

Facility Information Worksheet

Airport: Bois Blanc Island Airport

FAA ID: 6Y1

The Facility Information Worksheet is a data collection tool for the 2017 Michigan Aviation System Plan (MASP) update. Information on this worksheet will be used to verify the existing facilities and services at system airports in order to analyze current system performance, and to guide future development. We need your help! **Please take a moment to verify the pre-populated information contained in this worksheet is correct and fill in any missing information.** If information is incorrect, please cross it out and make the appropriate changes. After completing the entire worksheet, **sign the statement at the end and return the worksheet before the deadline.** To return the worksheet, please use one of the following methods:

Scan and email all four pages to
Marshall Pomeroy at:

marshall.pomeroy@meadhunt.com

By US mail:

Mead & Hunt, Inc.
Attn: 2017 MASP Facilities Worksheet
2605 Port Lansing Road
Lansing, MI 48906

Please return the worksheet no later than September 9, 2016.

Please feel free to contact our consultant, Mead & Hunt, with any questions at (614) 607-5217. Ask for Marshall Pomeroy, our data collection specialist. If you would like us to send you a self-addressed stamped envelope, please contact Marshall by phone or email and request one. Thank you for taking the time to help plan for the future of the Michigan aviation system.

Airport Information

Associated City	County	Airport Reference Code (ARC)
Bois Blanc Island	Mackinac	B-I
Airport Tier	MDOT Region	Michigan Prosperity Region
Tier 1	Superior	Eastern UP

Primary Runway System

Primary Runway	Length (feet)	Width (feet)
10/28	3,498	75
Surface Type (see key)		
ASPH-Asphalt/Bituminous Concrete		
KEY: Runway Surface Types		
ASPH CONC-Asphalt/Concrete		
ASPH GRVL-Asphalt/Gravel		
ASPH-Asphalt/Bituminous Concrete		
CONC-Portland Cement Concrete		
TURF-Grass; Sod		

Runway Edge Lights Intensity (see key)	Taxiway System (see key)
MIRL	Direct Connector
KEY: Runway Lighting Intensity	
HIRL	High-Intensity Runway Lighting
MIRL	Medium-Intensity Runway Lighting
LIRL	Low-Intensity Runway Lighting
Non-Standard	Lighting does not meet FAA standards and has improper spacing, color or placement.
KEY: Taxiway System	
Full Parallel	A taxiway or series of taxiways generally parallel to the runway, allowing taxiing between each end of the runway without crossing the runway to which they are parallel.
Partial Parallel	A taxiway or series of taxiways parallel to only a portion of the entire length of the runway.
Direct Connector	A taxiway that connects directly from a parking/apron areas directly to an airport's runway.

Primary Runway PCI (index value)	Date of Last Runway PCI Inspection
66	7/16/2015
Primary Taxiway PCI (index value)	Date of Last Taxiway PCI Inspection
79	7/16/2015
<i>Note: The Pavement Condition Index (PCI) is based on the largest section of pavement of each primary runway and taxiway that is associated with the primary runway. If there are lateral differences in PCI, the center PCI is used as the runway PCI value.</i>	

Runway Ends	RWY 10	RWY 28	
Visual Glide Slope Indicator (see key)	No	P4L	
Runway End Identifier Lights (REIL)	No	Yes	
Approach Lights (see key)	No	No	
KEY: Visual Glide Slope Indicators (VGSI)			
VASI	Visual Approach Slope Indicator	PAPI	Precision Approach Path Indicator
V2L	2-box VASI on the Left side of the runway	P2L	2-box PAPI on the Left side of the runway
V2R	2-box VASI on the Right side of the runway	P2R	2-box PAPI on the Right side of the runway
V4L	4-box VASI on the Left Side of the runway	P4L	4-box PAPI on the Left Side of the runway
V4R	4-box VASI on the Right side of the runway	P4R	4-box PAPI on the Right side of the runway
KEY: Approach Lights			
ALSF2	High Intensity Approach Lighting System With Sequenced Flashers		
MALS	Medium Intensity Approach Lighting System		
MALSF	Medium Intensity Approach Lighting System with Sequenced Flashers		
MALSR	Medium Approach Light System with Runway Alignment Indicator Lights		
ODALS	Omnidirectional Approach Lighting System		

Airport Lighting and Visual Aids

Rotating Beacon (Y/N)	Lighted Wind Indicator (Y/N)	Segmented Circle (Y/N)
Yes	Yes	Yes

Basic Pilot and Aircraft Services

24-hour Pilot/Passenger Terminal (Y/N)	24-hour Telephone (Y/N)	24-hour Restrooms (Y/N)
Yes	Yes	Yes
Airport Attendance (during normal business hours)		
Unattended		
Fuel Available (100LL, JET A, MOGAS, Other)	Aircraft Maintenance (Major/Minor A&P)	
None	None	
Additional Aircraft Maintenance Information (additional services, availability)		
Tie-down Storage (Based/Transient/Both/None)	Hangar Storage (Based/Transient/Both/None)	Apron Parking Area (Based/Transient/Both/None)
Both		
<i>Note: Please indicate if hangars, tie-downs, and apron parking are available to based or transient aircraft, or both.</i>		

Approach Protection

Type of Plan or Ordinance	Date Adopted or Filed
Approach Plan	11/15/2006
Applicable Municipalities (townships, counties, cities, etc.)	

Airport Access

Primary Approach Type (precision, non-precision, visual)	Procedure (ILS, GPS, VOR, etc.)
Non-Precision	RNAV (GPS)
Weather Reporting (see key)	Snow Removal (Y/N)
None	Yes
KEY: Weather Reporting	
ASOS Automated Surface Observing System	
AWOS Automated Weather Observing System	
AWOS 3 Reports altimeter, wind, temperature, dew point, density altitude, visibility, and cloud/ceiling data	
AWOS- 3P Provides a precipitation identification sensor in addition to typical AWOS 3 information	
AWOS- 3P/T Same as AWOS 3P, plus thunderstorm/lightning reporting and sensing capability	

Weather Briefing Access (weather briefing system, computer and/or internet access)
Cellular Phone Coverage (adequate for weather briefings – Y/N)

Landside Access – Private/Public Transportation Available (check all the apply):	
Courtesy Car: _____	Taxi: _____
Dial-A-Ride: _____	Limo: _____
Public Transit: _____	Bicycles: _____
Rental car: _____	*Other: _____
*If other, please specify:	
<i>Note: Transportation may be by arrangement or nearby (i.e. in town) as long as contract information is available.</i>	

Additional Information

Comments – Please include any additional comments or information

Worksheet Verification

Please complete the verification below:

I, (please print) _____ verify that the information provided in this worksheet is accurate to the best of my knowledge.

Signature

Title

Date

Phone

Email

Thank you for completing the Facility Information Worksheet!