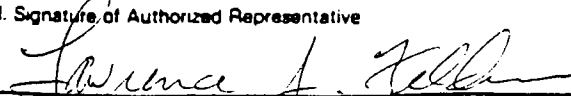


# APPLICATION FOR FEDERAL ASSISTANCE

<b>1. TYPE OF SUBMISSION:</b> Application <input checked="" type="checkbox"/> Construction <input type="checkbox"/> Non-Construction Preapplication <input type="checkbox"/> Construction <input type="checkbox"/> Non-Construction		<b>2. DATE SUBMITTED</b> _____	Applic Identifier _____														
		<b>3. DATE RECEIVED BY STATE</b> _____	State Ac tion Identifier _____														
		<b>4. DATE RECEIVED BY FEDERAL AGENCY</b> _____	Federal Identifier AIP 3-06-0182-03														
<b>5. APPLICANT INFORMATION</b>																	
<b>Legal Name:</b> County of Santa Clara		<b>Organizational Unit:</b> Transportation Agency (Palo Alto Airport)															
<b>Address (give city, county, state, and zip code):</b> 2500 Cunningham Avenue San Jose, California 95148 (Santa Clara County)		<b>Name and telephone number of the person to be contacted on matters involving this application (give area code):</b> Larry Feldman (408) 929-1060															
<b>6. EMPLOYER IDENTIFICATION NUMBER (EIN):</b> 9 4 - 6 0 0 0 5 3 3		<b>7. TYPE OF APPLICANT: (enter appropriate letter in box)</b> <input checked="" type="checkbox"/> B A. State B. County C. Municipal D. Township E. Interstate F. Intermunicipal G. Special District H. Independent School Dist. I. State Controlled Institution of Higher Learning J. Private University K. Indian Tribe L. Individual M. Profit Organization N. Other (Specify): _____															
<b>2. TYPE OF APPLICATION:</b> <input checked="" type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision If Revision, enter appropriate letter(s) in box(es): <input type="checkbox"/> <input type="checkbox"/> A. Increase Award    B. Decrease Award    C. Increase Duration D. Decrease Duration    Other (specify): _____		<b>9. NAME OF FEDERAL AGENCY:</b> Federal Aviation Administration															
<b>10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER:</b> 2 0 - 1 0 6 <b>TITLE:</b> Airport Improvement Program		<b>11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:</b> Reconstruct/overlay apron (approximately 700,000 S.F.), including tie-down anchors and marking.															
<b>12. AREAS AFFECTED BY PROJECT (cities, counties, states, etc.):</b> City of Palo Alto, northern Santa Clara County, and southern San Mateo County, California																	
<b>13. PROPOSED PROJECT:</b> Start Date: June 1995    Ending Date: Oct. 1995		<b>14. CONGRESSIONAL DISTRICTS OF:</b> a. Applicant: 13th    b. Project: 12th															
<b>15. ESTIMATED FUNDING:</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>a. Federal</td> <td>\$ 1,000,000.00</td> </tr> <tr> <td>b. Applicant</td> <td>\$ 111,111.00</td> </tr> <tr> <td>c. State</td> <td>\$ .00</td> </tr> <tr> <td>d. Local</td> <td>\$ .00</td> </tr> <tr> <td>e. Other</td> <td>\$ .00</td> </tr> <tr> <td>f. Program Income</td> <td>\$ .00</td> </tr> <tr> <td>g. TOTAL</td> <td>\$ 1,111,111.00</td> </tr> </table>		a. Federal	\$ 1,000,000.00	b. Applicant	\$ 111,111.00	c. State	\$ .00	d. Local	\$ .00	e. Other	\$ .00	f. Program Income	\$ .00	g. TOTAL	\$ 1,111,111.00	<b>16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?</b> a. YES THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON: DATE _____ b. NO. <input checked="" type="checkbox"/> PROGRAM IS NOT COVERED BY E.O. 12372 <input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW	
a. Federal	\$ 1,000,000.00																
b. Applicant	\$ 111,111.00																
c. State	\$ .00																
d. Local	\$ .00																
e. Other	\$ .00																
f. Program Income	\$ .00																
g. TOTAL	\$ 1,111,111.00																
		<b>17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?</b> <input type="checkbox"/> Yes * If "Yes," attach an explanation. <input checked="" type="checkbox"/> No															
<b>18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED</b>																	
<b>a. Typed Name of Authorized Representative</b> Larry Feldman		<b>b. Title</b> Acting Director of Aviation	<b>c. Telephone number</b> (408) 929-1060														
<b>d. Signature of Authorized Representative</b> 		<b>e. Date Signed</b> 9/14/94															

