

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 #2025-156-GPDI

Date: July 22, 2025

Attached, please find an application made to the Build Kansas Fund by the City of Great Bend. 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 and Application for Federal Assistance/SF-424 Form, pages 9-19.

Project Overview

The City of Great Bend seeks funding from the U.S. Federal Aviation Administration for funding available through the Airport Infrastructure Grants (AIG) program for their Runway 17-35 Rehabilitation project which includes rehabilitating Runway 17-35 and the north end of Taxiway A by sealing cracks, applying asphalt seal coat, and installing new pavement markings to extend pavement life.

This opportunity is a formula IIJA program with a local match requirement of 5% of the total project cost. The entity is requesting \$15,260.00 from the Build Kansas Fund, and is providing a local match of \$804.00. This request has the potential to unlock \$305,200.00 in federal funds, for a total project cost of \$321,264.00.

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	2025-156-GPDI
Applicant Name	City of Great Bend
Application Date Received	6/13/2025
Project Name	Runway 17-35 Rehabilitation
Project Description	Rehabilitate Runway 17-35 and the north end of Taxiway A by sealing cracks, applying asphalt seal coat, and installing new pavement markings to extend pavement life
Entity Type	Local Government
Economic Development District (EDD) Planning Commission	Great Plains Development, Inc.
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	\$15,260.00
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): Provided General TA and BKF Application Support.
Application Notes	Build Kansas Fund contribution of \$15,260.00 will unlock \$305,200.00 in federal BIL funding, with a local cash contribution of \$804.00, for a total project cost of \$321,264.00.
Steering Committee Funding Recommendation	6/25/2025 Recommend <input checked="" type="checkbox"/> Declined <input type="checkbox"/>
Advisory Committee Funding Recommendation	7/22/2025 Recommend <input type="checkbox"/> Declined <input type="checkbox"/>

Title	City of Great Bend	06/13/2025
	by Traci Grant in Build Kansas Fund Application	id. 50818011
	tlgrant@garverusa.com	

Original Submission	06/19/2025
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Score	n/a
Part 1: Applicant Information	
The name of the entity applying for the Build Kansas Fund:	City of Great Bend
Project Name:	Runway 17-35 Rehabilitation
Entity type:	Local Government
Entity Population:	14,372
Applicant Contact Name:	Martin Miller
Applicant Contact Position/Title:	Airport Manager
Applicant Contact Telephone Number:	+16207934168
Applicant Contact Email Address:	greatbendairport@ruraltel.net
Applicant Contact Address:	Great Bend Municipal Airport
Applicant Contact Address Line 2 (optional):	P.O. Box 1168
Applicant Contact City:	Great Bend
Applicant Contact State:	Kansas
Applicant Contact Zip Code:	67530

Is the Project
Contact the same as
the Applicant
Contact?

Yes

Part 2: Build Kansas Fund - Eligibility Criteria

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?

Barton 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](#)

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.

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

Infrastructure Investment and Jobs Act - 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:	\$305,200.00 for a total project cost of \$321,264.00
Enter the total project cost:	\$321,264.00
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: \$15,260.00 for a total project cost of \$321,264.00

Enter the non-federal cash match amount being provided by the eligible applicant, if applicable: \$804.00 for a total project cost of \$321,264.00

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 or is 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.pdf](#)

Provide any additional information about this project not covered in previous sections of this application (optional):	<p>The funding split for Great Bend Runway Rehab:</p> <p><u>\$642,515.00 Total Project with Combined Grants</u></p> <p>\$321,264.00 <i>IIJA Funded Portion (95% FAA Share= \$305,200)</i></p> <p>\$172,988.00 <i>AIP Entitlement Funded Portion</i></p> <p>\$148,263.00 <i>KDOT KAIP Funded Portion</i></p>
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Part 7: Terms and Conditions

Understanding of Fund Release Requirements:	checked
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Understanding of Use of Funds:	checked
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Understanding of Reporting Requirements:	checked
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Authority to Make Grant Application:	checked
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Persons and Titles: The following persons are responsible for making this Build Kansas Fund application.	Caleb Coltrane
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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)	\$15,260.00	4.75%
Eligible Applicant Cash Match	\$804.00	0.25%
Eligible Applicant In-Kind Match (estimated value)	\$0.00	0%
BIL Federal Funds (applied for)	\$305,200.00	95.00%
Additional Project Contribution (if applicable)	\$0.00	0%
TOTAL PROJECT COST	\$321,264.00	100%

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

Zip Code	% of project in zip code
67530	100%
	100% In Kansas



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.	
Item 1. Does Sponsor maintain an active registration in the System for Award Management (www.SAM.gov)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Item 2. 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
Item 3. 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
Item 4. 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
Item 5. 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. <div style="margin-top: 10px;"> <input type="checkbox"/> The project is included in an <i>approved</i> PFC application. If included in an approved PFC application, does the application <i>only</i> address AIP matching share? <input type="checkbox"/> Yes <input type="checkbox"/> No </div> <div style="margin-top: 10px;"> <input type="checkbox"/> The project is included in another Federal Assistance program. Its CFDA number is below. </div>	
Item 6. 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? <div style="text-align: right; margin-right: 50px;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A </div> <p>If the request for Federal assistance includes a claim for allowable indirect costs, select the applicable indirect cost rate the Sponsor proposes to apply:</p> <div style="margin-top: 10px;"> <input type="checkbox"/> De Minimis rate of 10% as permitted by 2 CFR § 200.414. </div> <div style="margin-top: 10px;"> <input type="checkbox"/> Negotiated Rate equal to % as approved by (the Cognizant Agency) on (Date) (2 CFR part 200, appendix VII). </div> <p><i>Note: Refer to the instructions for limitations of application associated with claiming Sponsor indirect costs.</i></p>	

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 Great Bend 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 Great Bend 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 on the Exhibit A property map in the ALP dated 3/20/2024.

