

Commonwealth of Massachusetts

NORWOOD AIRPORT COMMISSION

Mark P. Ryan, Chairman

Michael Sheehan, Vice Chairman

John J. Corcoran

NORWOOD AIRPORT COMMISSION

POSTING

NOTICE IS HEREBY GIVEN THAT A PUBLIC MEETING OF THE NORWOOD AIRPORT COMMISSION WILL BE HELD:

DATE:	Wednesday, November 10, 2021	1201	õ
	3:30 p.m.	NON	RENTOV
		1	
PLACE:	Norwood Airport Commission Meeting Room 111 Access Road	\geq	合同時間
	<i>Mark C. Welch Administration Building</i> (Building #9) Norwood, MA 02062	1:5	200
		3	Nort'

The Chair reserves the right to call items on the agenda out of order. The listing of matters is those reasonably anticipated by the Chair which may be discussed at the meeting at least forty-eight (48) hours prior to the meeting. Not all items listed may in fact be discussed and other items not listed may also be brought up for discussion to the extent permitted by law. Items listed for executive session may be discussed in open session, in addition to or in lieu of discussion in executive session.

1. PROJECTS

• AIP project update: DuBois & King

2. MINUTES

• 10/27/21 regular business meeting

3. AIRPORT MANAGER'S REPORT

4. OLD BUSINESS

• Initial commercial permit, FY 2022, Blue Hill Helicopters (BHH)

5. NEW BUSINESS

- Application, Army Corps of Engineers Permit
- FAA year-end report for AIP No. 3-25-0037-041-2020
- FAA year-end report for AIP No. 3-25-0037-042-2021
- FAA year-end report for AIP No. 3-25-0037-043-2020
- Unauthorized helicopter operations, west apron
- Snow removal contract, P.J. Hayes, Inc.
- Snow removal contract, Ciavattone Construction

6. CORRESPONDENCE:

- Aerial photos showing authorized helicopter operating areas
- Application for Army Corps of Engineers permit
- Notification of engineer selection
- FAA year-end report for AIP No. 3-25-0037-041-2020
- FAA year-end report for AIP No. 3-25-0037-042-2021
- FAA year-end report for AIP No. 3-25-0037-043-2020

7. EXECUTIVE SESSION

Purpose 3 for executive session (M.G.L. c. 30A, § 21(a)(3)) – To discuss strategy with respect to litigation if an open meeting may have a detrimental effect on the litigating position of the Norwood Airport Commission: *Boston Executive Helicopters, LLC* v. Town of Norwood et al., U.S. District Court-Massachusetts Civil Action No. 1:15-cv-13647-RGS.

• 10/27/21 executive session minutes

DRAFT ONLY

AIRPORT COMMISSION MEETING REGULAR BUSINESS MEETING October 27, 2021

In Attendance:

Commissioners: Mark Ryan, Chairman; Michael Sheehan, Vice Chairman; John Corcoran; Russ Maguire, Airport Manager

Meeting Called to Order: 3:39 PM

NCM, Matt McDonald from Norwood Record are recording this meeting.

PROJECTS

• AIP Project update, DuBois & King, Mark Goodrich

Thank you to the Commission for the reselection of DuBois & King as the engineers for the Airport.

Reconstruction and Relocation of Taxiway D has been pushed back. Construction is anticipated to start in November and will likely finish in the spring. Tree clearing and removal of Taxiway D is expected to be done this year.

Currently working on environmental permitting for the realignment of Taxiway C and reconstruction of runway 10-28. An official rejection is expected. A variance permit will immediately be submitted.

MINUTES

• 9/8/21 Regular Business Meeting

On a motion by Mr. Sheehan and seconded by Mr. Corcoran, the Commission voted 3/0 by roll call to approve the minutes as presented.

Mr. Sheehan: Yes

Mr. Corcoran: Yes

Mr. Ryan: Yes

AIRPORT MANAGER'S REPORT

Mr. Maguire discussed the special event, Wing and Wheels, which took place on October 16, 2021. The event was co-hosted by the Airport Department and the Recreation Department. Flight Level also provided strong support. There were approximately 370 attendees. Mr. Maguire is looking forward to having the event again, possibly May of 2022.

On a motion by Mr. Sheehan and seconded by Mr. Corcoran, the Commission voted 3/0 by roll call to approve the Airport Manager's Report.

Mr. Sheehan: Yes

Mr. Corcoran: Yes Mr. Ryan: Yes

OLD BUSINESS:

• Initial commercial permit application, FY 2022, Blue Hill Helicopters (BHH) This is the third meeting trying to meet with the owner of Blue Hill Helicopters. Mr. Maguire will reach out to the owner to schedule a time when he can come to the next NAC meeting.

• Airport Commissioner position description

On a motion by Mr. Sheehan and seconded by Mr. Corcoran, the Commission voted 3/0 by roll call to forward the final draft to the Town Manager.

Mr. Sheehan: Yes Mr. Corcoran: Yes Mr. Ryan: Yes

NEW BUSINESS

• Selection of airport engineer On a motion by Mr. Sheehan and seconded by Mr. Corcoran the Commission voted 3/0 to

accept the request for proposal of DuBois & King for the engineering contract for Norwood Airport.

Mr. Sheehan: Yes Mr. Corcoran: Yes Mr. Ryan: Yes

> Mr. Maguire will send a letter to MassDOT and FAA to notify both agencies that the Airport Commission has selected DuBois & King

AIP No. 3-25-0037-039-2020, FAA payment request #5 (final)

On a motion by Mr. Sheehan and seconded by Mr. Corcoran the Commission voted 3/0 by roll call to approve final payment request No. 5 from DuBois & King in the amount of \$15,401.35. 100% of the cost will be paid by the FAA.