PART II

PROJECT APPROVAL INFORMATION SECTION A

Item 1.

Does this assistance request require State, local, regional, or other priority rating?  Yes  No

Name of Governing Body ABAG/MTC/RAPC  
Priority Rating PAO CIP projects advanced by RAPC from highest priority ranking to "Preapplication" designation. Reference Grant Application for AIP 3-06-0182-02

Item 2.

Does this assistance request require State, or local advisory, educational or health clearances?  Yes  No (Attach Documentation)

Name of Agency or Board \_\_\_\_\_

Item 3.

Does this assistance request require clearinghouse review in accordance with OMB Circular A-95? (Attach Comments)  Yes  No

Item 4.

Does this assistance request require State, local, regional or other planning approval?  Yes  No

Name of Approving Agency \_\_\_\_\_  
Date \_\_\_\_\_

Item 5.

Is the proposed project covered by an approved comprehensive plan?  Yes  No

Check one: State   
Local   
Regional   
Location of plan Sacramento/San Jose/Oakland (RAPC)

Item 6.

Will the assistance requested serve a Federal installation?  Yes  No

Name of Federal Installation \_\_\_\_\_  
Federal Population benefiting from Project \_\_\_\_\_

Item 7.

Will the assistance requested be on Federal land or installation?  Yes  No

Name of Federal Installation \_\_\_\_\_  
Location of Federal Land \_\_\_\_\_  
Percent of Project \_\_\_\_\_

Item 8.

Will the assistance requested have an impact or effect on the environment?  Yes  No

See instruction for additional information to be provided.

Item 9.

Will the assistance requested cause the displacement of individuals families, businesses, or farms?  Yes  No

Number of:  
Individuals \_\_\_\_\_  
Families \_\_\_\_\_  
Businesses \_\_\_\_\_  
Farms \_\_\_\_\_

Item 10.

Is there other related Federal assistance on this project previous, pending, or anticipated?  Yes  No

See instructions for additional information to be provided.

## 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 (County of Santa Clara), through the Airport Land Use Commission (ALUC) of the County of Santa Clara, has participated in the preparation of a "Land Use Plan for Areas Surrounding Santa Clara County Airports" (including Palo Alto Airport). The Land Use Plan was adopted by the ALUC September 1992. The Sponsor, through a consultant, has also completed an FAR Part 150 Study for Palo Alto Airport. The FAA's review of this study has determined the Palo Alto Airport is in compliance with noise standards. The Part 150 study shows no present or future incompatible land uses within the 65 CNEI.

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:

None

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 Part V of this Application, either by limiting its legal or financial ability or otherwise, except as follows:

None

4. 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":

Palo Alto Airport is owned by the City of Palo Alto and is leased by the County of Santa Clara for the express purpose of managing, operating, and maintaining Palo Alto Airport. This 50-year lease was executed by the County March 27, 1967 and by the City of April 5, 1967; the lease expiration date is April 4, 2017.