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.

¹ 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:	3-20-0027-032-2025 & 3-20-0027-033-2025

SECTION B – CALCULATION OF FEDERAL GRANT			
Cost Classification	Latest Approved Amount (Use only for revisions)	Adjustment + or (-) Amount (Use only for revisions)	Total Amount Required
1. Administration expense			\$ 5,000
2. Preliminary expense			
3. Land, structures, right-of-way			
4. Architectural engineering basic fees			79,100
5. Other Architectural engineering fees			
6. Project inspection fees			65,000
7. Land development			
8. Relocation Expenses			
9. Relocation payments to Individuals and Businesses			
10. Demolition and removal			
11. Construction and project improvement			493,415
12. Equipment			
13. Miscellaneous			
14. Subtotal (Lines 1 through 13)			\$ 642,515
15. Estimated Income (if applicable)			
16. Net Project Amount (Line 14 minus 15)			642,515
17. Less: Ineligible Exclusions (Section C, line 23 g.)			148,264
18. Subtotal (Lines 16 through 17)			\$ 494,252
19. Federal Share requested of Line 18			469,538
20. Grantee share			172,977
21. Other shares			
22. TOTAL PROJECT (Lines 19, 20 & 21)			\$ 642,515

SECTION C – EXCLUSIONS	
23. Classification (Description of non-participating work)	Amount Ineligible for Participation
a. North 2,352' of Runway 17-35 and parallel taxiway	\$ 148,264
b.	
c.	
d.	
e.	
f.	
g. Total	\$ 148,264

SECTION D – PROPOSED METHOD OF FINANCING NON-FEDERAL SHARE	
24. Grantee Share – Fund Categories	Amount
a. Securities	
b. Mortgages	
c. Appropriations (by Applicant)	172,977
d. Bonds	
e. Tax Levies	
f. Non-Cash	
g. Other (Explain):	
h. TOTAL - Grantee share	\$ 172,977
25. Other Shares	Amount
a. State	
b. Other	
c. TOTAL - Other Shares	\$ 172,977
26. TOTAL NON-FEDERAL FINANCING	

SECTION E – REMARKS (Attach sheets if additional space is required)
<p>In order to utilize expiring funds efficiently, the following split is proposed for FAA Funding</p> <ul style="list-style-type: none"> - AIP Entitlements = 35% (\$164,338) - IIJA Funds = 65% (\$305,200)

PART IV – PROGRAM NARRATIVE
(Suggested Format)

PROJECT: Runway 17-35 and Partial Taxiway A Rehabilitation

AIRPORT: City of Great Bend

1. Objective:

Rehabilitate existing Runway 17-35 and the north end of Taxiway A pavement

2. Benefits Anticipated:

Increases lifespan of existing pavement.
Less chances of FOD on runway and taxiway.

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

Seal cracks, install approved asphalt seal coat, install new runway and taxiway pavement markings

4. Geographic Location:

Great Bend Municipal Airport, City of Great Bend, Barton County, Kansas

5. If Applicable, Provide Additional Information:

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

Mr. Martin Miller, Airport Manager Phone #: 620-793-4168
9047 6th Street
Great Bend, KS 67530

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:
3-20-0027-032-2025

*5b. Federal Award Identifier:

State Use Only:

6. Date Received by State:

7. State Application Identifier:

8. APPLICANT INFORMATION:

*a. Legal Name: City of Great Bend

*b. Employer/Taxpayer Identification Number (EIN/TIN):
48-6012082

*c. UEI:
JWW9DGAHVW85

d. Address:

*Street 1: 1209 Williams Street
Street 2:
*City: Great Bend
County/Parish:
*State: KS
*Province:
*Country: USA: United States
*Zip / Postal Code

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: Martin
Middle Name:
*Last Name: Miller
Suffix:

Title: Airport Manager

Organizational Affiliation:

*Telephone Number: 620-793-4168

Fax Number:

*Email: greatbendairport@ruraltel.net

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 Improvement Program

***12. Funding Opportunity Number:**

3-20-0027-032-2025

*Title:

Runway 17-35 and Partial Taxiway A Rehabilitation

13. Competition Identification Number:

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):***15. Descriptive Title of Applicant's Project:**

Rehabilitation of the existing asphalt pavement for Runway 17-35 and the north end of Taxiway A.

The north 2,352' of the runway and the taxiway is ineligible and will be funded through local/state funds.

Attach supporting documents as specified in agency instructions.

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

*a. Applicant: KS-001

*b. Program/Project: KS-001

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

17. Proposed Project:

*a. Start Date: 08/01/2025

*b. End Date: 12/31/2025

18. Estimated Funding (\$):

*a. Federal	\$ 469,538
*b. Applicant	\$ 0
*c. State	
*d. Local	\$ 172,977
*e. Other	\$ 0
*f. Program Income	\$ 0
*g. TOTAL	\$ 642,515

***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: Martin

Middle Name: _____

*Last Name: Miller

Suffix: _____

*Title: Airport Manager

*Telephone Number: (620) 793-4168

Fax Number:

* Email: greatbendairport@ruraltel.net

*Signature of Authorized Representative:

*Date Signed: