2014 - 2018 Capital Budget Request Form										
Department										
Agency										
Number	900	Contact Name	Raymond Anderson							
Department										
Name	Aviation	Contact Number			504-303-7554					
Date	5/24/2013	Contact E-Mail			raya@flymsy.co	<u>m</u>				
	Department	Prioirty Criteria								
Request #	Ranking	Ranking	Project Name	Р	roject Amount	2014	2015	2016	2017	2018
			Long-Term Infrastructure							
1	1	51	Development Plan	\$	640,000,000.00	Χ	Х	Х	X	X
			Airfield Electrical							
2	1	51	Rehabilitation Project	\$	9,800,000.00	Χ				
3	1	51	Apron Rehab Phase III	\$	1,200,000.00	Х				
			Airfield Pavement							
4	1	51	Program Phase I	\$	10,000,000.00	Χ				
			Airfield Pavement							
5	1	51	Program Phase II	\$	10,000,000.00		Х			
			Airfield Pavement							
6	1	51	Program Phase III	\$	10,000,000.00			Х		
			Airfield Pavement							
7	1	51	Program Phase IV Airfield Pavement	\$	10,000,000.00				Х	
8	1	51	Program Phase V	\$	10,000,000.00					Х
			Wildlife Management							
9	1	51	Implementation Program	\$	250,000.00	Х	Х			
			Cargo Road							
10	1	51	Rehabilitation	\$	4,200,000.00	Χ	Х			

			Terminal Facility						
11	1	51	Improvement	\$ 1,000,000.00	Χ	Х			
TOTAL				\$ 706,450,000.00	0	0	0	0	0

Department Head		
Signature	Printed Name	
_	_	_
Date		

		get Request Form	
Agency Number	900	Department Name	Aviation
Project Name	Long-Term Infrastructure Development Plan	Department Priority Ranking	1
Project Type	Renovation	Is a Land acquisition needed? (Y/N)	No
Project Address	900 Airline Drive, Kenner, LA 70062	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.		To Build a World-class Airport Faci	lity
Five Year Summary		To Build a World-class Airport Faci	lity
las an Architect or Engineer prepared drawings for this project?		If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	Please provide estimate of increase or decrease operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 640,000,000.00	Proposed Funding Source	Local Funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and ecommendations of the Master Plan:			
What Benefit(s) will be provided to Public from this project?	Safety	For what year are you requesting the Project? 2014,2015,2016, 2017,or 2018?	2014, 2015, 2016, 2017 and 2018
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

	Capital Budget Request Prioirty Rating Form					
Agency Number	900	Department Name	Aviation			
Project Name	Long-Term Infrastructure Development Plan	Department Priority Ranking	1			
Categories	Rating		Score			
Public Health and Safety	1		3			
External Requirements	1		3			
Protection of Capital Stock	1		3			
Economic Development	1		3			
Operating Budget	1		3			
Life Expectancy of Project	1		3			
Percent of Population Served by Project	1		3			
Relation to dopted Plans	1		3			
Intensity of Use	1		3			
Scheduling	1		3			
Benefit/ Cost	1		3			
Potential for Duplication	1		3			
Availability of Financing	1		3			
Special Need	1		3			
Entergy Consumptiom	1		3			
Timeliness/ External	1		3			
Public Support	1		3			
TOTAL Ranking	17		51			

	Capital Budget Request Form						
Agency Number	900	Department Name	Aviation				
Project Name	Airfield Electrical Rehabilitation Project	Department Priority Ranking	1				
Project Type	Repairs	Is a Land acquisition needed? (Y/N)	No				
Project Address	900 Airline Drive, Kenner, LA 70062	Council District					
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	Enhai	nce Airfield Safety by Improvement of Ele	ectrical System				
Five Year Summary	Enhai	ectrical System					
Has an Architect or Engineer prepared drawings for this project?		If Yes please explain how this was funded and current status					
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	If yes please provide estimate of increase in operating costs.					
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 9,800,000.00	Proposed Funding Source	Federal Grant				
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change					
Please discuss how the project conforms to objectives and recommendations of the Master Plan:							
What Benefit(s) will be provided to Public from this project?	Safety	For what year are you requesting the Project? 2014,2015,2016, 2017,or 2018?	2014				
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs					