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\*State 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 II - SECTION C (Continued)

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":

N/A

(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":

N/A

5. 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:

None

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*\*State 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. Federal Domestic Assistance Catalog No. . . . . 20.106

2. Functional or Other Breakout . . . . .

SECTION B - CALCULATION OF FEDERAL GRANT

Cost Classification	Use only for revisions		Total Amount Required
	Latest Approved Amount	Adjustment + or (-)	
1. Administration expense	\$	\$	\$ 10,000.00
2. Preliminary expense			20,000.00
3. Land, structures, right-of-way			-0-
4. Architectural engineering basic fees			81,000.00
5. Other architectural engineering fees			-0-
6. Project inspection fees			111,111.00
7. Land development			-0-
8. Relocation Expenses			-0-
9. Relocation payments to Individuals and Businesses			-0-
10. Demolition and removal			-0-
11. Construction and project improvement			889,000.00
12. Equipment			-0-
13. Miscellaneous			-0-
14. Total (Lines 1 through 13)			1,111,111.00
15. Estimated Income (if applicable)			-0-
16. Net Project Amount (Line 14 minus 15)			1,111,111.00
17. Less: Ineligible Exclusions			-0-
18. Add: Contingencies			-0-
19. Total Project Amt. (Excluding Rehabilitation Grants)			1,111,111.00
20. Federal Share requested of Line 19			1,000,000.00
21. Add Rehabilitation Grants Requested (100 Percent)			-0-
22. Total Federal grant requested (Lines 20 & 21)			1,000,000.00
23. Grantee share			111,111.00
24. Other shares			-0-
25. Total project (Lines 22, 23 & 24)	\$	\$	\$ 1,111,111.00

## SECTION C - EXCLUSIONS

Classification	Ineligible for Participation (1)	Excluded from Contingency Provision (2)
26		
a.	\$	\$
b.		
c.		
d.		
e.		
f.		
g. Totals	\$	\$

## SECTION D - PROPOSED METHOD OF FINANCING NON-FEDERAL SHARE

27. Grantee Share	\$ 111,111.00
a. Securities	
b. Mortgages	
c. Appropriations (By Applicant)	
d. Bonds	
e. Tax Levies	
f. Non Cash	
g. Other (Explain)	
h. TOTAL - Grantee share	111,111.00
28. Other Shares	
a. State	
b. Other	
c. Total Other Shares	
29. TOTAL	\$ 111,111.00

## SECTION E - REMARKS

- o Part V Sponsor Assurances are incorporated herein.
- o Title VI DOT Assurances are incorporated herein.
- o Exhibit A, Property Map, as submitted with ADAP Project 5-06-0182-02 is incorporated by reference.
- o Plans and Specifications for AIP 3-06-0182-03 are incorporated by reference.

PART IV PROGRAM NARRATIVE (Attach - See Instructions)

**PROGRAM NARRATIVE**

**APPLICATION FOR FEDERAL ASSISTANCE**

**PALO ALTO AIRPORT**

**Santa Clara County, California**

**AIP 3-06-0182-03**

**Apron Reconstruction/Overlay**

The existing apron areas at Palo Alto are in poor condition, with severe weathering, isolated alligator cracking, and numerous potholes. A small amount of apron reconstruction was included in the AIP 3-06-0182-02. This project is a continuation of apron improvements and consists of the reconstruction of failed pavement areas, followed by an application of paving fabric and an asphalt overlay of the entire apron. This Project also includes adjustment of tiedown anchors, installation of duct for future apron lighting, and pavement marking. The estimated cost for this project is:

Pavement Reconstruction	60,000 S.F. @ \$5.00	\$300,000.00
Paving Fabric	80,000 S.Y. @ \$1.50	120,000.00
Asphalt Overlay	10,500 T. @ \$40.00	420,000.00
Tiedown Adjustment	370 Each @ \$50.00	18,500.00
Conduit Installation	5,000 L.F. @ \$5.00	25,000.00
Marking	Lump Sum	<u>5,500.00</u>
Construction Total		\$ 889,500.00
Engineering and Inspection		<u>222,111.00</u>
<b>Total</b>		<b>\$1,111,111.00</b>