SCRP Status Update

FCC Form 5640

OMB Control No. 3060-1270

File No. SC-SU0002267

Applicant Information

Applicant FRN	0004213724	Applicant Address	870-C William Hilton Parkway
Applicant Name	Hargray Communications Grc	Applicant City	Hilton Head Island
Applicant Email	trey.judy@htc.hargray.com	Applicant State	SC
Applicant Phone	8436861210	Applicant ZIP Code	29938

Contact Information

Is the contact the same as the contact listed on the Application Request for Funding Allocation? If not, please list below.		
Contact Name Lori Lewellyn	Contact Address	18 Gibbet Rd
Contact Email lori.lewellyn@htc.hargray.com	Contact City	Bluffton
Contact Phone 5853298122	Contact State	SC
	Contact ZIP Code	29910

*Indicate which deadline you are meeting with this filing.

2024-01-06

Explanation of Effort and Availability of Commercial Equipment

*Provide an explanation of efforts undertaken, and challenges encountered, in permanently removing, replacing, and disposing of covered communications equipment or service.

My company has continued to conducted work on the removal of covered equipment. To date, we have replaced equipment for approximately 3,650 residential and commercial customers. We now have about 60% completion on our backbone network which was due to equipment delay. Our 1st destruction of equipment was delayed however expected in the next month. The delay was due to resources getting equipment documented. We anticipate migration issues of customer homes as access is needed into each. All third party fibers from vendors like STI and Resurgence are now up and running however we have some remediation to perform for items like micro bends and splices. This cost was more than anticipated and work is still being finished. *Explain whether you are finding commercially available equipment in the marketplace. If not, then explain efforts taken to obtain replacement equipment.

All equipment is now in stock to complete the work that is needed. We are still waiting on some spares for the warehouse. A few sites have been completed and work continues. * If there is additional information relevant to the preceding questions or that you believe the Commission should be aware of, please include the information below.

Hargray is approximately 30% finished with the removal, 0% finished with Disposal and 25% finished with the Replacement overall. We have completed 45% of customer ONT's being replaced. Timeline Deviation: Due to long lead times for equipment as well as some of the equipment being damaged in a hurricane, our timeline shifted as noted in our last 90-day update. We are still in the process of revising our timeline to more accurately reflect the project, based on the access needed to get into homes and the co-existence devices being moved around to reduce customer impact.

ProgramCompliance

*Indicate whether recipient has fully complied with (or is in the process of complying with) all requirements of the Reimbursement Program.



*Indicate whether recipient has permanently removed from its communications network all covered communications equipment or services that were in the recipient's network as of the date of the submission of the recipients application request for funding.



If recipient has not yet completed the removal process, what estimated percentage of the removal process have you completed?

30

*Indicate whether recipient has replaced all covered communications equipment or services that were in the recipient's network as of the date of the submission of the recipient's application request for funding.



If recipient has not yet completed the replacement process, what estimated percentage of the replacement process have you completed?

25

*Indicate whether recipient has disposed of all covered communications equipment or services that were in the recipient's network as of the date of the submission of the recipient's application request for funding.



If recipient has not yet completed the disposal process, what estimated percentage of the disposal process have you completed?

0

*Indicate whether recipient has fully complied with (or is in the process of complying with) the timeline submitted by the recipient. If not, provide explanation for deviation.



*The filer has indicated no to a question in this section, please provide additional information.

Certifications

* By checking the box and providing the electronic signature where indicated below, the Certifying Official on behalf of the filer certifies under penalty of perjury that:

(1) The Certifying Official is authorized to submit this status report on behalf of the above-1 named filer and, based on information known to me or provided to me by employees responsible for the information being submitted, the information set forth in this status report has been examined and is true, accurate, and complete, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. The Certifying Official acknowledges that any false, fictitious, or fraudulent information or statement, or the omission of any material fact on this status report or on any other document submitted by the filer may subject the filer and the undersigned to punishment by fine or forfeiture under the Communications Act (47 U.S.C. §§ 502, 503(b), 1606), or fine or imprisonment under Title 18 of the United States Code (18 U.S.C. § 1001, §§ 286-287, and § 1343), or can lead to liability under the False Claims Act (31 U.S.C. §§ 3729-3733, and §§ 3801-3812). (2) The filer is in compliance with the statute, rules, and orders governing the Reimbursement Program, including but not limited to allocations, draw downs, payments, obligations and expenditures of money, and the Certifying Official acknowledges that failure to be in compliance and remain in compliance with those statutes, rules, and orders may result in the denial of funding, cancellation of funding commitments, and/or recoupment of past disbursements. The Certifying Official acknowledges that the filer will maintain detailed records, including receipts, of all costs eligible for reimbursement actually incurred for a period of 10 years; and will file all required documentation for its expenses. The Certifying Official acknowledges that failure to comply with the statute, rules, and orders governing the Reimbursement Program could result in civil or criminal prosecution by law enforcement authorities.

Certifier Information

Certifier Signature	Travis Marlow	Certifier Phone	9135229185
Certifier Name	Travis Marlow	Certifier Email	travis.marlow@cableone.biz
Certifier Title	VP, Technology		

Date Signed 2024-01-03