	Capital Budget Request Prioirty Rating Form					
Agency Number	900	Department Name	Aviation			
Project Name	Airfield Electrical Rehabilitation Project	Department Priority Ranking	1			
Categories	Rating		Score			
Public Health and Safety	1		3			
External Requirements	1		3			
Protection of Capital Stock	1		3			
Economic Development	1		3			
Operating Budget	1		3			
Life Expectancy of Project	1		3			
Percent of Population Served by Project	1		3			
Relation to dopted Plans	1		3			
Intensity of Use	1		3			
Scheduling	1		3			
Benefit/ Cost	1		3			
Potential for Duplication	1		3			
Availability of Financing	1		3			
Special Need	1		3			
Entergy Consumptiom	1		3			
Timeliness/ External	1		3			
Public Support	1		3			
TOTAL Ranking	17		51			

	Capital Budget Request Form						
Agency Number	900	Department Name	Aviation				
Project Name	Apron Rehab Phase III	Department Priority Ranking	1				
Project Type	Repairs	Is a Land acquisition needed? (Y/N)	No				
Project Address	900 Airline Drive, Kenner, LA 70062	Council District					
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.		To Improve Safety on Airfield Apro	on				
Five Year Summary		To Improve Safety on Airfield Apro	on				
Has an Architect or Engineer prepared drawings for this project?		If Yes please explain how this was funded and current status					
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	If yes please provide estimate of increase in operating costs.					
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 1,200,000.00	Proposed Funding Source	Federal Grant				
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change					
Please discuss how the project conforms to objectives and recommendations of the Master Plan:							
What Benefit(s) will be provided to Public from this project?	Safety	For what year are you requesting the Project? 2014,2015,2016, 2017,or 2018?	2014				
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs					

	Capital Budget Request Prioirty Rating Form					
Agency Number	900	Department Name	Aviation			
Project Name	Apron Rehab Phase III	Department Priority Ranking	1			
Categories	Rating		Score			
Public Health and Safety	1		3			
External Requirements	1		3			
Protection of Capital Stock	1		3			
Economic Development	1		3			
Operating Budget	1		3			
Life Expectancy of Project	1		3			
Percent of Population Served by Project	1		3			
Relation to dopted Plans	1		3			
Intensity of Use	1		3			
Scheduling	1		3			
Benefit/ Cost	1		3			
Potential for Duplication	1		3			
Availability of Financing	1		3			
Special Need	1		3			
Entergy Consumptiom	1		3			
Timeliness/ External	1		3			
Public Support	1		3			
TOTAL Ranking	17		51			

		get Request Form	
Agency Number	900	Department Name	Aviation
Project Name	Airfield Pavement Program Phase I	Department Priority Ranking	1
Project Type	Repairs	Is a Land acquisition needed? (Y/N)	No
Project Address	900 Airline Drive, Kenner, LA 70062	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.		Provide Continued Safety of Airfield Infra	structure
Five Year Summary		Provide Continued Safety of Airfield Infra	structure
las an Architect or Engineer prepared drawings for this project?		If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	If yes please provide estimate of increase in operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 10,000,000.00	Proposed Funding Source	Federal Grant
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and ecommendations of the Master Plan:			
What Benefit(s) will be provided to Public from this project?	Safety	For what year are you requesting the Project? 2014,2015,2016, 2017,or 2018?	2014
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