Mr. Sheehan: Yes

Mr. Corcoran: Yes Mr. Ryan: Yes

• FAA project worksheet for runway 10-28 and taxiway C construction.

The FAA has a new version of their project readiness form which requires a signature from the Commission. The form is mostly an auto-populating form from the FAA. There is an engineering fee on there. DuBois & King hasn't officially negotiated any scope of work and fee, but the FAA has an automatic 13% or 28% as a thumbnail project cost used for financial planning purposes a year in advance. It does not obligate the NAC to an official contract. It is a placeholder for the reconstruction of runway 10-28 and relocation of Taxiway C. This is for a grant to be available sometime in 2022.

On a motion by Mr. Sheehan and seconded by Mr. Corcoran the Commission voted 3/0 by roll call to approve the project worksheet for the reconstruction of runway 10-28 and relocation of Taxiway C in the estimated amount of \$9,781,040.

Mr. Sheehan: Yes

Mr. Corcoran: Yes Mr. Ryan: Yes

CORRESPONDENCE

- MassDOT application for assistance, runway 10/28 and taxiway C
- Advertisement for airport engineering services
- AIP No. 3-25-0037-039-2020, FAA payment request #5 (final)
- Airport Commissioner position description with edits
- Notice to proceed, C. Naughton Corporation
- 9-22-21 letter from R. Maguire to Community Preservation Committee, to request funding for playground
- Mass. Airport Management Assn. brief sheet on proposed landing fee bill
- 9-15-21 Tuckamore Aviation Corporation re: fuel servicing vehicle
- Dubois & King proposal for engineering services
- FAA project worksheet for runway 10-28 and taxiway C construction

On a motion by Mr. Sheehan and seconded by Mr. Corcoran, the Commission voted 3/0 by roll call to file the correspondence.

Mr. Sheehan: Yes Mr. Corcoran: Yes Mr. Ryan: Yes

On a motion by Mr. Sheehan and seconded by Mr. Corcoran, the Commission voted 3/0 by roll call to adjourn for the purposes of Executive Session for Purpose 3 to discuss strategy with respect to litigation, if an open meeting may have a detrimental effect on the litigating position of the Norwood Airport Commission: Boston Executive Helicopters, LLC v. Town of Norwood et al., U.S. District Court – Massachusetts Civil Action No 1:15-CV-13647-RGS;

The open session and executive session will be adjourned at the end of the executive session meeting.

Mr. Sheehan: Yes Mr. Corcoran: Yes Mr. Ryan: Yes

Adjourned for the purposes for Executive Session at 4:05 p.m.

The minutes of the NAC will be published on the Town Website.

MEETING ADJOURNED: 4:43 PM



Commonwealth of Massachusetts

Norwood Memorial Airport Russ Maguire, A.A.E., ACE, Airport Manager

OFFICE Address 111 Access Road Norwood, MA 02062 MAILING ADDRESS 111 Access Road Norwood, MA 02062

BY ELECTRONIC MAIL ONLY

October 29, 2021

Federal Aviation Administration New England Region (ANE), Airports Division Attn: John Merck, Project Engineer 1200 District Avenue Burlington, MA 01803

Dear John:

Please be advised that the Norwood Airport Commission recently selected *DuBois & King* as its engineer consultant. The board made this decision at its October 27, 2021 public meeting, following an advertised solicitation for engineering services.

DuBois & King's engineer consultant period will run from October 2021 to October 2024.

Thank you.

Sincerely,

Surs W Jaquice

Russ Maguire, Manager Norwood Memorial Airport

CC: Norwood Airport Commission; Norwood Purchasing Department; Owen Silbaugh, Massachusetts Department of Transportation (Aeronautics Division); Anderson Kreiger

Print Form

Save As

Form Approved -OMB No. 0710-0003

Expires: 02-28-2022

U.S. Army Corps of Engineers (USACE)

APPLICATION FOR DEPARTMENT OF THE ARMY PERMIT

33 CFR 325. The proponent agency is CECW-CO-R.

The public reporting burden for this collection of information, OMB Control Number 0710-0003, is estimated to average 11 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at <u>whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil</u>. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. PLEASE DO NOT RETURN YOUR APPLICATION TO THE ABOVE EMAIL.

PRIVACY ACT STATEMENT

Authorities: Rivers and Harbors Act, Section 10, 33 USC 403; Clean Water Act, Section 404, 33 USC 1344; Marine Protection, Research, and Sanctuaries Act, Section 103, 33 USC 1413; Regulatory Programs of the Corps of Engineers; Final Rule 33 CFR 320-332. Principal Purpose: Information provided on this form will be used in evaluating the application for a permit. Routine Uses: This information may be shared with the Department of Justice and other federal, state, and local government agencies, and the public and may be made available as part of a public notice as required by Federal law. Submission of requested information is voluntary, however, if information is not provided the permit application cannot be evaluated nor can a permit be issued. One set of original drawings or good reproducible copies which show the location and character of the proposed activity must be attached to this application (see sample drawings and/or instructions) and be submitted to the District Engineer having jurisdiction over the location of the proposed activity. An application that is not completed in full will be returned. System of Record Notice (SORN). The information received is entered into our permit tracking database and a SORN has been completed (SORN #A1145b) and may be accessed at the following website: http://dpcld.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570115/a1145b-ce.aspx

(ITEMS 1 THRU 4 TO BE FILLED BY THE CORPS)

1. APPLICATION NO.	2. F	IELD OFFICE CODE		3. DATE RECEIV	ED 4. D	ATE APPLICA		COMPLETE
		(ITEMS BELOW TO BE	FILLED BY AI	PPLICANT)				
5. APPLICANT'S NAME			8. AUTHOR	IZED AGENT'S NAI	IE AND TIT	LE (agent is r	ot requ	ired)
First - Mark	Middle - La	ast - Ry an	First - Aly	ssa M	ddle -	Last -	Jacob	s
Company - Norwood Air	port Commission		Company -	Epsilon Associates	, Inc.			
E-mail Address - airport@	norwoodma.gov		E-mail Addre	ss - ajacobs@ep	ilonassocia	tes.com		
6. APPLICANT'S ADDRES	SS:		9. AGENT'S	ADDRESS:				
Address- 111 Access Ro	ad		Address-	3 Mill and Main Place	Suite 205			
City - Norwood	State - MA Zip -	02062 Country - USA	City - Man	ard Stat	e- MA	Zip - 01754	4 Cour	ntry - USA
7. APPLICANT'S PHONE	NOs. w/AREA CODE		10. AGENTS	S PHONE NOS. W/A	REA CODE			
a. Residence	b. Business	c. Fax	a. Residence	e b. Bu	siness	c. F	ax	
N/A	781-255-5615	N/A	N/A	978-4	61-6271	978	-897-00	99
11. I hereby authorize, Epstein Supplemental information	psilon Associates on in support of this perm	to act in my behalf as r it application. SIGNATURE OF APPLICA		e processing of this DATE	application a	and to furnish,	upon re	equest,
	NAME,	LOCATION, AND DESCRI	PTION OF PR	OJECT OR ACTIVI	ſY			
12. PROJECT NAME OR 1	,	_						
Taxiway C Realignment a								
13. NAME OF WATERBOI	, , , , , ,	ble)	14. PROJEC	T STREET ADDRE	SS (if applic	able)		
N/A (Palustrine Emerger	,		Address	111 Access Road				
15. LOCATION OF PROJE		w/ 71°10'27.8	City - Norv	wood	State-	MA	Zip-	02062
16. OTHER LOCATION DE								
State Tax Parcel ID 21-13	3-1 and 21-13-2	Municipality To	wn of Norwood	1				
Section -	Township -		Rang	ge -				

ENG FORM 4345, FEB 2019

	Print Form	Save As
17. DIRECTIONS TO THE SITE From I-95 South: Follow I-95 to Exit 15B and follow Route 1s toward Norwood. C the exit for Norwood Center. At the traffic circle, take the 3rd exit for Neponset Si onto Access Road. Follow Access Road for approximately 0.4 miles and the Airp	treet. Follow Neponset Street for 0.4 r	
18. Nature of Activity (Description of project, include all features)		
The Airport proposes to relocate Taxiway C, the taxiway to Runway 10/28, which of freshwater wetland. The Airport also proposes to pave taxiway safety areas for for additional details.		
19. Project Purpose (Describe the reason or purpose of the project, see instructions)		
The Project builds upon the planning that was previously undertaken for the air Taxiways C to remove direct connections from the apron area to Runway 17/35 aircraft incursion into active runway space. The purpose of this Project is to enl Airport, specifically to improve airfield safety and compliance with FAA design g areas to runways, and to meet the runway length needs of existing aircraft using	 This direct connection increases the hance the safety of aircraft and passe juidelines by eliminating direct connection 	potential for an ngers using the
USE BLOCKS 20-23 IF DREDGED AND/OR FILL MATE	RIAL IS TO BE DISCHARGED	
20. Reason(s) for Discharge		
Construction of the Taxiway C realignment is necessary for public safety and will located adjacent to the taxiway.	Il result in the inevitable fill of an eme	gent marsh that is
21. Type(s) of Material Being Discharged and the Amount of Each Type in Cubic Yards:	-	
Type Type Amount in Cubic Yards Amount in Cubic Yards	Type Amount in Cubic Yards	
 22. Surface Area in Acres of Wetlands or Other Waters Filled (see instructions) Acres 0.7 (31,045 sq. ft.) or Linear Feet 23. Description of Avoidance, Minimization, and Compensation (see instructions) To the maximum extent practicable, the Project is located outside of wetlands, or grades have been adjusted to minimize impacts. There will be no loss of ecologi existing hydrologic conditions will be maintained. Proposed mitigation is in the for Area beent A. Pariaet Marceting and the project is an excidence of definition. 	cal connectivity within the Neponset F orm of wetland restoration at a 2:1 ration	River and
Attachment A - Project Narrative for more information on avoidance and mitigation	JN.	

					Print Form	Save As
24. Is Any Portion of the V	Nork Already Complete?	Yes X No	> IF YES,	DESCRIBE THE COMPLETE	D WORK	
25. Addresses of Adjoinin	g Property Owners, Lessee	s, Etc., Whose	Property /	Adjoins the Waterbody (if more th	nan can be entered here, please atta	ch a supplemental list).
a. Address- See	e attached list					
City -			State -		Zip -	
b. Address-						
D. Audress-						
City -			State -		Zip -	
c. Address-						
City -			State -		Zip -	
d. Address-						
City -			State -		Zip -	
e. Address-						
City -			State -		Zip -	
26. List of Other Certificat	es or Approvals/Denials rec			State, or Local Agencies for V	Nork Described in This App	lication.
AGENCY	TYPE APPROVAL*	IDENTIFIC NUMB		DATE APPLIED	DATE APPROVED	DATE DENIED
MEPA	Certificate	Pending				
Norwood Con Com	Order of Conditions	Pending				
Norwood Con Com	Bylaw Order of Cond	Pending				
MassDEP	401 WQC	Pending				
	restricted to zoning, building	545 - 1456 - 1456 - 1466 - 1466 - 1466 - 1466 - 1466 - 1466 - 1466 - 1466 - 1466 - 1466 - 1466 - 1466 - 1466 -				· · · · · · · · · · · · · · ·
				ribed in this application.I cert e the work described herein or		
The second s	OF APPLICANT	DA ⁻ bo desires to		SIGNATUR the proposed activity (ap	E OF AGENT	DATE
1/2/22	statement in block 11 has				plicant, of it may be sign	ieu by a uuiy
and the second and a second se		CONTRACT IN CONTRACTOR AND A CONTRACTOR		the jurisdiction of any depa ne, or disguises a material		
		and the set of the set		ocument knowing same to c		
statements or entry, sha	all be fined not more thar	1 \$10,000 or	imprisone	d not more than five years	or both.	





Federal Financial Report

(Follow form Instructions)

1. Federal Agency and C Federal Aviation A Airports Division	Organizational Element to Wh	hich Report is Submitted	Agency (To		fying Number Assigned by Federal ts, use FFR Attachment)
3. Recipient Organizatior	n (Name and complete addre	ess including Zip code)			
Recipient Organization N	lame: Norwood Airport	Commission			
Street1: 111 Access	Road	,			
Street2:					
City: Norwood		County:			
State: MA: Massac	husetts			Province:	
Country: USA: UNITE	D STATES		ZIP	/ Postal Code: 020	62
4a. DUNS Number 084211572	4b. EIN 04-6001254			t Number or Identify rants, use FFR Atta	
6. Report Type	7. Basis of Accounting	8. Project/Grant Perio	d	9. Reporting Peri	od End Date
Quarterly	Cash	From: To):	09/30/20	21
Semi-Annual	X Accrual	10/01/2020	09/30/2021		
Annual					
10. Transactions	or multiple grant reporting)				Cumulative
	rt multiple grants, also use	FFR attachment):			
a. Cash Receipts					0.00
b. Cash Disbursements					0.00
c. Cash on Hand (line a	minus b)				0.00
(Use lines d-o for single	grant reporting)		· ·		
Federal Expenditures	and Unobligated Balance:				
d. Total Federal funds a	uthorized				283,333.00
e. Federal share of expe	enditures	······			254,164.66
f. Federal share of unliq	uidated obligations				0.00
g. Total Federal share (sum of lines e and f)				254,164.66
h. Unobligated balance	of Federal Funds (line d min	us g)			29,168.34
Recipient Share:					
i. Total recipient share r	equired				0.00
j. Recipient share of exp	penditures				0.00
k. Remaining recipient s	share to be provided (line i m	inus j)			0.00
Program Income:					
I. Total Federal program	n income earned				0.00
m. Program Income exp	pended in accordance with th	e deduction alternative			0.00
n. Program Income exp	ended in accordance with th	e addition alternative			0.00
o. Unexpended progran	n income (line l minus line m	and line n)			0.00

11. Indirect Expense							
а. Туре	b. Rate	c. Period From	Period To	d. Bas	• ·	. Amount Charged	f. Federal Share
] [
· · · · · · · · · · · · · · · · · · ·			g. Totals:				
12. Remarks: Attach any explanation	ons deeme	d necessary or info	rmation required	d by Federal spo	onsoring agency in	compliance with	governing legislation:
		Ade	d Attachment	Delete Attachr	nent View Attac	hment	
 Certification: By signing this expenditures, disbursements an am aware that any false, fictitiou administrative penalties for fraud and 3801-3812). a. Name and Title of Authorized C 	d cash rec s, or fraud i, false sta	eipts are for the p ulent information, tements, false cla	ourposes and o	bjectives set fo	rth in the terms a ial fact, may subj	and conditions of ect me to crimin	of the Federal award. I nal, civil or
	st Name:			1	Middle Name:		
Last Name: Ryan]			
Title: Chairman b. Signature of Authorized Certifyin	a Official			c Telenh	one (Area code, n	umber and exten	sion)
	gomola			781-255			,
d. Email Address				e. Date F	Report Submitted	14. Agency u	se only:
rmaguire@norwoodma.gov							

Standard Form 425

REQUEST FOR ADVANCE OR REIMBURSEMENT	- PA	(PE OF Ayment Equested	a. "X" one or both ADVANG REIMBU b. "X" the applicat FINAL PARTIA	CE I RSEMENT ble box	2. BASIS OF REQUEST
3. FEDERAL SPONSORING AGENCY AND OF ELEMENT TO WHICH THIS REPORT IS SUBN FAA/Airports Division		IAL		EDERAL AGENCY	
5. PARTIAL PAYMENT REQUEST NUMBER FOR THIS REQUEST	6. EMPLOYER NUMBER 04~6001254		TION	7. FINANCIAL A	
8. PERIOD COVERED BY THIS REQUE From: 10/01/2020 To: 09/30/20					

9. RECIPIENT ORGANIZATION

Name:	Norwood Airport Commission
Street1:	111 Access Road
Street2:	
City:	Norwood
County:	
State:	MA: Massachusetts
Province:	
Country:	USA: UNITED STATES
ZIP / Post	tal Code: 02062

10. PAYEE (Where check is to be sent if different than item 9)

Name:	MassDOT - Aeronautics
Street1:	Logan Office Center
Street2:	One Harborside
City:	East Boston
County:	
State:	MA: Massachusetts
Province:	
Country:	USA: UNITED STATES
ZIP / Post	tal Code: 02128-2009

