following property interest in the following areas of land, which are to be developed or used as part of or in connection with the Airport subject to the following exceptions, encumbrances, and adverse interests, all of which areas are identified on the aforementioned property map designated as Exhibit “A”. [1]

Correct. The land use for this project is shown in the Exhibit A property map dated 12/7/2021.

The Sponsor further certifies that the above is based on a title examination by a qualified attorney or title company and that such attorney or title company has determined that the Sponsor holds the above property interests.

(b) The Sponsor will acquire within a reasonable time, but in any event prior to the start of any construction work under the Project, the following property interest in the following areas of land on which such construction work is to be performed, all of which areas are identified on the aforementioned property map designated as Exhibit “A”. [1]

Not Applicable.

(c) The Sponsor will acquire within a reasonable time, and if feasible prior to the completion of all construction work under the Project, the following property interest in the following areas of land which are to be developed or used as part of or in connection with the Airport as it will be upon completion of the Project, all of which areas are identified on the aforementioned property map designated as Exhibit “A”. [1]

Not Applicable.

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<sup>1</sup> State the character of property interest in each area and list and identify for each all exceptions, encumbrances, and adverse interests of every kind and nature, including liens, easements, leases, etc. The separate areas of land need only be identified here by the area numbers shown on the property map.

## PART III – BUDGET INFORMATION – CONSTRUCTION

| SECTION A – GENERAL              |                     |
|----------------------------------|---------------------|
| 1. Assistance Listing Number:    | 20.106              |
| 2. Functional or Other Breakout: | 3-20-0021-0010-2025 |

| SECTION B – CALCULATION OF FEDERAL GRANT                       |  |   |                       |
|--|--|---|-----------------------|
| Cost Classification  | Latest Approved Amount<br>(Use only for revisions) | Adjustment<br>+ or (-) Amount<br>(Use only for revisions) | Total Amount Required |
| 1. Administration expense                                      |  |   |                       |
| 2. Preliminary expense   |  |   |                       |
| 3. Land, structures, right-of-way                              |  |   |                       |
| 4. Architectural engineering basic fees                        |  |   | 85,000                |
| 5. Other Architectural engineering fees                        |  |   |                       |
| 6. Project inspection fees                                     |  |   |                       |
| 7. Land development  |  |   |                       |
| 8. Relocation Expenses   |  |   |                       |
| 9. Relocation payments to Individuals and Businesses           |  |   |                       |
| 10. Demolition and removal                                     |  |   |                       |
| 11. Construction and project improvement                       |  |   |                       |
| 12. Equipment  |  |   |                       |
| 13. Miscellaneous  |  |   |                       |
| 14. <b>Subtotal</b> (Lines 1 through 13)                       |  |   | \$ 85,000             |
| 15. Estimated Income (if applicable)                           |  |   |                       |
| 16. Net Project Amount (Line 14 minus 15)                      |  |   | 85,000                |
| 17. <b>Less:</b> Ineligible Exclusions (Section C, line 23 g.) |  |   |                       |
| 18. <b>Subtotal</b> (Lines 16 through 17)                      |  |   | \$ 85,000             |
| 19. Federal Share requested of Line 18                         |  |   | 80,750                |
| 20. Grantee share  |  |   | 4,250                 |
| 21. Other shares   |  |   |                       |
| 22. <b>TOTAL PROJECT</b> (Lines 19, 20 & 21)                   |  |   | \$ 85,000             |

| SECTION C – EXCLUSIONS                                     |                                     |
|--|-------------------------------------|
| 23. Classification (Description of non-participating work) | Amount Ineligible for Participation |
| a.   |                                     |
| b.   |                                     |
| c.   |                                     |
| d.   |                                     |
| e.   |                                     |
| f.   |                                     |
| g. <b>Total</b>  |                                     |

| SECTION D – PROPOSED METHOD OF FINANCING NON-FEDERAL SHARE |                 |
|--|-----------------|
| 24. Grantee Share – Fund Categories                        | Amount          |
| a. Securities  |                 |
| b. Mortgages   |                 |
| c. Appropriations (by Applicant)                           | 4,250           |
| d. Bonds   |                 |
| e. Tax Levies  |                 |
| f. Non-Cash  |                 |
| g. Other (Explain):  |                 |
| h. <b>TOTAL</b> - Grantee share                            | \$ 4,250        |
| 25. Other Shares   | Amount          |
| a. State   |                 |
| b. Other   |                 |
| c. <b>TOTAL</b> - Other Shares                             |                 |
| <b>26. TOTAL NON-FEDERAL FINANCING</b>                     | <b>\$ 4,250</b> |

| SECTION E – REMARKS<br>(Attach sheets if additional space is required) |
|--|
|  |



**PART IV – PROGRAM NARRATIVE**  
(Suggested Format)

**PROJECT:** Apron Rehabilitation (Design Only)

**AIRPORT:** City of Eureka

**1. Objective:**

Rehabilitate the existing apron concrete pavement.