	Capital Budget Request Prioirty Rating Form					
Agency Number	900	Department Name	Aviation			
Project Name	Airfield Pavement Program Phase I	Department Priority Ranking	1			
Categories	Rating		Score			
Public Health and Safety	1		3			
External Requirements	1		3			
Protection of Capital Stock	1		3			
Economic Development	1		3			
Operating Budget	1		3			
Life Expectancy of Project	1		3			
Percent of Population Served by Project	1		3			
Relation to dopted Plans	1		3			
Intensity of Use	1		3			
Scheduling	1		3			
Benefit/ Cost	1		3			
Potential for Duplication	1		3			
Availability of Financing	1		3			
Special Need	1		3			
Entergy Consumptiom	1		3			
Timeliness/ External	1		3			
Public Support	1		3			
TOTAL Ranking	17		51			

Capital Budget Request Form						
Agency Number	900	Department Name	Aviation			
Project Name	Airfield Pavement Program Phase II	Department Priority Ranking	1			
Project Type	Repairs	Is a Land acquisition needed? (Y/N)	No			
Project Address	900 Airline Drive, Kenner, LA 70062	Council District				
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.		Provide Continued Safety of Airfield Infra	structure			
Five Year Summary		Provide Continued Safety of Airfield Infra	structure			
Has an Architect or Engineer prepared drawings for this project?		If Yes please explain how this was funded and current status				
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	If yes please provide estimate of increase in operating costs.				
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 10,000,000.00	Proposed Funding Source	Federal Grant			
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change				
Please discuss how the project conforms to objectives and recommendations of the Master Plan:						
What Benefit(s) will be provided to Public from this project?	Safety	For what year are you requesting the Project? 2014,2015,2016, 2017,or 2018?	2015			
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs				

Capital Budget Request Prioirty Rating Form			
Agency Number	900	Department Name	Aviation
Project Name	Airfield Pavement Program Phase II	Department Priority Ranking	1
Categories	Rating		Score
Public Health and Safety	1		3
External Requirements	1		3
Protection of Capital Stock	1		3
Economic Development	1		3
Operating Budget	1		3
Life Expectancy of Project	1		3
Percent of Population Served by Project	1		3
Relation to dopted Plans	1		3
Intensity of Use	1		3
Scheduling	1		3
Benefit/ Cost	1		3
Potential for Duplication	1		3
Availability of Financing	1		3
Special Need	1		3
Entergy Consumptiom	1		3
Timeliness/ External	1		3
Public Support			
TOTAL Ranking	1		51

		get Request Form	
Agency Number	900	Department Name	Aviation
Project Name	Airfield Pavement Program Phase III	Department Priority Ranking	1
Project Type	Repairs	Is a Land acquisition needed? (Y/N)	No
Project Address	900 Airline Drive, Kenner, LA 70062	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.		Provide Continued Safety of Airfield Infra	astructure
Five Year Summary		Provide Continued Safety of Airfield Infra	astructure
las an Architect or Engineer prepared drawings for this project?		If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	If yes please provide estimate of increase in operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 10,000,000.00	Proposed Funding Source	Federal Grant
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and ecommendations of the Master Plan:			
What Benefit(s) will be provided to Public from this project?	Safety	For what year are you requesting the Project? 2014,2015,2016, 2017,or 2018?	2016
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Prioirty Rating Form			
Agency Number	900	Department Name	Aviation
Project Name	Airfield Pavement Program Phase III	Department Priority Ranking	1
Categories	Rating		Score
Public Health and Safety	1		3
External Requirements	1		3
Protection of Capital Stock	1		3
Economic Development	1		3
Operating Budget	1		3
Life Expectancy of Project	1		3
Percent of Population Served by Project	1		3
Relation to dopted Plans	1		3
Intensity of Use	1		3
Scheduling	1		3
Benefit/ Cost	1		3
Potential for Duplication	1		3
Availability of Financing	1		3
Special Need	1		3
Entergy Consumptiom	1		3
Timeliness/ External	1		3
Public Support	1		3
TOTAL Ranking	17		51

