# Program Questions:
# ConnectALL- Affordable Housing Connectivity Program (AHCP)– Section One

## Q_14261

Are you applying to the Affordable Housing Connectivity Program (AHCP)?

## Q_14325

Do you acknowledge that the project(s) you intend to propose for grant funding will meet the minimum project requirements as stated in the RFA and any subsequently published updates?

## Q_14428

Has your business ever violated applicable regulations, labor laws, prevailing wage requirements, or labor standards?

## Q_14505

Please submit resumes for Applicant project team’s key leadership. Name your file using the following naming convention: “ApplicantName_Resumes_MM.DD.YY”

## Q_14506

If you have received letters of support from affordable housing owners, local governments, or county governments – please attach them. Name your file using the following naming convention: "ApplicantName_LOS_MM.DD.YY."

# Q_14507

Upload the Applicant's standard Building-Access Agreement and/or other similar agreement(s). Name your file using the following naming convention: "ApplicantName_BAA_MM.DD.YY"

# Q_14508

Under the "Questionnaire" tab of this application, Applicants are asked to describe two similar projects in which the Applicant completed either or both (1) fiber or other broadband connections to a property and/or (2) in-building equipment and wiring retrofits. If the Applicant's standard Service-Level Agreement and/or Building-Access Agreement were not used in the two similar projects described, please upload the agreements used here. Name your file using the following naming convention: "ApplicantName_ProjectAgreements_MM.DD.YY"

# Q_14509

An owner of existing infrastructure or a builder of infrastructure that does not intend to provide service on the network must submit: a) a letter of intent to operate on the network from one or more ISPs, indicating details of the ISP's planned technology approach and demonstration of a currently functional network meeting CAO requirements elsewhere; b) letter of endorsement from an ISP(s) currently operating on infrastructure built by the applicant elsewhere; c) documentation from an operator using infrastructure built by the Applicant to host ISPs that meet CAO's service requirements. Applicants that are solely infrastructure builders or owners rather than teams will need to demonstrate that the infrastructure provided will be able to support ISPs that meet the State's service requirements. Name your file using the following naming convention: "ApplicantName_RetailService_MM.DD.YY"

# Q_14510

Upload the Applicant's most recent financial statements prepared in accordance with standard accounting procedures of the Applicant and all principals of the company. For Applicants who represent a partnership or joint venture, financials for each organization should be included. Financial statements should include, but are not limited to: 1) Annual income and net worth (assets and liabilities), including a breakdown of liquid and non-liquid assets; 2) Certified Financial Statements; 3) Balance Sheets; 4) Income Statements and three (3) years of past tax returns (corporate or personal); 5) Letters of intent from potential partners or sponsors if applicable; and 6) Letters of recommendation from industry stakeholders. Name your file using the following naming convention: "ApplicantName_Finances_MM.DD.YY"

# Q_14511

Please attach your standard Service-Level Agreement and/or a proposed Service-Level Agreement for AHCP-funded projects. Name your file using the following naming convention: "ApplicantName_SLA_MM.DD.YY"

# Q_14601

What broadband service tiers and pricing does your organization currently offer? Complete and upload the Service Tiers and Pricing template (see Question Help for a link to the template). Name your file using the following naming convention: "ApplicantName_Services_MM.DD.YY"

# Q_14512

Attach letter(s) of commitment, if available, from partner organization(s) that demonstrate(s) Applicant's current engagement, or future intent to engage, with partner(s) through advising on curriculum or program design, providing program funding, interviewing talent, hiring talent, building an apprenticeship or other program, or upskilling existing workers. Letters can be from labor unions, workforce development organizations, state and local workforce boards, educational institutions, community-based organizations, or others relevant organizations.

Name your file using the following naming convention:
"ApplicantName_WorkforceLOCs_MM.DD.YY"

Please note that the accepted file type for this question is PDF. If you have an issue with uploading

any files, please reach out to cfa-programs@ny.gov and AHCP@esd.ny.gov.

