

SCRPS Status Update

FCC Form 5640

OMB Control No. 3060-1270

File No. SC-SU0003182

Applicant Information

Applicant FRN	0001646470	Applicant Address	61 HWY 13 South
Applicant Name	NEMONT TELEPHONE COC	Applicant City	Scobey
Applicant Email	dionne.nieskens@nemont.co	Applicant State	MT
Applicant Phone	4067832295	Applicant ZIP Code	59263

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	Sam Hariton	Contact Address	4031 University Dr, 2nd Floor
Contact Email	sc.external.rfi.nemont@widelit	Contact City	Fairfax
Contact Phone	703-239-3299	Contact State	VA
		Contact ZIP Code	22030

*Indicate which deadline you are meeting with this filing.

2025-04-03

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.

Yes, my company has conducted work on the removal of covered equipment since submittal of the last form. The covered network is shutdown and all customers are migrated to the new network as of 3/17/2025. The UMTS, LTE and IMS cores have been data wiped and are in transit to the disposal site. Yes, my company has conducted work on the disposal of covered equipment since the submittal of the last form. The UMTS, LTE and IMS cores have been data wiped and are in transit to the disposal site. The cell site equipment that has been removed to date is being inventoried and prepared for disposal. Yes, my company has conducted work on the replacement of covered equipment and services since the submittal of the last form. Nemont has completed the installation and testing of the RAN sites it can afford to deploy within the 39% funding allocation. These sites are now carrying all Nemont customer and roaming traffic. Since full funding has been confirmed, Nemont is now moving to secure the equipment and services necessary to augment and/or build the remaining cell sites beyond what the company could afford to install beyond the 39% funding.

*Explain whether you are finding commercially available equipment in the marketplace. If not, then explain efforts taken to obtain replacement equipment.

We are finding that some equipment and services are commercially available, and some are not. The radio models Nemont has deployed in the new network are becoming in short supply. This is mainly due to the equipment maker developing and now manufacturing its next iteration of products. Therefore the inventory of radios Nemont has deployed is dwindling. In addition, we are seeing 4 month lead times now for the specific hybrid cabling needed to interconnect the cell site ground equipment to the radios and antennas on the tower.

* 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.

Now that full funding has been confirmed, Nemont will move to order the equipment for the cell sites not built out under the 39% allocation. Please note that all covered equipment will be removed and destroyed by July 1st but not all new sites will be built out for several months. The timing of available service providers, internal resources and equipment/materials such as radios and associated cabling will determine the timing to complete the build.

Program Compliance

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

☒ Yes ☐ No

*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 recipient's application request for funding.

☐ Yes ☒ No

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.

☐ Yes ☒ No

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

80

*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.

☐ Yes ☒ No

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

5

*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.

☐ Yes ☒ No

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

Timeline Deviation: Nemont's completion date was August, 2024. The company applied for and received two extensions to complete the project. Nemont has decommissioned the covered network and the portion of the network that was built with existing funding has been completed. Nemont has migrated all its customers to the new network. The UMTS, LTE and IMS cores have been decommissioned, data wiped, removed and are on their way for disposal. The removal and inventory of covered cell site equipment has begun. As Nemont amasses enough equipment for a load to transport, it will be scheduled and sent for destruction. The removal and transports will happen simultaneously. We anticipate to be complete with this process by July 1st. The additional equipment needed to complete the build out beyond what was done with 39% funding will be ordered and installed as soon as possible. Nemont will require an extension to complete the installation and activation of that equipment.

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-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

Dionne Nieskens

Certifier Phone 4067832295

Certifier Name Dionne Nieskens

Certifier Email dionne.nieskens@nemont.coo

Certifier Title CFO

Date Signed 2025-03-27