SCRPStatus Update

FCC Form 5640

OMB Control No. 3060-1270

File No. SC-SU0001456

Applicant Information

Applicant FRN 0031866486 Applicant Address 3 Bala Plaza East

Applicant Name Hotwire Communications, Ltd Applicant City Bala Cynwyd

Applicant Phone 4845726003 Applicant ZIP Code 19004

Contact Information

1

Is the contact the same as the contact listed on the Application Request for Funding Allocation? If not, please list below.

Contact Name Summit Ridge Group Contact Address 49 West 38th Street

Contact Email hotwirernr@summitridgegroup Contact City New York

Contact Phone 2124334800 Contact State NY

Contact ZIP Code 10018

2023-01-11

^{*}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.

In furtherance of its Build Timeline and Plan ("Plan") and despite not receiving confirmation of a allocation that will support its cost and timeline, Hotwire has moved forward with removing and replacing covered equipment at several sites with several more planned over the coming months.

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

We continue to closely monitor the risks, as outlined in Hotwire's Plan, that threaten our successful execution of the project, particularly with regard to meeting the Plan's timeline. These risks include lack of commercially available equipment, possible failure of vendors to deliver replacement equipment on time, availability of contractor crews needed for replacement of equipment at head ends, and others. Since we submitted our Plan, these risks have either remained the same or slightly increased. Specific to finding commercially available equipment, we have not yet seen any indication that our required equipment will not be available, but continue to monitor market conditions.

| * 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. | |
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| ProgramCompliance *Indicate whether recipient has fully complied with (or is in the process of complying with) all requirements of the Reimbursement Program. Yes No |
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| *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? |
| *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. | |
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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 Jonathan Bullock Certifier Phone 4845726003

Certifier Name Jonathan Bullock Certifier Email jbullock@hotwiremail.com

Certifier Title SVP, Corp Dev. and Gov't

Date Signed 2023-01-11