# Q_14513

If applicable, upload documentation of communications with workers and worker representative organizations regarding labor laws, fair labor standards, the formation of worker-led health and safety committees, and workforce development (e.g., sample emails, copies of posters, worker surveys, etc.). Name your file using the following naming convention: "ApplicantName_WorkerComms_MM.DD.YY"

# Q_15015

Do you acknowledge that the project(s) you intend to propose for grant funding will meet the minimum project requirements as stated in the RFA and any subsequently published updates?

# Q_14429

Name of the Primary Applicant Organization

# Q_14430

Applicant Street Address

# Q_14431

Applicant City

# Q_14432

Applicant State

# Q_14433

Applicant ZIP Code (please use ZIP+4 if known)

# Q_14434

Applicant organization website

# Q_14435

Is the applicant "Doing Business As" (DBA)?

- This is a conditional question.
    1. If **Yes** is selected then **Q_14436** will be displayed

# Q_14436

What is the applicant's DBA name?

- This is a conditional question based on the answer to **Q_14435**. This question displays when selecting the answer: "**Yes**"

# Q_14437

Primary Contact First Name

# Q_14438

Primary Contact Last Name

# Q_14439

Primary Contact Title

# Q_14440

Primary Contact Telephone

# Q_14441

Primary Contact Email Address

# Q_14442

Type of Applicant (select all that apply)

- Choice Options: Federal, State, County, City, Town, Village, Tribal, School District, County or Town Improvement District, District Corporation, For-Profit, Not-For-Profit, Individual, S Corporation, C Corporation, IDA, LDC,LLC,LLP, Public Authority, Public Benefit Corp, Sole-Proprietorship,BID, LP,Boards Of Cooperative Educational Services (BOCES), Fire

District, Regional Planning and Development Board, Public Library, Association Library,College/University/Community College

# Q_14443

Select an applicant ID type from the list below that you normally use to identify your organization on application forms.

- Choice Options: Charity Reg #, Duns Number, Federal Tax ID Number, NYS Unemployment Insurance Tax Number,NYS Vendor Identification Number (SFS),Employee Identification Number (EIN),Unique Entity Identifier (UEI)

# Q_14444

Based on your selection from the previous question, enter the associated ID number.

# Q_14445

If you are a business, have you been certified as a New York State Minority or Women-owned Business Enterprise (MWBE)?

- Choice Options: Yes, No, N/A

# Q_14446

Please indicate if this application is submitted by a partnership or joint venture.

- This is a conditional question.
    1. If **Yes** is selected then these questions will be displayed:
       - **Q_14447**
       - **Q_14448**
       - **Q_14449**
       - **Q_14450**
       - **Q_14451**
       - **Q_14452**

- Q_14453
- Q_14454
- Q_14455
- Q_14456
- Q_14582

# Q_14447

Please indicate the legal name(s) of any other organization(s) who are partners to this application or party to a joint venture.

- This is a conditional question based on the answer to Q_14446. This question displays when selecting the answer: "**Yes**"

# Q_14448

Partner Organization Street Address

- This is a conditional question based on the answer to Q_14446. This question displays when selecting the answer: "**Yes**"

# Q_14449

Partner Organization City

- This is a conditional question based on the answer to Q_14446. This question displays when selecting the answer: "**Yes**"

# Q_14450

Partner Organization State

- This is a conditional question based on the answer to Q_14446. This question displays when selecting the answer: "**Yes**"

# Q_14451

Partner Organization ZIP (please use +4 if known)

- This is a conditional question based on the answer to **Q_14446**. This question displays when selecting the answer: "**Yes**"

# Q_14452

Partner Organization Primary Contact First Name

- This is a conditional question based on the answer to **Q_14446**. This question displays when selecting the answer: "**Yes**"

# Q_14453

Partner Organization Primary Contact Last Name

- This is a conditional question based on the answer to **Q_14446**. This question displays when selecting the answer: "**Yes**"

# Q_14454

Partner Organization Primary Contact Telephone Number (please include area code)

- This is a conditional question based on the answer to **Q_14446**. This question displays when selecting the answer: "**Yes**"

# Q_14455

Partner Organization Primary Contact Email Address

- This is a conditional question based on the answer to **Q_14446**. This question displays when

selecting the answer: "**Yes**"

# Q_14582

Is there a third organization (including the Applicant) party to the partnership or joint venture?

