

Nome Water Transmission Line Analysis

FY2004 Request: \$105,000
Reference No: 38247

AP/AL: Allocation
Category: Health/Human Services
Location: Nome
House District: Bering Straits (HD 39)
Estimated Project Dates: 07/01/2003 - 06/30/2008
Appropriation: Municipal Water, Sewer and Solid Waste Matching Grant Projects

Project Type: Planning
Recipient: City of Nome
Contact: James Evensen
Contact Phone: (907)465-6594

Brief Summary and Statement of Need:

Assess the condition of the Moonlight Springs line and plan for its eventual replacement.

| Funding: | <u>FY2004</u> | <u>FY2005</u> | <u>FY2006</u> | <u>FY2007</u> | <u>FY2008</u> | <u>FY2009</u> | <u>Total</u> |
|-----------------|------------------|---------------|---------------|---------------|---------------|---------------|------------------|
| AHFC Div | \$26,300 | | | | | | \$26,300 |
| Fed Rcpts | \$78,700 | | | | | | \$78,700 |
| Total: | \$105,000 | \$0 | \$0 | \$0 | \$0 | \$0 | \$105,000 |

| | | | | |
|----------------------------------------------------------|------------------------------------------------------|---------------------------------------|---------------------------------------------|-----------------------------------|
| <input checked="" type="checkbox"/> State Match Required | <input checked="" type="checkbox"/> One-Time Project | <input type="checkbox"/> Phased - new | <input type="checkbox"/> Phased - underway | <input type="checkbox"/> On-Going |
| 25% = Minimum State Match % Required | | <input type="checkbox"/> Amendment | <input type="checkbox"/> Mental Health Bill | |

Operating & Maintenance Costs:

| | <u>Amount</u> | <u>Staff</u> |
|----------------------|---------------|--------------|
| Project Development: | 0 | 0 |
| Ongoing Operating: | 0 | 0 |
| One-Time Startup: | 0 | |
| Totals: | 0 | 0 |

Additional Information / Prior Funding History: