



U.S. Department  
of Transportation  
**Federal Aviation  
Administration**

## ATLANTA LARGE TRACON

784 GA Hwy 74 S  
Peachtree City, GA 30269

JAN 12 2004

JAN 14 2004

Ms. Tiffany Andrews  
Program Manager  
Middle Georgia Regional Development Center  
175-C Emery Highway  
Macon, GA 31217

Dear Ms. Andrews:

Pursuant to your inquiry regarding the Federal Aviation Administration's (FAA) position on accommodating potential increases in mission operations at Robins Air Force Base; the FAA makes every effort, within its areas of responsibility, to help ensure that the nation's defense needs are adequately addressed. The FAA has a long history of cooperating with the Services, the Department of Defense, host communities and the air carriers to provide safe access to the airways. Certainly, the FAA will continue this practice. If additional missions are assigned to Robins Air Force Base, FAA will, within its regulatory and statutory authority, accommodate any new mission requirements.

Sincerely,

Frances Mulkey  
Air Traffic Manager

### Form 6.3 / Water

See Section 6.3 for instructions and discussion. Copy additional pages as needed for internal use.

**Provider**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address (street address/city/zip) \_\_\_\_\_

**Capacity**

Source of Supply  Deep Wells  Lake  Surface Water  Other

Water Storage Location \_\_\_\_\_ Type \_\_\_\_\_

Capacity (mgd) \_\_\_\_\_ Peak Demand (mgd) \_\_\_\_\_ Available Capacity (mgd) \_\_\_\_\_

Expansion Plans? (if so, describe, including timeline) \_\_\_\_\_

**Average Cost**

Average Cost per 1,000 Gallons \_\_\_\_\_

**Date of Data** \_\_\_\_\_ **Source** \_\_\_\_\_ **Date of Source** \_\_\_\_\_

✓ \_\_\_\_\_

### Form 6.4 / Wastewater System

See Section 6.4 for instructions and discussion. Copy additional pages as needed for internal use.

**Provider**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address (street address/city/zip) \_\_\_\_\_

**Capacity**

Capacity (mgd) \_\_\_\_\_ Peak Demand (mgd) \_\_\_\_\_ Available Capacity (mgd) \_\_\_\_\_

Expansion Plans? (If so, describe, including timeline) \_\_\_\_\_

**Average Cost**

Average Cost per 1,000 Gallons \_\_\_\_\_

| Date of Data | Source | Date of Source |
|--------------|--------|----------------|
| ✓            | _____  | _____          |

## Form 6.5 / Waste Disposal

See Section 6.5 for instructions and discussion. Copy additional pages as needed for internal use.

### Landfill Providers

|                   |                            |       |
|-------------------|----------------------------|-------|
| Provider 1 (name) | Distance from City (miles) | Class |
| Provider 2 (name) | Distance from City (miles) | Class |
| Provider 3 (name) | Distance from City (miles) | Class |

### Landfill Capacity

Provider 1 (capacity in years)

Provider 2 (capacity in years)

Provider 3 (capacity in years)

Expansion Plans? (If so, describe, including timeline)

### Recycling & Recovery Programs in Area

Materials Recovery Facility (MRF) if available (name) \_\_\_\_\_ Distance from City (miles) \_\_\_\_\_

Recycling Incentive Pgm.  Pick-Up Services  Other:

### Hazardous Waste Disposal

Nearest Provider 1 (name) \_\_\_\_\_ Distance from City (miles) \_\_\_\_\_ Class \_\_\_\_\_

Nearest Provider 2 (name) \_\_\_\_\_ Distance from City (miles) \_\_\_\_\_ Class \_\_\_\_\_

Approved local hauler available to transport hazardous waste?  Yes  No

| Date of Data | Source | Date of Source |
|--------------|--------|----------------|
| ✓            | _____  | _____          |
| ✓            | _____  | _____          |
| ✓            | _____  | _____          |

## Form 6.1 / Electric Power

See Section 6.1 for instructions and discussion. Copy additional pages as needed for internal use.

### Local Distribution Company (LDC)

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address (street address/city/zip) \_\_\_\_\_

Substation Locations (owned by utility) \_\_\_\_\_

### Average Cost (\$ per kWh)

|                            |          |
|----------------------------|----------|
| Commercial Facility        | \$ _____ |
| Medium Industrial Facility | \$ _____ |
| Large Industrial Facility  | \$ _____ |

Assumptions Used in Estimating Costs:

\_\_\_\_\_

\_\_\_\_\_

### Discounts and Incentive Rates

Special Rates for Larger Companies?  Yes  No If yes, what is the entry threshold? \_\_\_\_\_

Real-time Pricing Available?  Yes  No

Primary Metering Discounts?  Yes  No

Incentive Rates or Negotiating Ranges?  Yes  No If yes, please describe below:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

|              |        |                |
|--------------|--------|----------------|
| Date of Data | Source | Date of Source |
|--------------|--------|----------------|

✓ \_\_\_\_\_

**Form 6.1 / Electric Power** *continued*

See Section 6.1 for instructions and discussion. Copy additional pages as needed for internal use.

**Deregulation**

Date Instituted

Phase-In Period

Qualifying Threshold

Description

Date of Data

Source

Date of Source

✓