- This is a conditional question.
    1. If **Yes** is selected then these questions will be displayed:
        - **Q_14583**
        - **Q_14584**
        - **Q_14585**
        - **Q_14586**
        - **Q_14587**
        - **Q_14588**
        - **Q_14589**
        - **Q_14590**
- This is a conditional question based on the answer to **Q_14446**. This question displays when selecting the answer: "**Yes**"

# Q_14583

Third Partner Organization Street Address

- This is a conditional question based on the answer to **Q_14582**. This question displays when selecting the answer: "**Yes**"

# Q_14584

Third Partner Organization City

- This is a conditional question based on the answer to **Q_14582**. This question displays when selecting the answer: "**Yes**"

# Q_14585

Third Partner Organization State

- This is a conditional question based on the answer to **Q_14582**. This question displays when selecting the answer: "**Yes**"

# Q_14586

Third Partner Organization ZIP (please use +4 if known)

- This is a conditional question based on the answer to **Q_14582**. This question displays when selecting the answer: "**Yes**"

# Q_14587

Third Partner Organization Primary Contact First Name

- This is a conditional question based on the answer to **Q_14582**. This question displays when selecting the answer: "**Yes**"

# Q_14588

Third Partner Organization Primary Contact Last Name

- This is a conditional question based on the answer to **Q_14582**. This question displays when selecting the answer: "**Yes**"

# Q_14589

Third Partner Organization Primary Contact Telephone Number (please include area code)

- This is a conditional question based on the answer to **Q_14582**. This question displays when selecting the answer: "**Yes**"

# Q_14590

Third Partner Organization Primary Partner Email Address

- This is a conditional question based on the answer to **Q_14582**. This question displays when selecting the answer: "**Yes**"

# Q_14456

Applicants that represent joint ventures or partnerships, please specify the roles and services provided through each party to the joint venture or partnership as well as how the partnership or joint venture is managed.

- This is a conditional question based on the answer to **Q_14446**. This question displays when selecting the answer: "**Yes**"

# Q_14457

How many years has the Applicant's organization been operating in New York?

- Choice Options: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150

# Q_14458

Briefly describe the history of the Applicant or team as well as ownership and legal structure.

# Q_14459

Briefly describe the Applicant's experience in broadband deployment in New York.

# Q_14373

Albany-Schenectady-Troy Metropolitan Area

- Choice Options: Yes,No

# Q_14514

Minimum Units Able to Serve-Albany-Schenectady-Troy

# Q_14530

Areas Currently Served Albany-Schenectady-Troy Metropolitan Area Maximum Units Able to Serve

# Q_14374

Binghamton Metropolitan Area

- Choice Options: yes,no

# Q_14515

Areas Currently Served  Binghamton Metropolitan Area Minimum Units Able to Served

# Q_14531

Areas Currently Served  Binghamton Metropolitan Area Maximum Units Able to Serve

# Q_14375

Buffalo-Cheektowaga Metropolitan Area

- Choice Options: yes,no

# Q_14516

Areas Currently Served  Buffalo-Cheektowaga Metropolitan Area Minimum Units Able to Served

# Q_14532

Areas Currently Served  Buffalo-Cheektowaga Metropolitan Area Maximum Units Able to Serve

# Q_14376

Elmira Metropolitan Area

- Choice Options: yes,no

# Q_14517

Areas Currently Served  Elmira Metropolitan Area Minimum Units Able to Served

# Q_14533

Areas Currently Served  Elmira Metropolitan Area Maximum Units Able to Serve

# Q_14377

Glen Falls Metropolitan Area

- Choice Options: yes,no

# Q_14518

Areas Currently Served  Glen Falls Metropolitan Area Minimum Units Able to Served

