CHICKASHA MUNICIPAL AIRPORT AUTHORITY

AGENDA
LOCATION OF MEETING
CITY HALL COUNCIL CHAMBERS
117 NORTH FOURTH STREET
CHICKASHA, OKLAHOMA 73018

TIME OF MEETING
6:30 PM

DATE OF MEETING
DECEMBER 6, 2021

All items on this agenda, including but not limited to any agenda item concerning the adoption of any ordinance, resolution, contract, agreement, or any other item of business, are subject to amendment, including additions and/or deletions. This rule will apply to every individual agenda item without exception, and without providing this same amendment language with respect to each individual agenda item. Such amendments should be rationally related to the topic of the agenda item, or the governing body will be advised to continue the item.

The governing body may adopt, approve, ratify, deny, defer, recommend, amend, strike, or continue any agenda item. When more information is needed to act on an item, the governing body may refer the matter to its City/Trust Manager, staff, attorney or to the recommending board, commission or committee.

1. Call to Order / Roll Call.

2. Consent Docket:

a. Acceptance of the Minutes of the November 15, 2021 regular meeting.

b. Acceptance of the Claims List.

c. Acceptance of Resolution 2021-23R - Accepting the Application for funding from the American Rescue Plan Act Targeted Grants to Airports (ARPA Funds).

d. Acceptance of change of broker for airport insurance policies.

3. Discussion/Approval of Items Removed from Consent Docket:

4. Consideration and Discussion Items:

5. Motion for Adjournment.

City of
CHICKASHA

Meeting Type: CMAA Agenda 12-6-2021

Meeting Date: 12/6/2021

Department: City Clerk **Agenda Item No. 2.a.**

AGENDA ITEM: Acceptance of the Minutes of the November 15, 2021 regular meeting.

I. BACKGROUND/DESCRIPTION:

II. RECOMMENDED ACTION:

III. FISCAL INFORMATION -

IV. FUND INFORMATION:

Dept. Director: Susan M. McDaniel, City Clerk	Fund	Account	Amount
	(To)		
	FUND	ACCOUNT	AMOUNT
Meeting Date: December 6, 2021	(From)		

V. ATTACHMENTS:

1. CMAA 11-15-2021

November 15, 2021

The **REGULAR** meeting of the **CHICKASHA MUNICIPAL AIRPORT AUTHORITY** was held in the council chambers in city hall on the 15th day of November 2021 as specified by advance public notice with a properly prepared agenda stating the subject matter or matters to be discussed at said meeting. Chairman Mosley called the meeting to order at 7:05 p.m.

ITEM 1. **Call to Order / Roll Call:**

CHAIRMAN AND TRUSTEES

PRESENT: Chris Mosley, Chairman
Zachary Grayson, Vice-Chairman
Oscar Nelson
Georgianne Hebblethwaite
David Sikes
R P. Ashanti-Alexander
Kelly Boyd
Brian Gerdes
Clark VanDyck

ABSENT: None

STAFF

PRESENT: Tyler, Brooks, City Manager
Amanda Mullins, City Attorney
Cindy Rogers, Finance Director
Susan M. McDaniel, City Clerk
Chief Rowell, Police Chief
Darren Martin, Chief Building Inspector
Lillie Huckaby, Library Director
Tony Samaniego, Fire Chief
Rachel Bernish, Community Development Director
Kyle Marks, Parks & Rec Director
Shae Mortimer, Marketing & Civic Engagement Manager

ITEM 2. **Consent Docket: ITEM 2a thru ITEM 2c**

ITEM 2a. **Acceptance of the Minutes for the November 1, 2021 regular meeting.**
ITEM 2b. **Acceptance of claims list.**
ITEM 2c. **Acceptance of the Financials for October 2021.**

*Motion by Trustee Boyd, second by Trustee Ashanti-Alexander to approve Item 2a thru Item 2c.

Roll call vote:

Ayes:"	Boyd, Nelson, Grayson, Sikes, Hebblethwaite, VanDyck, Gerdes, Ashanti-Alexander and Mosley.
"Nays:"	None
"Abstain:"	None
Motion carried.	9-0

ITEM 3. Discussion / Approval of Items Removed from Consent Docket:

No action taken on Item 3.

ITEM 4. Discussion and Consideration:

No Items Presented.

ITEM 5. Motion to Adjourn.

*Motion by Trustee VanDyck, second by Trustee Grayson to adjourn.

Meeting adjourned.

TIME: 7:26 PM

Approved this 6th day of December 2021.

_____
Chris Mosley, Chairman

(ATTEST)

_____
Susan M. McDaniel, City Clerk

City of
CHICKASHA

Meeting Type: CMAA Agenda 12-6-2021

Meeting Date: 12/6/2021

Department: Finance **Agenda Item No. 2.b.**

AGENDA ITEM: Acceptance of the Claims List.

