## SCRPStatus Update

FCC Form 5640

OMB Control No. 3060-1270

File No. SC-SU0002260

# **Applicant Information**

Applicant FRN 0012662698 Applicant Address 1107 McArtor Rd

Applicant Name United Wireless Communicati Applicant City Dodge City

Applicant Email toddh@unitedtelcom.net Applicant State KS

Applicant Phone 6202278641 Applicant ZIP Code 67801

## **Contact Information**

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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 Drive, 2nd Floor

Contact Email sc.external.rfi.united@widelity Contact City Fairfax

Contact Phone 7032393299 Contact State VA

Contact ZIP Code 22030

2024-01-06

<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.

Yes, my company has conducted work on the removal of covered equipment since submittal of the last form. We have fully removed equipment from 60 of the sites and work is ongoing

Yes, my company has conducted work on the disposal of covered equipment since the submittal of the last form. Several shipments of equipment have been retrieved and processed by the disposal company

Yes, my company has conducted work on the replacement of covered equipment and services since the submittal of the last form. We have completed the installation of 90 of our sites

\*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. Equipment is normally available, but we have long lead times on ancillary equipment. We have sourced from various vendors and modified original design to get what we need

\* 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.

United is approximately 75% finished with the removal, replacement, and disposal process. Timeline Deviation: We are running into complications getting all sites completed under our original anticipated timeline due to material delays, crew availability, and occasional weather delays. We are also concerned with, and impacted by, the failure of Congress to appropriate and make available the additional funding crucial to the successful completion of this important project. Until we have assurance of total project funding, this project will continue to be delayed as we await the necessary funding required to build and pay for the new network equipment. Quick completion of this rip and replace project is required to provide for enhanced national security, United's mobile network security, and our customer's experience and safety (potential service outages and 911 failures).

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 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.
Yes No
If recipient has not yet completed the removal process, what estimated percentage of the removal process have you completed?
60
*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?
25
*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 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 Todd Houseman Certifier Phone 6202278641

Certifier Name Todd Houseman Certifier Email toddh@unitedtelcom.net

Certifier Title CEO/GM

Date Signed 2024-01-03