# Q_14534

Areas Currently Served  Glen Falls Metropolitan Area Maximum Units Able to Serve

# Q_14378

Ithaca Metropolitan Area

- Choice Options: yes,no

# Q_14519

Areas Currently Served  Ithaca Metropolitan Area Minimum Units Able to Served

# Q_14535

Areas Currently Served  Ithaca Metropolitan Area Maximum Units Able to Serve

# Q_14379

Kingston Metropolitan Area

- Choice Options: yes,no

# Q_14520

Areas Currently Served  Kingston Metropolitan Area Minimum Units Able to Served

# Q_14536

Areas Currently Served  Kingston Metropolitan Area Maximum Units Able to Serve

# Q_14380

Nassau County-Suffolk County Metropolitan Area

- Choice Options: yes,no

# Q_14521

Areas Currently Served  Nassau County-Suffolk County Metropolitan Area Minimum Units Able to Served

# Q_14537

Areas Currently Served  Nassau County-Suffolk County Metropolitan Area Maximum Units Able to Serve

# Q_14381

New York City Metropolitan Area

- Choice Options: yes,no

# Q_14522

Areas Currently Served  New York City Metropolitan Area Minimum Units Able to Served

# Q_14538

Areas Currently Served  New York City Metropolitan Area Maximum Units Able to Serve

# Q_14382

White Plains Metropolitan Area

- Choice Options: yes,no

# Q_14523

Areas Currently Served  White Plains Metropolitan Area Minimum Units Able to Served

# Q_14539

Areas Currently Served  White Plains Metropolitan Area Maximum Units Able to Serve

# Q_14383

Poughkeepsie-Newburgh-Middletown Metropolitan Area

- Choice Options: yes,no

# Q_14524

Areas Currently Served  Poughkeepsie-Newburgh-Middletown Metropolitan Area Minimum Units Able to Served

# Q_14540

Areas Currently Served  Poughkeepsie-Newburgh-Middletown Metropolitan Area Maximum Units Able to Serve

# Q_14384

Rochester Metropolitan Area

- Choice Options: yes,no

# Q_14525

Areas Currently Served  Rochester Metropolitan Area Minimum Units Able to Served

# Q_14541

Areas Currently Served  Rochester Metropolitan Area Maximum Units Able to Serve

# Q_14385

Syracuse Metropolitan Area

- Choice Options: yes,no

# Q_14526

Areas Currently Served  Syracuse Metropolitan Area Minimum Units Able to Served

# Q_14542

Areas Currently Served  Syracuse Metropolitan Area Maximum Units Able to Serve

# Q_14386

Utica-Rome Metropolitan Area

- Choice Options: yes,no

# Q_14527

Areas Currently Served  Utica-Rome Metropolitan Area Minimum Units Able to Served

# Q_14543

Areas Currently Served  Utica-Rome Metropolitan Area Maximum Units Able to Serve

# Q_14387

Watertown-Fort Drum Metropolitan Area

- Choice Options: yes,no

# Q_14528

Areas Currently Served  Watertown-Fort Drum Metropolitan Area Minimum Units Able to Served

# Q_14544

Areas Currently Served  Watertown-Fort Drum Metropolitan Area Maximum Units Able to Serve

# Q_14388

Other Area- Not Listed

# Q_14529

Areas Currently Served Other Area- Not Listed Minimum Units Able to Served

# Q_14545

Areas Currently Served Other Area- Not Listed Maximum Units Able to Serve

# Q_14549

What is the approximate number of units for which the Applicant can complete infrastructure deployment within a typical 24-month period, from project launch to completion of construction?

# Q_14460

Briefly describe the Applicant’s current business, including core capabilities, services and products offered, duration of business, and market reach.

# Q_14461

Outline the Applicant's financial, technical, and managerial capabilities for completion of broadband deployment projects and fulfilling all funding commitments per the terms of this RFA. In addition to resumes to be uploaded under the Documents tab, include in this response detailed descriptions of Applicant project team’s key leadership that demonstrate experience in successfully managing projects like those to be proposed for AHCP funding, including in the areas of financial, technical, and compliance management.

# Q_14462

What is the number of customers served by the Applicant in New York State?

# Q_14463

If applicable, describe any existing plans for the Applicant’s business expansion.

# Q_14464

Does the Applicant have experience deploying broadband infrastructure or services in affordable housing properties?

