

## SCRPS Status Update

FCC Form 5640

OMB Control No. 3060-1270

File No. SC-SU0001135

### Applicant Information

Applicant FRN 0003737699

Applicant Address P.O. Box 456

Applicant Name Bristol Bay Cellular Partnersh Applicant City King Salmon

Applicant Email tanyam@bristolbay.com Applicant State AK

Applicant Phone 9072466399 Applicant ZIP Code 99613

### 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 Earl hubb

Contact Address P.O. Box 456

Contact Email ehubb@bristolbay.com

Contact City King Salmon

Contact Phone 9072463403

Contact State AK

Contact ZIP Code 99613

\*Indicate which deadline you are meeting with this filing.

2022-10-13

## 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.

We initiated project by applying value engineering to overcome challenges of a substantial funding shortfall. Currently have completed engineering and in process of updating equipment and materials availability, acquiring current quotes, scheduling with construction contractor and preparing purchase requests. At this time there is no change to disposal plan submitted in this application but will require extension to accommodate funding availability in subsequent budget years.

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

We are finding commercially available equipment and in final engineering review prior to issuing purchase requests as directed by SCRP.

\* 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.

We have a very short season in which construction can be performed and operations serve a seasonal market during summer months. We are building second project management plan using backward scheduling with goal of permanently removing and replacing communications equipment in question and have new system operational by May 2023.

## 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, replaced, and disposed of (or is in the process of permanently removing, replacing, and disposing of) all covered communications equipment or services that were in the recipient's network as of the date of submission of the recipient's application requesting funding.

Yes  No

If you have not yet completed the removal, replacement, and/or disposal process, what estimated percentage of the removal, replacement, and/or disposal process have you completed?

\*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.

## 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 Earl Hubb

Certifier Phone 9072466399

Certifier Name Earl Hubb

Certifier Email ehubb@bristolbay.com

Certifier Title GM/CEO

Date Signed 2022-10-13