**2. Benefits Anticipated:**

Increase the lifespan of the apron pavement.  
Reduce FOD and prevent panel cracking.

**3. Approach:** (See approved Scope of Work in Final Application)

Replace all concrete on the apron. On the taxiway, replace cracked and spalling concrete panels, saw new joints to reduce panel sizes, install new tiedown anchors.

**4. Geographic Location:**

Lt William M. Milliken Airport, City of Eureka, Greenwood County, Kansas

**5. If Applicable, Provide Additional Information:**

**6. Sponsor's Representative:** (include address & telephone number)

Mr. Steve Coulter, Mayor                      Phone #: 620-583-6140  
309 N. Oak Street  
Eureka, KS 67045

## Application for Federal Assistance SF-424

\*1. Type of Submission:

- ☐ Preapplication  
☒ Application  
☐ Changed/Corrected Application

\*2. Type of Application

- ☒ New  
☐ Continuation  
☐ Revision

\* If Revision, select appropriate letter(s):

\* Other (Specify)

\*3. Date Received:

4. Applicant Identifier:

5a. Federal Entity Identifier:  
3-20-0021-0010-2025

\*5b. Federal Award Identifier:

### State Use Only:

6. Date Received by State:

7. State Application Identifier:

### 8. APPLICANT INFORMATION:

\*a. Legal Name: City of Eureka

\*b. Employer/Taxpayer Identification Number (EIN/TIN):  
48-6035982

\*c. UEI:

### d. Address:

\*Street 1: 309 N. Oak Street  
Street 2:  
\*City: Eureka  
County/Parish:  
\*State: KS  
\*Province:  
\*Country: USA: United States  
\*Zip / Postal Code 67045

### e. Organizational Unit:

Department Name:

Division Name:

### f. Name and contact information of person to be contacted on matters involving this application:

Prefix: Mr. \*First Name: Steve  
Middle Name:  
\*Last Name: Coulter  
Suffix:

Title: Mayor

Organizational Affiliation:

\*Telephone Number: 620-583-6140

Fax Number:

\*Email: scoulter@shelterinsurance.com

**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:

Pick an applicant type

Type of Applicant 3: Select Applicant Type:

Pick an applicant type

\*Other (Specify)

**\*10. Name of Federal Agency:**

Federal Aviation Administration

**11. Catalog of Federal Domestic Assistance Number:**

20.106

CFDA Title:

Airport Improvem

**\*12. Funding Opportunity Number:**

3-20-0021-0010-2025

\*Title:

Apron Rehabilitation (Design Only)

**13. Competition Identification Number:**

Title:

**14. Areas Affected by Project (Cities, Counties, States, etc.):**

**\*15. Descriptive Title of Applicant's Project:**

Design only grant for rehabilitation of existing concrete apron and taxiway.

- Replace all concrete on apron
- Replace panels and joint sealant on taxiway

**Attach supporting documents as specified in agency instructions.**

**Application for Federal Assistance SF-424****16. Congressional Districts Of:**

\*a. Applicant: KS-004

\*b. Program/Project: KS-004

Attach an additional list of Program/Project Congressional Districts if needed.

**17. Proposed Project:**

\*a. Start Date: 08/01/2025

\*b. End Date: 06/30/2026

**18. Estimated Funding (\$):**

|                    |           |
|--------------------|-----------|
| *a. Federal        | \$ 80,750 |
| *b. Applicant      | \$ 0      |
| *c. State          | \$ 0      |
| *d. Local          | \$ 4,250  |
| *e. Other          | \$ 0      |
| *f. Program Income | \$ 0      |
| *g. TOTAL          | \$ 85,000 |

**\*19. Is Application Subject to Review By State Under Executive Order 12372 Process?**

- ☐ a. This application was made available to the State under the Executive Order 12372 Process for review on \_\_\_\_\_.
- ☐ b. Program is subject to E.O. 12372 but has not been selected by the State for review.
- ☒ c. Program is not covered by E.O. 12372.

**\*20. Is the Applicant Delinquent On Any Federal Debt?**☐ Yes ☒ No

If "Yes", explain:

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 Representative:**

Prefix: Mr. \*First Name: Steve

Middle Name: \_\_\_\_\_

\*Last Name: Coulter

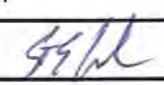
Suffix: \_\_\_\_\_

\*Title: Mayor

\*Telephone Number: 620-583-6140

Fax Number:

\* Email: scoulter@shelterinsurance.com

\*Signature of Authorized Representative: 

\*Date Signed: 5-28-2025