- This is a conditional question.
    1. If **Yes** is selected then **Q_14465** will be displayed

# Q_14465

Detail the Applicant organization’s track record deploying broadband to affordable housing properties, including prior experience in marketing, customer service, or enrollment assistance for public subsidy programs benefiting affordable housing residents, including the Federal Communication Commission's (FCC) Affordable Connectivity Program (ACP).

- This is a conditional question based on the answer to **Q_14464**. This question displays when

selecting the answer: "**Yes**"

# Q_14466

Describe your current or past participation in The FCC's Affordable Connectivity Program (ACP) or other public subsidy programs.

# Q_14467

Describe prior experience coordinating with permitting authorities, utility pole owners, and existing utilities.

# Q_14468

Do you have experience managing state or federal grants or loans for broadband deployment?

- This is a conditional question.
    1. If **Yes** is selected then these questions will be displayed:
       - **Q_14469**
       - **Q_14470**

# Q_14469

Have any of your grants or loans for broadband deployment been suspended, paused, or rescinded at any time due to lack of performance or compliance with program rules or applicable law?

- This is a conditional question based on the answer to **Q_14468**. This question displays when selecting the answer: "**Yes**"

# Q_14470

Briefly outline the Applicant’s background in overseeing state or federal grants or loans for broadband deployment. If applicable, explain the circumstances that led to any grants or loans that faced suspension, pause, or rescission due to performance issues or non-compliance with program regulations or relevant laws.

- This is a conditional question based on the answer to **Q_14468**. This question displays when selecting the answer: "**Yes**"

# Q_14471

Describe coordination with or support from affordable housing owners, local governments, or county governments. Letters of support, if available, may be uploaded in the Documents tab.

# Q_14472

Outline the past record and certify current compliance with applicable regulations, including: 1) Safety standards, including the National Electrical Safety Code; 2) Workplace protections, including the Occupational Safety and Health Act, the Fair Labor Standards Act, Title VII of the Civil Rights Act of 1964, and New York State labor and employment laws, prevailing wage requirements, and labor standards.

# Q_14473

Describe past record of responding to information requests to share data with the NYS Department of Public Service concerning broadband mapping initiatives, including the length of time taken to furnish the requested information.

# Q_14474

Applicants will be asked to provide information on projects they have completed that are similar to those that will be funded through the AHCP.

Project 1: Provide an overview of the plan, design, responsibilities, and description of the implementation of a similar project noting whether either or both (1) fiber or other broadband connections to a property and/or (2) in-building equipment and wiring retrofits were completed and if the project was representative of the Applicant's business model.

# Q_14591

For Project 1 described above, please provide the following information: i. Number of units and number of buildings served at the property; ii. Number of businesses subcontracted; iii. Route miles constructed, and costs incurred by category (e.g., make-ready, permitting, engineering/design, labor, construction); iv. Detail the technology deployed and why it was the appropriate choice for the project; v. Service level commitment offered; vi. Advertised download speed in megabits per second; vii. Advertised upload speed in megabits per second; viii. Monthly, non-promotional price for each service offered over the funded infrastructure; ix. Specifications of signal latency and service reliability parameters; x. Experiences should include at least one service offering provided pursuant to the ACP federal subsidy participation (or a program that provides comparable benefits) and at least one service offering at speeds of 100/100 Mbps or greater; xi. Details regarding any deviations or adjustments made to the project timeline; xii. Explain whether the Applicant’s standard building access and service-level agreements were used.

# Q_14592

Project 2: Provide an overview of the plan, design, responsibilities, and description of the implementation of a similar project noting whether either or both (1) fiber or other broadband connections to a property and/or (2) in-building equipment and wiring retrofits were completed and if the project was representative of the Applicant’s business model.

