

Strategic Event Coordination (SEC) & Airport Sponsor Responsibilities

FAA Northwest Mountain Region Airports Conference

Tom Clark, SEC WSA P&R Contact Person

(425) 203-4735, tom.clark@faa.gov

April 18, 2012



Federal Aviation
Administration



OVERVIEW

- **What are strategic events?**
- **Who needs to know?**
- **What can I expect?**
- **What are my responsibilities?**
- **Questions?**



STRATEGIC EVENTS

Strategic Events:

- **NAVAID shutdowns (ILS, PAPI, REIL etc.)**
- **Runway closures (partial or full)**
- **Significant taxiway closures**

(At “Core 30” airport or if FAA Airports considers it significant)

How Long?:

- **Greater than 24 hours, or**
- **4 hours for consecutive days.**

WHO NEEDS TO KNOW?

- **FAA:**
 - Air Traffic Control Facilities
 - System Maintenance Personnel
 - Flight Standards
 - Flight Procedures Team
- **Air Carriers**
- **Pilots / National Airspace System Users**

WHAT CAN I EXPECT?

- **ADO will coordinate your 7460-1 Notice of Proposed Construction**
- **ADO will provide you the SEC form and instructions in the NRA determination letter**
- **The information will always be appreciated**



SPONSOR RESPONSIBILITIES

- **Submit FAA Form 7460-1, Notice of Airport Construction**
- **Email SEC form 45 days before strategic event (ADO will provide form / email address is on form).**
- **Provide updates/date changes**
- **Questions? Contact ADO or email questions to 9-AJV-SEC-WSA@faa.gov (address is on form)**



SEC Form Example

National NAS Strategic Interruptions Service Level Agreement
AIRPORT SPONSOR STRATEGIC EVENT SUBMISSION FORM

Submit this form preferably 45 days prior to the event to the Federal Aviation Administration,
 Air Traffic Organization, Planning and Requirements, Western Service Area
 Please email form to 9-AJV-SEC-WSA@faa.gov

AIRPORT NAME _____ LOCATION ID _____

CITY, STATE _____

Referenced NRA NUMBER _____

PROJECT SCOPE (Example: Reconstruct Runway 18/36) _____

PROJECT PHASE (Example: Phase 1 of 3) _____

EVENT (Example: Runway 18/36 closure) _____

Duration: Start Date _____ End Date _____

Hours: 24 hrs a day or from: _____ to: _____ daily

Other hours of Operation Specify: _____

FACILITIES IMPACTED:

Are any facilities impacted? Yes No If yes, list impacted facilities below along with the duration of the impacts if different than duration of the event (these facilities may be found on the NRA determination letter).

Facility: (Example: RWY 18 localizer)	Facility: _____
Start Date _____ End Date _____	Start Date _____ End Date _____
Hours: Start/End Time _____	Hours: Start/End Time _____
Facility: _____	Facility: _____
Start Date _____ End Date _____	Start Date _____ End Date _____
Hours: Start/End Time _____	Hours: Start/End Time _____
Facility: _____	Facility: _____
Start Date _____ End Date _____	Start Date _____ End Date _____
Hours: Start/End Time _____	Hours: Start/End Time _____

Submitted by Sponsor Representative:

Print Name _____

Title _____

Signature _____ Date _____

Questions?