Capital Budget Request Form			
Agency Number	900	Department Name	Aviation
Project Name	Airfield Pavement Program Phase IV	Department Priority Ranking	1
Project Type	Repairs	Is a Land acquisition needed? (Y/N)	No
Project Address	900 Airline Drive, Kenner, LA 70062	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.		Provide Continued Safety of Airfield Infra	structure
Five Year Summary		Provide Continued Safety of Airfield Infra	structure
Has an Architect or Engineer prepared drawings for this project?		If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	If yes please provide estimate of increase in operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 10,000,000.00	Proposed Funding Source	Federal Grant
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:			
What Benefit(s) will be provided to Public from this project?	Safety	For what year are you requesting the Project? 2014,2015,2016, 2017,or 2018?	2017
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Prioirty Rating Form			
Agency Number	900	Department Name	Aviation
Project Name	Airfield Pavement Program Phase IV	Department Priority Ranking	1
Categories	Rating		Score
Public Health and Safety	1		3
External Requirements	1		3
Protection of Capital Stock	1		3
Economic Development	1		3
Operating Budget	1		3
Life Expectancy of Project	1		3
Percent of Population Served by Project			3
Relation to dopted Plans	1		
Intensity of Use	1		3
Scheduling	1		3
Benefit/ Cost	1		3
Potential for Duplication	1		3
Availability of Financing	1		3
Special Need	1		3
Entergy Consumptiom	1		3
Timeliness/ External	1		3
Public Support	1		3
TOTAL Ranking	1		51

Capital Budget Request Form			
Agency Number	900	Department Name	Aviation
Project Name	Airfield Pavement Program Phase V	Department Priority Ranking	1
Project Type	Repairs	Is a Land acquisition needed? (Y/N)	No
Project Address	900 Airline Drive, Kenner, LA 70062	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.		Provide Continued Safety of Airfield Infra	structure
Five Year Summary		Provide Continued Safety of Airfield Infra	structure
Has an Architect or Engineer prepared drawings for this project?		If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	If yes please provide estimate of increase in operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 10,000,000.00	Proposed Funding Source	Federal Grant
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:			
What Benefit(s) will be provided to Public from this project?	Safety	For what year are you requesting the Project? 2014,2015,2016, 2017,or 2018?	2018
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Prioirty Rating Form			
Agency Number	900	Department Name	Aviation
Project Name	Airfield Pavement Program Phase V	Department Priority Ranking	1
Categories	Rating		Score
Public Health and Safety	1		3
External Requirements	1		3
Protection of Capital Stock	1		3
Economic Development	1		3
Operating Budget	1		3
Life Expectancy of Project	1		3
Percent of Population Served by Project			3
Relation to dopted Plans	1		
Intensity of Use	1		3
Scheduling	1		3
Benefit/ Cost	1		3
Potential for Duplication	1		3
Availability of Financing	1		3
Special Need	1		3
Entergy Consumptiom	1		3
Timeliness/ External	1		3
Public Support	1		3
TOTAL Ranking	1		51

Capital Budget Request Form			
Agency Number	900	Department Name	Aviation
Project Name	Wildlife Management Implementation Program	Department Priority Ranking	1
Project Type	Repairs	Is a Land acquisition needed? (Y/N)	No
Project Address	900 Airline Drive, Kenner, LA 70062	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.		Maintain Safety of Airfield by Wildlife M	itigation
Five Year Summary		Maintain Safety of Airfield by Wildlife M	itigation
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	If yes please provide estimate of increase in operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 250,000.00	Proposed Funding Source	Federal Grant
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:			
What Benefit(s) will be provided to Public from this project?	Safety	For what year are you requesting the Project? 2014,2015,2016, 2017,or 2018?	2014 & 2015
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Prioirty Rating Form			
Agency Number	900	Department Name	Aviation
Project Name	Wildlife Management Implementation Program	Department Priority Ranking	1
Categories	Rating		Score
Public Health and Safety	1		3
External Requirements	1		3
Protection of Capital Stock	1		3
Economic Development	1		3
Operating Budget	1		3
Life Expectancy of Project	1		3
Percent of Population Served by Project	1		3
Relation to dopted Plans	1		3
Intensity of Use	1		3
Scheduling	1		3
Benefit/ Cost	1		3
Potential for Duplication	1		3
Availability of Financing	1		3
Special Need	1		3
Entergy Consumptiom	1		3
Timeliness/ External	1		3
Public Support	1		3
TOTAL Ranking	17		51