# Q_14593

For Project 2 described above, please provide the following information: i. Number of units and number of buildings served at the property; ii. Number of businesses subcontracted; iii. Route miles constructed, and costs incurred by category (e.g., make-ready, permitting, engineering/design, labor, construction); iv. Detail the technology deployed and why it was the appropriate choice for the project; v. Service level commitment offered; vi. Advertised download speed in megabits per second; vii. Advertised upload speed in megabits per second; viii. Monthly, non-promotional price for each service offered over the funded infrastructure; ix. Specifications of signal latency and service reliability parameters; x. Experiences should include at least one service offering provided

pursuant to the ACP federal subsidy participation (or a program that provides comparable benefits) and at least one service offering at speeds of 100/100 Mbps or greater; xi. Details regarding any deviations or adjustments made to the project timeline; xii. Explain whether the Applicant's standard building access and service-level agreements were used.

# Q_14475

Do you anticipate you will take a substantially different approach in deployment proposals for AHCP-funded projects compared to the two examples of prior work provided above?

- This is a conditional question.
    1. If **Yes** is selected then **Q_14476** will be displayed

# Q_14476

If yes, please explain how you anticipate your approach to an AHCP-funded project will vary from your prior approaches to broadband deployments.

- This is a conditional question based on the answer to **Q_14475**. This question displays when selecting the answer: "**Yes**"

# Q_14477

Will the Applicant plan to support the facilitation of open-access to the infrastructure?

- This is a conditional question.
    1. If **Yes** is selected then **Q_14478** will be displayed

# Q_14478

Specify how prospective AHCP projects will enable open-access, including detailing the type of open-access arrangement and indicating the exact duration during which the Applicant will operate and maintain the infrastructure as open-access.

- This is a conditional question based on the answer to **Q_14477**. This question displays when selecting the answer: "**Yes**"

# Q_14479

Will there be free community Wi-Fi as part of this project?

# Q_14480

Specify the type and daily operating hours for all types of customer service provided for broadband subscribers including phone, email, SMS, and/or in person customer assistance (if provided). How is customer support provided outside of regular working hours and on weekends?

# Q_14481

What aspects of the customer service experience are automated and which are provided through live customer support?

# Q_14482

What is the scope of any subcontractors providing customer support?

# Q_14483

How will the Applicant ensure long-term, high-quality connectivity and support for residents? If applicable, reference the standard Service-Level Agreement provided in the Documents section of this application.

# Q_14484

How will the Applicant adhere to net neutrality principles, including commitments to no blocking, no throttling, no unreasonable discrimination in the transmittal of lawful internet traffic, and no paid prioritization?

# Q_14485

What measures and strategies will the Applicant take to safeguard the privacy and cybersecurity of residents and other end-users?

# Q_14602

In addition to completing the Service Tiers and Pricing template under the Documents tab of this application, please also describe the service speeds and means of delivery of any free service tiers or free introductory periods available to end-users. Specify if such options will be generally available at affordable housing Properties (without ACP utilization) or will require additional qualification.

# Q_14486

Describe the Applicant’s current employee engagement strategy as it relates to ensuring good jobs for the Applicant’s employees. Include an overview of compensation and benefits, job security, working conditions, worker engagement, and the organizational culture.

# Q_14487

How does the Applicant integrate diversity, equity, inclusion, and accessibility practices into its employee engagement strategy?

# Q_14488

Describe training, certification, and/or licensure requirements for each job title required to carry out an AHCP-funded project, including contractors and subcontractors.

# Q_14489

Describe internal policies and controls to ensure that staff have and maintain appropriate credentials as indicated in your response to the prior question.

# Q_14490

Describe current or planned future efforts to support talent with wraparound services and/or stipends, including transportation benefits, childcare subsidies, or other similar measures.

# Q_14491

Outline the Applicant’s current and planned future workforce development strategies pertaining to recruitment, training, hiring, upskilling, and talent advancement practices. Include practices that maximize use of local or regional workforce as well as project labor agreements in connection with projects.

# Q_14492

Explain current and planned future efforts to diversify the talent pipeline by engaging underrepresented and/or underserved individuals, including any statewide, regional, or local partnerships in place to support recruitment and hiring.

# Q_14493

Detail any existing and planned future partnerships with external partners including but not limited to labor unions, workforce training and development organizations, State and local workforce boards, educational institutions, community-based organizations, or any other relevant collaborators on your workforce strategies.

# Q_14494

Discuss job quality consideration as part of the Applicant’s workforce development strategies.

# Q_14495

Describe the Applicant’s track record and commitment to maintaining high standards of workplace safety and training and expected workforce safety standards for AHCP-funded projects.

# Q_14496

Describe current and planned future workforce training, certification, and licensure (e.g., in-house training, safety training, industry-recognized certifications, and offer of vocational training, apprenticeships, pre-apprenticeships, or other “earn and learn” opportunities) that are part of the Applicant’s workforce development strategies.

# Q_14497

Describe plans for implementation of workplace safety committees authorized to raise health and safety concerns, including whether workers will be permitted to create worker-led committees that management meets with to ensure compliance.

# Q_14498

Describe current and planned future practices regarding public disclosure of workforce plans and labor commitments on a website or online portal.

# Q_14499

Outline future plans to establish, bolster, or expand current workforce development programs aimed at facilitating the recruitment, training, and hiring of diverse talent into quality job positions.

# Q_14500

List any partnerships with third-party workforce development organizations.

# Q_14501

Identify the targeted talent pool for participation in the workforce development curriculum.

# Q_14502

Describe the support services offered during workforce development programming and training.

# Q_14503

Enumerate the metrics for measuring success in aforementioned workforce development endeavors.

# Q_14504

Describe Applicant labor practices including union status of the Applicant’s workforce and current or planned future practices regarding using a directly employed or subcontracted workforce.

# Q_14299

By entering your name in the box below, you the Applicant acknowledges the following: -Applicant will meet all Project Requirements and Applicant Requirements per the RFA. -Application is not receiving funding from other federal or state sources for the same activities proposed for AHCP funding. -Applicant will provide additional cost estimates, if requested, for Properties in the portfolio agreed upon with CAO, including total grant amount requested and matching funds. -Application will work with all appropriate agencies to obtain all required right of way approvals. -Application will obtain all required permits and private easement approvals. -Application will coordinate project deployment with all utilities. -Application will obtain any necessary subcontractors. -Application will provide on-site construction inspections to ensure proper design and execution. -Application will coordinate and resolve third-party or private claims. -Application will repair any and all damage to private and government property. -Application will at all times, maintain an adequate staff of experienced and qualified employees for efficient performance. -Application will at all times, furnish or perform any services in a safe, proper, and professional manner. -Application will comply with all federal, state, and local laws and regulations. -Application must submit a performance report to the State that includes the following key performance indicators, if selected to be a Grantee: • Project milestones and percentage of project/site completion, including construction milestones, quantity of fiber deployed, problems/issues encountered, and actions taken to resolve construction issues • Description of changes, challenges, or risks to project timeline, including environmental compliance and permitting challenges • Detailed reporting of actual construction costs, as compared to approved construction costs • Speed and latency test data at the address level for all locations served in the project area--including maximum download speed offered, maximum download speed delivered, maximum upload speed offered, maximum upload speed delivered, and latency. • Maps and associated data for all locations served, including all buildings/sites where service was installed. • Compliance with Prevailing Wage requirements, as determined during negotiations • Implementation progress of Digital Equity, Workforce Development, and Diversity Practices plans • Other reporting as required by grantor agencies or as mutually agreed upon by the Applicant and State. • Subscription information including the number of paying subscribers enrolled in the service, the number of low-income subscribers enrolled in ACP, and the number of subscribers enrolled in a low-cost service plan • Information about customers' Internet access prior to enrolling in the service including whether or not the customer had a previous fixed Internet subscription and the speed of

that previous subscription -Applicant acknowledges receipt of and compliance with addenda to this RFA.

# Q_1038

By entering your name in the box below, you certify that you are authorized on behalf of the applicant and its governing body to submit this application. You further certify that all of the information contained in this Application and in all statements, data and supporting documents which have been made or furnished for the purpose of receiving assistance for the project described in this application, are true, correct and complete to the best of your knowledge and belief. You acknowledge that offering a written instrument knowing that the written instrument contains a false statement or false information, with the intent to defraud the State or any political subdivision, public authority or public benefit corporation of the State, with the knowledge or belief that it will be filed with or recorded by the State or any political subdivision, public authority or public benefit corporation of the State, constitutes a crime under New York State Law.

