

Community Benefits Assessment Worksheet

Table A – Aviation Related Jobs at the Airport

Category	# of Jobs	Description
A1. Federal Government (FAA, TSA, CBP)		
A2. Local Government		
A3. FBO and Private Contractors		
A4. Airline and Other Aviation Businesses		
A5. Shipping and Warehousing		
A6. Terminal Concessions		
A7. Other (specify)		

Table B – Non-Aviation Related Jobs at the Airport

Category	# of Jobs	Description
B1. Municipal Offices		
B2. Professional Services		
B3. Manufacturing		
B4. Other (specify)		

Table C – Off Airport Air-Reliant Business

Category	# of Jobs	Description
C1. Shipping / Warehousing		
C2. Airline Catering and other Services		
C3. Reliant Manufacturers		
C4. Reliant Services		
C5. Reliant Government Activities		
C6. Other (specify)		

Table D – Operations

Operations	GA Local	GA Itinerant	Air Taxi (Commuter)	Air Carrier	Military
D1. Annual Operations*					
D2. Passengers per Operation (incl. Pilot)					
D3. Visitor Portion of Passengers					
D4. Cargo Tons per Operation					

NOTE: If items marked with an asterisks (*) are left blank, System Plan forecast numbers will be used

Table E – Based Aircraft

Based Aircraft	Single Engine	Multi-Engine	Jet	Rotorcraft	Other / Military / Gliders
E1. Number of Based Aircraft					

NOTE: If left blank, System Plan forecast numbers will be used

Table F – Fuel Sales

Fuel Type	100LL (Avgas)	Jet A	Other (specify)
F1. Fuel sold in past 12 months (gallons)			

Please Return by **September 9, 2016** to: Michigan Department of Transportation
Office of Aeronautics
Attn: Linn Smith
2700 Port Lansing Rd
Lansing, MI 48906

You may also email worksheet to:
SmithL50@michigan.gov

Worksheet Completed by (print name): _____

Title: _____

Airport Name: _____

3-Letter Airport ID: _____

Date: ____/____/____