### SCRPStatus Update

FCC Form 5640

OMB Control No. 3060-1270

File No. SC-SU0001595

# 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 5 Buck Island Rd

Contact Email | Iori.lewellyn@htc.hargray.com | Contact City | Bluffton

Contact Phone 585-329-8122 Contact State SC

Contact ZIP Code 29910

2023-04-11

<sup>\*</sup>Indicate which deadline you are meeting with this filing.

## 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 are finding that some equipment and services are commercially available, and some are not. We have worked directly with the vendors and been able to expedite delivery dates. Calix equipment has been delivered however, all the Ciena equipment is still not to be delivered until May. Due to such a late delivery of material, Hargray may require additional time to complete all of our work.

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

My company has continued to conducted work on the removal of covered equipment. To date, we have replaced equipment for approximately 2,500 residential and commercial customers but have not started on our backbone network due to equipment delay.

No, my company has NOT conducted work on the disposal of covered equipment to date. We are storing the current removed equipment to dispose of equipment in bulk as we remove more equipment.

* 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.	

ProgramCompliance *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 therecipient'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?
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*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.

Hargray is approximately 18% finished with the removal, 0% finished with Disposal and 15% finished with the Replacement but has not yet completed it. Timeline Deviation: Due to long lead times for equipment, 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, pending receipt of the remaining material.

#### 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 abovenamed 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 mayresult in thedenial 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 913-522-9185

Certifier Name Travis Marlow Certifier Email travis.marlow@cableone.biz

Certifier Title VP, Product Technology

Date Signed 2023-04-07