11. COMPUTAT	ION OF AMO	JUN	T OF REIMBURSEMENTS	<i>S</i> //	ADVANCES REQUESTED			
PROGRAMS/FUNCT ACTIVITIES	IONS/	(a)	20.106	(t	(b) (c)			TOTAL
		+'		+	·]	
a. Total program 🗄	As of date)]\$	283,333.00	l[:	\$\$			\$ 283,333.00
b. Less: Cumulative income	program			j				
c. Net program outlay minus line b)			283, 333.00	Ţ				283,333.00
d. Estimated net cash advance period	i outlays for			Ţ				
e. Total (Sum of lines	s c & d)		283,333.00					283,333.00
f. Non-Federal share on line e	of amount			I I I				
g. Federal share of an line e	mount on		283, 333.00	Ţ			$\underline{\Box}$	283,333.00
h. Federal payments requested			254,164.66					254,164.66
i. Federal share now (Line g minus line	h)		29,168.34					29,168.34
j. Advances required to month, when	* Ist monun							
requested by Federa grantor agency for use in making	2nd month	1		Ţ				
prescheduled advances	3rd month							
12. ALTERNATE	COMPUTAT		N FOR ADVANCES ONLY	_				
a. Estimated Federal	cash outlays	that	t will be made during period	d٢	covered by the advance		- _	\$
b. Less: Estimated h	valance of Fed	lera	al cash on hand as of begin	inir	ing of advance period			
c. Amount requested	l (Line a minu:	s lin	ie b)	_				\$
13. CERTIFICAT								
					e reverse are correct and that all not been previously requested.	l outlays were made ir	n acc	cordance with the grant
SIGNATURE OR AU	THORIZED C	ER	TIFYING OFFICIAL				DA	TE REQUEST SUBMITTED
				~~~			L	
TYPED OR PRINTER		יוד כ	TLE	-			L	<u> </u>
Prefix:		Firs	st Name: Mark			Middle Name:		
Last Name: Ry	yan					Suffix:		
Title: Chairma	an			_				
TELEPHONE (AREA	A CODE, NUN	/BE'	R, EXTENSION)	_			_	
781-255-5616								
This space for agenc	y use							
searching existing of comments regardin Office of Managem PLEASE DO NOT	data sources, y ng the burden o nent and Budgo RETURN YOU	, gath estir get, P <b>UR (</b>	thering and maintaining the imate or any other aspect o Paperwork Reduction Proje COMPLETED FORM TO T	e da of ti ect	ated to average 60 minutes per red data needed, and completing and f this collection of information, inc ct (0348-0004), Washington, DC 3 THE OFFICE OF MANAGEMENT	d reviewing the collect cluding suggestions fo 20503.	tion o or redi	of information. Send ducing this burden, to the
PROVIDED BY TH	E SPONSOR	ING	AGENCY.					

# Federal Financial Report

(Follow form Instructions)

Federal Aviation Ac Airports Division 3. Recipient Organization	(Name and complete addre ame: Norwood Airport Road	ess including Zip code) Commission County:	Agency (To 3-25-003'		/ing Number
6. Report Type Quarterly Semi-Annual Annual Final	7. Basis of Accounting	8. Project/Grant Peri From:	od ⁻ o: 09/30/2021	9. Reporting Peri	
10. Transactions					Cumulative
(Use lines a-c for single (	or multiple grant reporting)				
· · · · · · · · · · · · · · · · · · ·	t multiple grants, also use	FFR attachment):			<u> </u>
a. Cash Receipts					0.00
b. Cash Disbursements		······			0.00
c. Cash on Hand (line a					0.00
(Use lines d-o for single					
	and Unobligated Balance:				1.005.005.00
d. Total Federal funds au				· · · ·	1,285,075.00
e. Federal share of expe					172,933.87
f. Federal share of unliqu					0.00
g. Total Federal share (s					172,933.87
	of Federal Funds (line d min	us g)			1,112,141.13
Recipient Share:			<u></u>		
i. Total recipient share re					0.00
j. Recipient share of exp				<u></u>	0.00
	hare to be provided (line i m	inus j)			0.00
Program Income:					
I. Total Federal program					0.00
	ended in accordance with th				0.00
	ended in accordance with the				0.00
o. Unexpended program	income (line I minus line m	and line n)			0.00

а. Туре	b. Rate	c. Period Fron	n Period To	d. Base	-	Amount Charged	f. Federal Share
			-) (				
				E			7
			g. Totals:				
2. Remarks: Attach any exp	planations deemed	l necessary or in	formation require	d by Federal spons	oring agency in	compliance with	governing legislation:
<u> </u>			Add Attachment	Delete Attachmer	t View Attac	hment	
and 3801-3812).							1. Sections 3729-3730
a. Name and Title of Autho							1, Sections 3729-3730
a. Name and Title of Autho	orized Certifying Of ] First Name: [⊮				liddle Name:		1, Sections 3729-3730
							1, Sections 3729-3730
Prefix:					liddle Name:		1, Sections 3729-3730
Prefix:	] First Name: M				iddle Name:	umber and exten	
Prefix:	] First Name: M				iiddle Name: [ Suffix: [ e (Area code, nu		
Prefix:	] First Name: M			c. Telephone 781-255-5	iiddle Name: [ Suffix: [ e (Area code, nu		sion)

