

FAA Form 5100-110, Request for FAA Approval of Agreement for Transfer of Entitlements

Paperwork Reduction Act Burden Statement

A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a currently valid OMB Control Number. The OMB Control Number for this information collection is 2120-0569. Public reporting for this collection of information is estimated to be approximately 8 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing and reviewing the collection of information. All responses to this collection of information are required under 49 U.S.C. Section 47105 to retain a benefit and to meet the reporting requirements of 2 CFR 200. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to the Federal Aviation Administration at: 800 Independence Ave. SW, Washington, DC 20591, Attn: Information Collection Clearance Officer, ASP-110.

OMB CONTROL NUMBER: 2120-0569 EXPIRATION DATE: 8/31/2019

Request for FAA Approval of Agreement for Transfer of Entitlements

In accordance with	n 49 USC § 47117(c)(2),				
Name of Transfer	ring Sponsor:				
hereby waives rec	eipt of the following amou	nt of funds apportione	ed to it under 49 USC	§ 47117(c) for	the:
Name of Transfer	ring Airport (and LOCID):			()
for each fiscal yea	r listed below:				
	Entitlement Type (Passenger, Cargo or Nonprimary)	Fiscal Year	Amount		
	Total				
	ion Administration has det			de available to	:
Name of Airpo	ort (and LOCID) Receiving	Transferred Entitlem	ents:	()
Name of Rece	eiving Airport's Sponsor:			•	,
a public use airporunder 49 USC § 4	rt in the same state or geo 7104(a).	graphical areas as th	e transferring airport f	or eligible proje	ects
The waiver expire apportioned funds	s on the earlier of lapses under 49 USC § 4	•	date) or when the avai	ilability of	
For the United St	ates of America, Federa	I Aviation Administr	ation:		
Signature:					
Name:					
Title:					
Date:					

Certification of Transferring Sponsor
I declare under penalty of perjury that the foregoing is true and correct. I understand that knowingly and willfully providing false information to the federal government is a violation of 18 USC § 1001 (False Statements) and could subject me to fines, imprisonment, or both.
Executed on this day of ,
Name of Sponsor:
Name of Sponsor's Authorized Official:
Title of Sponsor's Authorized Official:
Signature of Sponsor's Authorized Official:
Certificate of Transferring Sponsor's Attorney
I, acting as Attorney for the Sponsor do hereby certify that in my opinion the Sponsor is empowered to enter into the foregoing Agreement under the laws of the state of . Further, I have examined the foregoing Agreement and the actions taken by said Sponsor and Sponsor's official representative has been duly authorized and that the execution thereof is in all respects due and proper and in accordance with the laws of the said state and 49 USC § 47101, et seq.
Dated at (City, State),
this day of ,
Signature of Sponsor's Attorney: