ARKANSAS EXTENSION OF TELECOMMUNICATIONS FACILITIES FUND

Grant Request Application Instructions

I. Filing Requirements and General Instructions

A. Introduction

On January 18, 2002, the General Staff of the Arkansas Public Service Commission (APSC) and several local exchange carriers brought a motion to request the APSC to establish a rulemaking proceeding to comply with Arkansas State Act 1771 of 2001. Act 1771, codified in Ark. Code Ann. §23-1 7-404(e)(8), required the APSC to establish a grant program for the extension of facilities to persons un-served by an eligible telecommunications carrier's (ETC's) wire line services. This motion was established in Docket No. 02-012-R. On April 24, 2002, the APSC issued Order No. 3, Docket No. 02-012-R, which approved the revisions to the APSC's Telecommunications Providers Rules. Effective July 1, 2017, the APSC has contracted Arkansas Rural Strategies, LLC to serve as the trustee of the AETFF.

B. Who Must File

Arkansas Code Ann. §23-1 7-404(e)(8)(A)(i) states that the APSC shall establish by regulation a grant program to make grants available to eligible telecommunications carriers for the extension of facilities to citizens un-served by wire line services of an eligible telecommunications carrier. Any eligible telecommunications carrier may request grants.

C. When and Where to File

Grant Request and True-Up applications will be accepted by Arkansas Rural Strategies, LLC as of July 1, 2017. Arkansas Rural Strategies, LLC will disburse funding for approved grants by the 10th day of the month following the month during which sufficient funds become available to cover the entire grant. True-up grants will generally be disbursed first. Grant Request and True-Up applications can be found on the Arkansas Rural Strategies, LLC website at www.arrural.com.

D. Compliance

Eligible Telecommunications Carriers must comply with all applicable Arkansas Telecommunications Providers Rules (3.03, 9.01, 9.02 & 9.03) and Arkansas Code Ann. §23-17-404(e)(8) in order to receive funding from the AETFF.

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II. Line-by-Line Instructions for Completion of the Grant Request Application

All information provided on the application must be legible and printed in ink or typed.

Line 1 -Date

Enter the date when the form is completed.

Line 2 -Requesting ETC's Name

Enter the name of the ETC applying for the grant.

Line 3 - Payment Address

Enter the address where payment will be sent if the grant is approved.

- **Line 4 -Original or Revision** Checkmark the box that indicates whether this is an original submission or a revision to previously submitted data. Do not use the revision box to indicate a True-Up submission; use the True-Up application for this purpose.
- Line 5 -Number of additional Customers Served, CLLI Code and Exchange Name Enter the number of additional customers served associated with this request, enter CLLI Code and Exchange Name related to the grant.
- Line 6 -Copy of Extension of Service Agreement Checkmark the box if a completed copy of the Extension of Service Agreement is attached. The Extension of Service Agreement should include the following items: (1) name and address of applicant, (2) date of application, (3) location and description of the service point, (4) a summary of the engineering study, if any, (5) a sketch of the construction route, (6) explanation of all charges to the applicant in reasonable detail, (7) estimated starting date of construction, (8) estimated completion date of construction, (9) terms of payment and (10) customer reimbursement by the LEC, if applicable (Arkansas Telecommunications Providers Rule -3.03.B).
- **Line 7 -Copy of ETC's Extension of Facilities Tariff** Checkmark the box if a completed copy of the ETC's Extension of Facilities Tariff is attached. Until July 1, 2005, the applicant's required contribution to construction costs is determined by using the ETC's Extension of Facilities Tariff in effect as of April 18, 2001 (Arkansas Telecommunications Providers Rule -9.03.D.(2)).
- **Line 8 -Copies of Letters from other ETCs Bordering Unallocated Territory** Checkmark the box if copies of the letters received from other ETC's bordering unallocated territory are attached (Arkansas Telecommunications Providers Rule -9.03 .A.(3)).

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- Line 9 -Names and Addresses of Arkansas General Assembly Members whose Constituents would Benefit from Requested Grant Checkmark the box if all names and addresses of the Arkansas General Assembly Members whose constituents would benefit from the requested Grant are attached (Arkansas Telecommunication Providers Rule -9.02.A.(5)).
- Line 10 -ETC Letter indicating Grant Award Criteria Checkmark the box if an ETC letter is attached that includes the length of time the citizen(s) have been un-served, the households affected (Arkansas Code Ann. §23-17404(e)(8)), that the grant is not requested to extend wireline facilities to replace basic exchange telecommunications radio service (BETRS) or to extend facilities to serve temporary or seasonal service requirements; and that the grant is requested for future extensions of facilities (Arkansas Telecommunications Providers Rule -9.03.D.(1),(3)(5)).
- **Line 11 -Additional Information** Checkmark the box if additional information has been provided to further justify the grant.

Line 12 -Agreement Amount

Enter the total agreement amount for the extension of facilities to satisfy the request.

Line 13 -Applicant Contribution Enter the Applicant Contribution required by each potential customer to be served by the extension of facilities (up to the maximum of two hundred fifty dollars (\$250.00).

Line 14 - Total Grant Requested

Subtract Line 13 from Line 12. This is the amount of the ETC's Grant Request.

- **Line 15 -Certification** Enter the date, officer name, officer signature, and officer title. The officer's signature attests to the accuracy of all information on the application.
- **Line 16 -Contact Information** Enter the date, contact name, contact phone and contact title. The contact person should be able to provide worksheet clarification and could serve as the first point of contact for the Arkansas ETFF trustee.
- **Line 17 -Contact Mailing Information** Enter the contact mailing address and e-mail address. Correspondence from the trustee will be sent to this address.