Standard Form 425

OMB Number: 4040–0011 Expiration Date: 02/28/2022

OUTLAY REPORT AND RE REIMBURSEMENT CONSTRUCTION PRO	FOR	1. TYPE OF REQ		2. BASIS OF REQUEST
3. FEDERAL SPONSORING AGENCY AND C ELEMENT TO WHICH THIS REPORT IS SUI			ANT OR OTHER IE	DENTIFYING NUMBER
FAA/Airports Division		3-25-0037-42-		
5. PARTIAL PAYMENT REQUEST NUMBER FOR THIS REQUEST	6. EMPLOYER IDENTIFICA NUMBER	ATION	7. FINANCIAL A	
	04-6001254			
8. PERIOD COVERED BY THIS REQ	UEST			
From: 10/01/2020 To: 09/30/2	2021			
9. RECIPIENT ORGANIZATION				
Name: Norwood Airport Commission	l			
Street1: 111 Access Road				
Street2:				
City: Norwood				
County:				
State: MA: Massachusetts				
Province:				
Country: USA: UNITED STATES				
ZIP / Postal Code: 02062				
10. PAYEE (Where check is to be sent if diffe	erent than item 9)	n		
Name: MassDOT - Aeronautics				
Street1: Logan Office Center				
Street2: One Harborside Dr. Suite 2	05N			
City: East Boston				
County:				
State: MA: Massachusetts				
Province:				
Country: USA: UNITED STATES				
ZIP / Postal Code: 02128				

11.		S	T/	ATUS OF FUNDS				
		PROGRAMS	FUNCTIONS			ACTIVITIES		
CLASSIFICATION	(a)	20.106	(1	b)	(C,			TOTAL
a. Administrative expense	\$	4,000.00	\$	\$	\$		] :	\$ 4,000.0
b. Preliminary expense							]	
c. Land, structures, right-of-way							]	
d. Architectural engineering basic fees		228,674.00					]	228,674.0
e. Other architectural engineering fees							]	
f. Project inspection fees		102,601.00					]	102,601.0
g. Land development							]	
h. Relocation expense							]	
i. Relocation payments to individuals and businesses							]	
j. Demolition and removal							]	
k. Construction and project improvement cost		949,800.00					]	949,800.0
I. Equipment							]	
m. Miscellaneous cost							]	
n. Total cumulative to date (sum of lines a thru m)		1,285,075.00					]	1,285,075.0
o. Deductions for program income							]	
p. Net cumulative to date (line n minus line o)		1,285,075.00					]	1,285,075.0
q. Federal share to date		1,285,075.00					]	1,285,075.0
r. Rehabilitation grants (100% reimbursement)							]	
s. Total Federal share (sum of lines q and r)		1,285,075.00					]	1,285,075.0
t. Federal payments previously requested		172,933.87					]	172,933.8
u. Amount requested for reimbursement	\$	1,112,141.13	5	\$	\$		]	\$ 1,112,141.1
v. Percentage of physical completion of project		%		%		%	T	%

12.	CERTIFICATION
-----	---------------

I certify that to the best of my knowledge and belief the billed costs or disbursements are in accordance with the terms of the project and that the reimbursement represents the Federal share due which has not been previously requested and that an inspection has been performed and all work is in accordance with the terms of the award.

a. RECIPIENT		
SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL		DATE REPORT SUBMITTED
TYPED OR PRINTED NAME AND TITLE	······································	
Prefix: Mr. First Name: Mark M	iddle Name:	
Last Name: Ryan	Suffix:	
Title: Chairman		
TELEPHONE (Area code, number, and extension) 781-255-5616		
b. REPRESENTATIVE CERTIFYING TO LINE 11V		
SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL		DATE SIGNED
all adler		11-8-21
TYPED OR PRINTED NAME AND TITLE		
Prefix: Mr. First Name: Jeffrey	iddle Name:	
Last Name: Alder	Suffix:	
Title: Senior Project Manager		
TELEPHONE (Area code, number, and extension)       603-637-1043		

.

#### CEDTIEIOATION

# Federal Financial Report

(Follow form Instructions)

1. Federal Agency and O Federal Aviation Ad Airports Division	rganizational Element to Wr	nich Report is Submitted	Agency (To		fying Number Assigned by Federal ts, use FFR Attachment)				
3. Recipient Organization (Name and complete address including Zip code)									
Recipient Organization Name: Norwood Airport Commission									
Street1: 111 Access Road									
Street2:									
City: Norwood		County:							
State: MA: Massach	nusetts			Province:					
Country: USA: UNITED	) STATES		ZIP	/ Postal Code: 020	62				
				t Number er Identif	ing Number				
4a. DUNS Number	4b. EIN			t Number or Identify rants, use FFR Atta					
084211572	04-6001254								
6. Report Type	7. Basis of Accounting	8. Project/Grant Period		9. Reporting Peri	od End Date				
Quarterly	Cash	From: To:		09/30/20	20				
Semi-Annual	Accrual	10/01/2020 09	/30/2021						
Annual									
Final Final									
10. Transactions					Cumulative				
	or multiple grant reporting)		. <u></u> .		· · · · · · · · · · · · · · · · · · ·				
	rt multiple grants, also use	e FFR attachment):							
a. Cash Receipts					0.00				
b. Cash Disbursements					0.00				
c. Cash on Hand (line a		······	·····	<del></del>	0.00				
(Use lines d-o for single				······································					
d. Total Federal funds a	and Unobligated Balance:				383,389.00				
e. Federal share of expe					0.00				
f. Federal share of unliqu					0.00				
g. Total Federal share (s					0.00				
	of Federal Funds (line d min	us g)			383,389.00				
Recipient Share:									
i. Total recipient share re					0.00				
j. Recipient share of exp					0.00				
	hare to be provided (line i m	inus j)			0.00				
Program Income:									
I. Total Federal program					0.00				
	ended in accordance with th				0.00				
n. Program Income expe	n. Program Income expended in accordance with the addition alternative								
o. Unexpended program	income (line I minus line m	and line n)			0.00				