I. BACKGROUND/DESCRIPTION:

II. RECOMMENDED ACTION:
Accept Claims List.

III. FISCAL INFORMATION -

IV. FUND INFORMATION:

Dept. Director:	Fund	Account	Amount
	(To)		
	FUND	ACCOUNT	AMOUNT
Meeting Date: December 6, 2021	(From)		

V. ATTACHMENTS:

City of
CHICKASHA

Meeting Type: CMAA Agenda 12-6-2021

Meeting Date: 12/6/2021

Department: City Clerk **Agenda Item No. 2.c.**

AGENDA ITEM: Acceptance of Resolution 2021-23R - Accepting the Application for funding from the American Rescue Plan Act Targeted Grants to Airports (ARPA Funds).

I. BACKGROUND/DESCRIPTION:

II. RECOMMENDED ACTION:

Accept Resolution 2021-23R accepting the Application for funding from the American Rescue Plan Act targeted grants to Airports.

III. FISCAL INFORMATION -

IV. FUND INFORMATION:

Dept. Director:	Fund	Account	Amount
	(To)		
	FUND	ACCOUNT	AMOUNT
Meeting Date: December 6, 2021	(From)		

V. ATTACHMENTS:

1. FAA ARPA Grant Application
2. Res. 2021-23R ARPA FAA Funds

OMB Number: 4040-0004
Expiration Date: 12/31/2022

Application for Federal Assistance SF-424

*1. Type of Submission:	*2. Type of Application	* If Revision, select appropriate letter(s):
☐ Preapplication	☒ New	
☒ Application	☐ Continuation	*Other (Specify)
☐ Changed/Corrected Application	☐ Revision	

*3. Date Received:	4. Applicant Identifier:
NA	CHK (Chickasha Municipal) Chickasha, OK

*5b. Federal Entity Identifier:	*5b. Federal Award Identifier:
40-0018	

State Use Only:

6. Date Received by State:	7. State Application Identifier:

8. APPLICANT INFORMATION:

*a. Legal Name: City of Chickasha

*b. Employer/Taxpayer Identification Number (EIN/TIN):	*c. Organizational DUNS:
73-6005139	14-087-6330

d. Address:

*Street 1: CITY HALL 117 N 4TH STREET
Street 2:
*City: CHICKASHA
County/Parish:
*State: OK
Province:
*Country: USA: United States
*Zip / Postal Code 73018

e. Organizational Unit:

Department Name:	Division Name:

f. Name and contact information of person to be contacted on matters involving this application:

Prefix:
*First Name: ~~Clint~~ Tyler
Middle Name:
*Last Name: ~~Ferguson~~ Brooks
Suffix:

Title: ~~Airport Attendant~~ City Manager

Organizational Affiliation:

*Telephone Number: (405) 222-~~6006~~ 6001 Fax Number:

*Email: ~~airport@chickasha.org~~ tyler.brooks@chickasha.org

OMB Number: 4040-0004
Expiration Date: 12/31/2022

Application for Federal Assistance SF-424

***9. Type of Applicant 1: Select Applicant Type:**

X. Airport Sponsor

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select 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:**

NA

*Title:

NA

13. Competition Identification Number:

NA

Title:

NA

14. Areas Affected by Project (Cities, Counties, States, etc.):

***15. Descriptive Title of Applicant's Project:**

$32,000 for costs related to operations, personnel, cleaning, sanitization, janitorial services, combating the spread of pathogens at the airport, and debt service payments.

Attach supporting documents as specified in agency instructions.

OMB Number: 4040-0004
Expiration Date: 12/31/2022

Application for Federal Assistance SF-424

16. Congressional Districts Of:

*a. Applicant: 4 *b. Program/Project: 4

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

17. Proposed Project:

*a. Start Date: NA *b. End Date: NA

18. Estimated Funding ($):

*a. Federal	$32,000
*b. Applicant	$0
*c. State	$0
*d. Local	$0
*e. Other	$0
*f. Program Income	$0
*g. TOTAL	$32,000

***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? (If "Yes", provide explanation in attachment.)**

☐ Yes ☒ No

If "Yes", provide explanation and attach

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: _____ *First Name: ~~Clint~~ Tyler

Middle Name: _____

*Last Name: ~~Ferguson~~ Brooks

Suffix: _____

*Title: ~~Airport Attendant~~ City Manager

*Telephone Number: (405) 222-~~6006~~ 6001 Fax Number:

* Email: ~~airport@chickasha.org~~ tyler.brooks@chickasha.org

*Signature of Authorized Representative: Tyler Brooks *Date Signed: 16 Nov 21

City of Chickasha

RESOLUTION No. 2021-23R

A RESOLUTION CONCERNING THE AMERICAN RESCUE PLAN ACT TARGETED GRANTS TO AIRPORTS (FAA ARPA FUNDS), AUTHORIZING THE ACCEPTANCE OF THE FUNDS AND THE EXECUTION OF ALL NECESSARY AGREEMENTS AND RELATED DOCUMENTS

WHEREAS, the Chickasha Municipal Airport Authority has been designated as a recipient of the American Rescue Plan Act Targeted Grants to Airports (FAA ARPA Funds), and has been designated as a recipient of the amount of $32,000.00.