Capital Budget Request Form			
Agency Number	900	Department Name	Aviation
Project Name	Cargo Road Rehabilitation	Department Priority Ranking	1
Project Type	Repairs	Is a Land acquisition needed? (Y/N)	No
Project Address	900 Airline Drive, Kenner, LA 70062	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.		Enhance Roadway System in Airport Carg	go Center
Five Year Summary		Enhance Roadway System in Airport Carg	go Center
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	If yes please provide estimate of increase in operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 4,200,000.00	Proposed Funding Source	Federal Grant
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:			
What Benefit(s) will be provided to Public from this project?	Safety	For what year are you requesting the Project? 2014,2015,2016, 2017,or 2018?	2014 & 2015
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Prioirty Rating Form			
Agency Number	900	Department Name	Aviation
Project Name	Cargo Road Rehabilitation	Department Priority Ranking	1
Categories	Rating		Score
Public Health and Safety	1		3
External Requirements	1		3
Protection of Capital Stock	1		3
Economic Development	1		3
Operating Budget	1		3
Life Expectancy of Project	1		3
Percent of Population Served by Project	1		3
Relation to dopted Plans	1		3
Intensity of Use	1		3
Scheduling	1		3
Benefit/ Cost	1		3
Potential for Duplication	1		3
Availability of Financing	1		3
Special Need	1		3
Entergy Consumptiom	1		3
Timeliness/ External	1		3
Public Support	1		3
TOTAL Ranking	27		51

Capital Budget Request Form			
Agency Number	900	Department Name	Aviation
Project Name	Terminal Facility Improvement	Department Priority Ranking	1
Project Type	Repairs	Is a Land acquisition needed? (Y/N)	No
Project Address	900 Airline Drive, Kenner, LA 70062	Council District	
Detailed Summary: Include Scope of work, parking requirements, landscaping, etc.	To Provide for Imp	provement of Lifesafety Systems and Equi	pment in Terminal Building
Five Year Summary	To Provide for Imp	provement of Lifesafety Systems and Equi	pment in Terminal Building
Has an Architect or Engineer prepared drawings for this project?	No	If Yes please explain how this was funded and current status	
Will this project increase your department's current operating expenses? (i.e. require additional staff, maintenance, utilities)	No	If yes please provide estimate of increase in operating costs.	
Estimated Cost of Project: (include Design, Construction, Testing, Contingency, etc.)	\$ 1,000,000.00	Proposed Funding Source	Local Funds
Does this project fall in line with the current Zoning requirements	Yes	If no please list required change	
Please discuss how the project conforms to objectives and recommendations of the Master Plan:			
What Benefit(s) will be provided to Public from this project?	Safety	For what year are you requesting the Project? 2014,2015,2016, 2017,or 2018?	2014 & 2015
Is the surrounding infrastructure(i.e. utilities, road network) sufficient to support the intended use of the project?	Yes	If no please discuss required improvements and estimated costs	

Capital Budget Request Prioirty Rating Form			
Agency Number	900	Department Name	Aviation
Project Name	Terminal Facility Improvement	Department Priority Ranking	1
Categories	Rating		Score
Public Health and Safety	1		3
External Requirements	1		3
Protection of Capital Stock	1		3
Economic Development	1		3
Operating Budget	1		3
Life Expectancy of Project	1		3
Percent of Population Served by Project			3
Relation to dopted Plans	1		3
Intensity of Use	1		3
Scheduling	1		3
Benefit/ Cost	1		3
Potential for Duplication	1		3
Availability of Financing	1		3
Special Need	1		3
Entergy Consumptiom	1		3
Timeliness/ External	1		3
Public Support	1		3
TOTAL Ranking	17		51