11. Indirect Expense						2		
а. Туре	b. Rate	c. Period From	Period To	d. Base	4.	Amount Charged	f. Federal Share	
			·				J []	
							] []	
			g. Totals:					
12. Remarks: Attach any explanation	ons deemed	necessary or info	rmation required	l by Federal spons	oring agency in	compliance with	governing legislation:	
		Add	d Attachment	Delete Attachmer	nt View Attack	nment		
<ul> <li>13. Certification: By signing this expenditures, disbursements and am aware that any false, fictitious administrative penalties for fraud and 3801-3812).</li> <li>a. Name and Title of Authorized C</li> </ul>	d cash rece s, or fraudu I, false stat	lipts are for the p lient information, ements, false cla	urposes and of or the omissic	pjectives set forth on of any material	n in the terms a fact, may subje	nd conditions o ect me to crimin	f the Federal award. I al, civil or	
Prefix: Fir	st Name: M	ark		N	liddle Name:	<b>.</b>		
Last Name: Ryan	L				Suffix:			
Title: Chairman								
b. Signature of Authorized Certifyin	g Official			c. Telephone	e (Area code, nu	Imber and extens	sion)	
	781-255-5616							
d. Email Address				e. Date Rep	ort Submitted	14. Agency u	se only:	
rmaguire@norwoodma.gov							M.S.	

Standard Form 425

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REQUEST FOR ADVANCI OR REIMBURSEMENT	E	1. TYPE OF PAYMENT REQUESTED	a. "X" one or both ADVAN REIMBL b. "X" the applica FINAL PARTIA	CE JRSEMENT ble box	2. BASIS OF REQUEST				
3. FEDERAL SPONSORING AGENCY AND O ELEMENT TO WHICH THIS REPORT IS SUB		ΓΙΟΝΑL	4. FEDERAL GR ASSIGNED BY F	DENTIFYING NUMBER					
FAA/Airports Division			3-25-0037-043	3-2020					
5. PARTIAL PAYMENT REQUEST       6. EMPLOYER IDENTIFICATION       7. FINANCIAL ASSISTANCE         NUMBER FOR THIS REQUEST       04-6001254       IDENTIFICATION NUMBER         8.       PERIOD COVERED BY THIS REQUEST       From:       10/01/2019         To:       09/30/2020       09/30/2020									
9. RECIPIENT ORGANIZATION									
Name: Norwood Airport Commission									
Street1: 111 Access Road									
Street2:									
City: Norwood	Norwood								
County:									
State: MA: Massachusetts	MA: Massachusetts								
Province:									

ZIP / Postal Code:	02062
·	· · · ·

10. PAYEE	(Where check is to be sent if different than item 9,	)
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Country: USA: UNITED STATES

Name:	MassDOT - Aeronautics
Street1:	Logan Office Center
Street2:	One Harborside
City:	East Boston
County:	
State:	MA: Massachusetts
Province:	
Country:	USA: UNITED STATES
ZIP / Post	al Code: 02128-2009

11. COMPUTATIO	ON OF AMO	UN	T OF REIMBURSEMENTS	S/	ADVANC	ES REQUESTI	ED					
PROGRAMS/FUNCTIO ACTIVITIES	NS/	(a)	20.106		(b)			(c)				TOTAL
a. rotarprogram –	<i>of date)</i> /30/2020	] \$	383, 389.00	+ ]	\$			\$			\$	383,389.00
b. <i>Less:</i> Cumulative pro income	ogram			ļ						j		
c. Net program outlays minus line b)			383, 389.00	ļ		· · · · ·				]		383,389.00
d. Estimated net cash o advance period	utlays for									]		
e. Total (Sum of lines c		_	383, 389.00							]		383,389.00
f. Non-Federal share of on line e										]		
g. Federal share of amo			383, 389.00							]	·	383,389.00
h. Federal payments pre requested			0.00							]		0.00
i. Federal share now re (Line g minus line h)	)		383, 389.00							]		383,389.00
<ul> <li>Advances required by month, when requested by Federal</li> </ul>										]		
grantor agency for use in making	2nd month									]  		
prescheduled advances	3rd month			<u> </u>					· · · · · · · · · · · · · · · · · · ·	]		
			t will be made during period		covered b	v the advance					\$	
			al cash on hand as of beginr			· · · · ·						
c. Amount requested (L											\$	
13. CERTIFICATIO												
			lge and belief the data on th at payment is due and has n					all outla	ays were made in ac	COI	rdanc	e with the grant
SIGNATURE OR AUTH				_						١T	ERE	QUEST SUBMITTED
		-								<u> </u>		
TYPED OR PRINTED N			· · ·	<u> </u>					···			
Prefix:		Firs	st Name: Mark	=				<u> </u>	ddle Name:	_		
Last Name: Ryar								]	Suffix:			
						<u> </u>			· · · · · · · · · · · · · · · · · · ·			· · · · · · · · ·
TELEPHONE (AREA C 781-255-5616	ODE, NOM	BEI										
This space for agency u	use						-					
searching existing dat	ta sources, c	gath	ction of information is estim hering and maintaining the mate or any other aspect of	da	lata neede	d, and complet	ing a	ind rev	ewing the collection	of	inforr	mation. Send
Office of Managemen	t and Budge	et, F	mate or any other aspect of Paperwork Reduction Project	11 201	nis collect t (0348-00	04), Washingto	on, D	C 2050	g suggestions for rec 13.	Juc	ong a	his burden, to the

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

# - Major Projects/Issues-

# Runway 10/28 Survey Work

On 10/21, and again on 11/3, airport management filed notices to airmen (Notams), closing runway 10-28, taxiways F, G, and a section of taxiway C. These actions supported the efforts of a *DuBois & King* survey team, which began preliminary work for next year' proposed reconstruction of runway 10-28, plus the re-location of taxiway C.