WHEREAS, the Chickasha Municipal Airport Authority will be required to budget said funds and to account for all expenditures in accordance with applicable federal guidelines.

WHEREAS, authorization for the execution of all necessary agreement and related documents will expedite the receipt and expenditure of funds.

WHEREAS the Chickasha Municipal Airport Authority approves acceptance of the FAA ARPA Funds and acknowledges all expenditures must be in accordance with all FAA ARPA Funds guidelines and compliance requirements.

WHEREAS the Chickasha Municipal Airport Authority authorizes the City Manager/Airport Manager to sign all necessary budget attestations, award terms and conditions, assurances of compliance, reports and all other necessary agreements and related documents related to the award of funds.

This Resolution is approved in open meeting of the City of Chickasha, Oklahoma, on the 6th day of December 2021.

CITY OF CHICKASHA

_____
Chris Mosley, Mayor

ATTEST:

_____
Susan M. McDaniel, City Clerk

Approved as to Form:

_____
City/Town Attorney

City of
CHICKASHA

Meeting Type: CMAA Agenda 12-6-2021

Meeting Date: 12/6/2021

Department: City Clerk **Agenda Item No. 2.d.**

AGENDA ITEM: Acceptance of change of broker for airport insurance policies.

I. BACKGROUND/DESCRIPTION:

II. RECOMMENDED ACTION:
Accept change of broker for airport insurance policies.

III. FISCAL INFORMATION -

IV. FUND INFORMATION:

Dept. Director:	Fund	Account	Amount
	(To)		
	FUND	ACCOUNT	AMOUNT
Meeting Date: December 6, 2021	(From)		

V. ATTACHMENTS:
1. Chubb

CHUBB

1100 Poydras Street, Suite 2150
New Orleans, LA 70163
Tel 504-310-3606

TO:	Corrine Aguilar OKLAHOMA MUNICIPAL ASSURANCE GROUP Edmond, Oklahoma 73013	**FROM:** **RISK ID:**	RACHEL WOODS 152130
EMAIL:	caguilar@omag.org	**DATE SENT:**	October 25, 2021

AIRPORT OWNERS AND OPERATORS LIABILITY QUOTATION

WITH

ACE PROPERTY AND CASUALTY INSURANCE COMPANY

(AA S&P, A++ BEST)

In accordance with your request, we are pleased to provide the following quotation:

Please read this Quotation carefully, as the limits, coverage and other terms and conditions may vary significantly from those requested in your submission and/or from the expiring policy. Terms and conditions that are not specifically mentioned in this Quotation are not included. The terms and conditions of this Quotation supersede the submitted insurance specifications and all prior proposals and binders. Actual coverage will be provided by and in accordance with the policy as issued.

The insurer is not bound by any statements made in the submission purporting to bind the insurer unless such statement is reflected in the policy or in an agreement signed by someone authorized to bind the insurer.

This Quotation has been constructed in reliance on the data provided in the submission. A material change or misrepresentation of that data voids this Quotation.

This quotation is not a binder of insurance. In no event will this quotation remain open beyond 30 days from the quote issuance date shown above or the coverage effective date, whichever comes first.

This quotation is subject to the Assured's producer being duly licensed in his/her resident state; in addition, the producer must hold a non-resident license in the state in which the Assured is domiciled if different from the producer's resident state.

********THREE YEAR FIXED PREMIUM POLICY OPTION********

We offer the option for a three year policy term with premium fixed at three times the annual terms shown in this quotation. Premium to be paid in three equal annual installments.

NAMED INSURED:	**Chickasha, City of**
NAMED INSURED'S ADDRESS:	117 N. 4th Street Chickasha, Oklahoma, 73018

PERIOD: From: November 1, 2021 To: November 1, 2024
both days at 12:01 a.m. Local Time at the address of the Named Insured

INTEREST: The Insured's legal liability to which this policy applies, arising out of the Insured's Airport operations at the following airport location(s):

F.A.A. ID	State	Name
CHK	OK	Chickasha Municipal Airport, Chickasha, Oklahoma

SUM INSURED: $10,000,000 each occurrence/offense in respect of Bodily Injury, Personal and Advertising Injury and Property Damage combined, subject to the following limitations:

Products-Completed Operations Annual Aggregate Limit	$10,000,000
Personal Injury and Advertising Injury Annual Aggregate Limit	$10,000,000
Malpractice Annual Aggregate Limit	$10,000,000
Extended Coverage – War, Hi-jacking and Other Perils Annual Aggregate Limit	$10,000,000
Fire Damage Limit Any One Fire	$50,000
Medical Expense Limit Any One Person	$1,000
Hangarkeepers not "in flight" Limit Any One Occurrence	$10,000,000
Hangarkeepers not "in flight" Limit Any One Aircraft	$10,000,000
Non-Owned Aircraft Liability Limit Any One Occurrence	Not Insured

DEDUCTIBLE:
$5,000 Hangarkeepers Liability Any One Aircraft
$5,000 Hangarkeepers Liability Any One Occurrence

CONDITIONS: The Airport Owners and Operators General Liability Policy contains, inter alia, the following exclusion clauses:

War, Hi-Jacking and Other Perils Exclusion Clause
Noise, Pollution and other Perils Exclusion Clause

The policy is also subject to the following:

30 days notice of cancellation, non-renewal or reduction in coverage by Insurer, but
10 days notice for non-payment of premium. This provision does not override the Automatic
Termination review or cancellation provisions of endorsements AAP 203 or AAP 237.

The policy may be cancelled or nonrenewed subject to the terms of the following endorsement

AAP OK (11/99) Oklahoma Changes - Cancellation and Nonrenewal

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Schedule of Policy Forms applicable to airports and locations in: **Oklahoma**

Form Reference and Edition	Title
9001-OK (11/00)	Oklahoma Changes - Transfer Of Rights
9002-OK (11/00)	Oklahoma Notice

AAP 200 (05/21)	Airport Owners and Operators General Liability Policy - Jacket
AAP 201 (11/99)	Airport Owners and Operators General Liability Policy - Declarations
AAP 201S (11/99)	Airport Owners and Operators General Liability Policy - Schedule of Endorsements
AAP 202 (11/99)	Airport Owners and Operators General Liability Policy - Policy Provisions
AAP 203 (02/08)	Extended Coverage - War, Hi-jacking and Other Perils Endorsement *Annual Additional Premium 230*
AAP 204 (11/03)	Amendment of Noise and Pollution and Other Perils Exclusion
AAP 210 (11/99)	Amendment of Deductible Amounts and Conditions Endorsement *Each Occurrence or Offense Deductible Not Applicable* *Coverages Aggregate Deductible Not Applicable*
AAP 212 (11/99)	Fees and Expenses Included in Deductible Endorsement
AAP 220 (11/99)	Immunity Waiver Endorsement
AAP 234 (11/99)	Airport Limited Enhanced Coverage Endorsement
AAP 236 (11/04)	Limited Additional Insured Designated Person or Organization Endorsement *Name and Address of Additional Insured Epic Aviation, LLC* *P.O. Box 12249* *Salem, OR 97309*
AAP 237 (11/99)	Nuclear Risks Exclusion Clause
AAP 242 (11/99)	Personal Injury Limitation Endorsement
AAP 248 (11/99)	Volunteers Endorsement
AAP 255 (03/08)	Date Recognition Limited Coverage Endorsement
AAP 256 (11/99)	Date Recognition Exclusion Endorsement
AAP 270 (01/15)	Amendment to Include Coverage for Certified Acts of Terrorism; Cap on Losses from Certified Acts of Terrorism
AAP 273 (11/03)	Pollution Endorsement
AAP 275 (01/15)	Limited Terrorism Coverage Endorsement
AAP 277 (01/06)	Silica And Silica-Related Dust Exclusion
AAP 306 (03/08)	Infringement of Copyright, Patent, Trademark or Trade Secret Endorsement
AAP 307 (03/08)	Amendment to Supplementary Payments (Court Cost) Endorsement
AAP 316 (02/21)	Exclusion - Access or Disclosure of Confidential or Personal Information - Advertising Injury or Personal Injury
ALL-20887 (10/06)	ACE Producer Compensation Practices & Policies
ALL-21101 (11/06)	Trade or Economic Sanctions Endorsement
IL P 001 (01/04)	U.S. Treasury Departments' Office of Foreign Assets Control ("OFAC") Advisory Notice to Policyholders
TR-19604e (08/20)	Notice Of Terrorism Insurance Coverage

Payable in three equal installments.

PERIOD	
GL Premium:	**$35,709**
PERIOD	
TRIA Premium:	**$3,570**
PERIOD	
WAR Premium:	**$3,570** reducing to **$894** if TRIA coverage also purchased.

The War and TRIA coverages and premiums are quoted on an "if required" basis and may be rejected by the insured.

Please note that you do not have authority to bind the above insurance. Please contact us if you wish to bind this insurance. We look forward to receiving your instructions and thank you for your inquiry.

On behalf of ACE Property and Casualty Insurance Company

By Rachel M Woods

Authorized Representative