



Division Of Aeronautics

REQUEST FOR A STATE AID PROJECT APPLICATION FORM

FY 2025 Projects

APPLICANT INFORMATION:

Airport: _____

Address: _____

PROJECT DETAILS:

Project Description:

Project Cost
Estimate:

Requested
State Funds:

In accordance with the State Grant Program, a state grant can reimburse the airport sponsor for 90% of eligible costs of a state project or 2% of a federal project.

Project Justification and Additional Information (safety, longevity, etc.):

Consultant selected for this project: _____

An experienced engineering consultant is required for projects receiving over \$50,000 in state funding, as stipulated by NE State Statute § 73-501.

If this requirement does not apply to your project, type "N/A" in the blank.

PROJECT BENEFITS/IMPACTS:

Explanation of the project benefits/impacts (to include one or more of the following: Economic Growth, Job Creation, Infrastructure Development, Tourism and Hospitality, Connectivity and Accessibility, Quality of Life, and Regional Development and Competitiveness):

**INCLUDE SKETCHES, PHOTOS, OR SUPPORTING INFORMATION
AS AN ATTACHMENT TO THIS FORM.**

SPONSOR'S AUTHORIZED REPRESENTATIVE:

Name: _____ Title: _____

Email: _____ Phone: _____

Signature of Authorized Representative: _____ Date: _____

APPLICATION SUBMITTAL:

Return Completed Application via Email to: ndot.aeroengineering@nebraska.gov

or

Return Completed Application via Postal Mail to: NDOT Division of Aeronautics
1600 Nebraska Parkway
Lincoln, NE 68502

*Requests are due by **September 1, 2024**. All requests are presented for approval/denial at the October Commission Meeting currently scheduled on October 18, 2024, at the Central Nebraska Regional Airport. The airport contact person will be notified of the final time and date of the meeting. Questions can be directed to Anna Lannin, (402) 471-2371.*