# Paving on Gate 2, 3 Taxi-Lanes

On 10/28, airport management filed Notams and coordinated/ supervised some pavement work on the gate 2 and gate 3 taxi-lanes. This work included milling and re-surfacing the asphalt that covers several gas line trenches running along the taxi-lanes.

### **Tree Removal Request**

See Attachments A-C.

# **Monthly Revenues**

For the month of October, two deposits were posted to the Treasurer's office. These totaled \$50,729.46 in payments (see *Attachment D*).

# **Monthly Fuel Flowage**

For the month of September, *Boston Executive Helicopters*' bills of lading for fuel totaled 10,000 gallons. At \$.07/gallon, the Town received \$700 in flowage fees. (*Attachment D*).

For the month of August, *Flight Level's* bills of lading for fuel totaled 56,462 gallons. At \$.07/gallon, the Town received \$3,952.34 in flowage fees.

For the month of September, *Flight Level's* bills of lading for fuel totaled 66,510 gallons. At \$.07/gallon, the Town received \$4,655.70 in flowage fees. (*Attachment D*).

# - Informational Updates -

# **NFD Training Sessions**

For late November and December, the Airport Manager (AM), along with Deputy Fire Chief Dan Harkins, scheduled four orientation/training sessions with Norwood Fire and air traffic control. Each session is expected to begin with a presentation at the fire department followed by a drive-around orientation at the airport.

# **Runway Safety Summit Meeting**

On 11/3, the AM attended FAA's annual runway safety summit meeting.

# **Air Traffic Counts**

For the Norwood Airport's October 2021 air traffic reports, see *Attachments E-F*. See *Attachment G* for a seven-year look at Norwood's air traffic count in the month of October.



The TOWN OF NORWOOD

Commonwealth of Massachusetts

Norwood Memorial Airport Russ Maguire, A.A.E., ACE, Airport Manager

OFFICE ADDRESS 111 Access Road Norwood, MA 02062 MAILING ADDRESS 111 Access Road Norwood, MA 02062

# BY ELECTRONIC MAIL ONLY

(info@thetrustees.org; greaterboston@thetrustees.org)

November 7, 2021

The Trustees of Long Hill Reservation 572 Essex Street Beverly, MA 01915

# Re: Request to Remove Three Trees on Trustee Land

Dear Sir or Ms.:

Recently, the Federal Aviation Administration made clear to us the need to remove three trees which penetrate the Norwood Airport's protected airspace. The three trees in question, clustered together, are located in wetlands just beyond the property line for the Town of Norwood, which owns the Norwood Airport. More specifically, the trees are off the extended centerline of runway 28 just beyond the Neponset River's east bank. For reference, I've attached a schematic which shows (marked in red) the coordinates/positions of all three trees.

Because the trees represent a flight hazard, we're now seeking the Trustees' permission to cut and remove them. Please be assured that we would take every precaution to remove the trees in deference to the Trustees' stewardship concerns and all environmental regulations.

If needed, I'm happy to meet with a Trustee representative here at the airport, where I can point out the area of concern.

Please feel free to contact me at the following:E-mail:rmaguire@norwoodma.govWork phone:781-255-5615

Thank you very much in advance—we appreciate the Trustees' consideration regarding this safety matter.

Sincerely,

Run Magnie

Russ Maguire, Manager Norwood Memorial Airport

Cc: Norwood Airport Commission



# **October Financial Report**

REVENUE TYPE	AMOUNT THIS PERIOD	FY 2022 YTD	FY 2021	FLN FBO ¹ THIS PERIOD	BEH FBO ² THIS PERIOD
Land Leases	\$24,065.42	\$90,261.68	\$265,972.23	\$14,146.56	\$6,000.00
Fuel Flowage Fees	\$9,308.04	\$19,029.15	\$32,760.42	\$8,608.04	\$700.00
Aircraft Tie-Down Leases	\$0	\$0	\$0	\$0	\$0
Security Badge Fees	\$800.00	\$2,700.00	\$6,200	\$0	\$0
Revolving – Insurance Recovery	\$0	\$0	\$2,718.90	\$0	\$0
General ³	\$0	\$270.00	\$0	\$	\$
Landing Fees	\$16,556.00	\$27,944.00	\$27,352.00	\$16,556.00	\$0
TOTAL	\$50,729.46	\$140,204.83	\$335,003.55	\$39,310. <mark>60</mark>	\$6,700.00

_____

 ¹ Flight Level Norwood, LLC
 ² Boston Executive Helicopters, LLC
 ³ General revenues include commercial permit and public records request fees, and FEMA reimbursements, etc.

SYMBOLOGY
AC = Air carrier-type aircraft (e.g., Delta, United)
AT = On-demand aircraft that use three-letter ID at beginning of call sign
GA = General aviation FAR Part 91 aircraft using 'N' at beginning of call sign
MI = Military

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Total	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	16	15	14	13	12	11	10	60	80	07	6	05	04	03	02	01	Day AC			racility Name	
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F

# MONTHLY TOTAL, AIR TRAFFIC COUNTS (2015-2021)

October

2015	2016	2017	2018	2019	2020	2021
4,788	4,670	5,797	5,383	4,697	6,124	6,990