# Q_2365

By entering your name in the box below, you are acknowledging that ESD’s Contractor & Supplier Diversity policy will apply to this project. You are further acknowledging that you are aware of ESD’s agency-wide Minority and Women Business Enterprise (‘MWBE’) utilization goal of 30% and ESD's agency wide Service-Disabled Veteran-Owned Business ('SDVOB') utilization goal of 6%. Please note that each project will be assigned an individual contract-specific goal, which may be higher or lower than the 30% and 6%, respectively. Furthermore, you understand that, should this project receive a funding award, the Applicant shall be required to use good faith efforts to achieve the prescribed MWBE and SDVOB goals assigned to this project and failure to attain MWBE and SDVOB goals could result in grant amount being reduced.

# Q_4182

By entering your name in the box below, you certify and agree that you are aware that your award will be reduced in proportion to the reduction of jobs and/or total project costs. Furthermore, you understand that, should this project receive a funding award, the Applicant will maintain such records and take such actions necessary to demonstrate such compliance throughout the completion of the project.

# Q_7341

By entering your name in the box below, you certify, under penalty of perjury, that the information given herein is true and correct in all respects for the company or organization applying for funding (the "Company"), presently and for the past five years: -the Company is not a party to any litigation or any litigation is not pending or anticipated that could have an adverse material effect on the company's financial condition;

-the Company does not have any contingent liabilities that could have a material effect on its solvency;

-the Company, its affiliates or any member of its management or any other concern with which such members of management have been officers or directors, have never been involved in bankruptcy, creditor's rights, or receivership proceedings or sought protection from creditors;

-the Company is not delinquent on any of its state, federal or local tax obligations;

-No principal, officer of the Company, owner or majority stockholder of any firm or corporation, or member of the management has been charged or convicted of a misdemeanor or felony, indicted, granted immunity, convicted of a crime or subject to a judgment, or the subject of an investigation, whether open or closed, by any government entity for a civil or criminal violation for: (i) any business-related activity including, but not limited to, fraud, coercion, extortion, bribe or bribe receiving, giving or accepting unlawful gratuities, immigration or tax fraud, racketeering, mail fraud, wire fraud, price fixing or collusive bidding; or (ii) any crime, whether or not business related, where the underlying conduct relates to truthfulness, including but not limited to, the filing of false documents or false sworn statements, perjury or larceny;

-the Company or any of the Company's affiliates, principal owners or Officers has not received a violation of State Labor Law deemed "willful";

-the Company or any of its affiliates has never been cited for a violation of State, Federal, or local laws or regulations with respect to labor practices, hazardous wastes, environmental pollution or other operating practices;

-there are not any outstanding judgments or liens pending against the Company other than liens in the normal course of business.

-the Company or any of its affiliates, principal owners or officers the company has not been the subject of any judgments, injunctions, or liens including, but not limited to, judgments based on taxes owed, fines and penalties assessed by any governmental agency, or elected official against the Company.

- the Company or any of its affiliates, principal owners or officers the company has not been investigated by any governmental agency, including, but not limited to, federal, state and local regulatory agencies

-the Company or any of its affiliates, principal owners or officers the company has not been debarred from entering into any government contract; been found non-responsible on any

government contract; been declared in default ore terminated for cause on any government contract; been determined to be ineligible to bid or propose on any contract; been suspended from bidding on any government contract; received an overall unsatisfactory performance rating from any government agency on any contract; agree to a voluntary exclusion from bidding or contracting on a government contract.

- the Company or any of its affiliates, principal owners or officers the company has not failed to file any of the required forms with any government entity regulating the Company. By entering your name in the box below, you agree to allow the Department of Taxation to share the Company tax information with ESD. By entering your name in the box below, you agree to allow the Department of Labor to share tax and employer information with ESD. Note: If any of the statements above are not true, in addition to entering your name, also include an explanation in the box below, indicating which issue you are addressing.