Connect Illinois Broadband Grant Program
Round 3 Application Packet | Application Template

The Illinois Office of Broadband ("Office") recently released the Round Notice of Funding Opportunity ("NOFO") for its Connect Illinois Broadband Grant Program. The separate Application Packet serves to notify prospective applicants of key program information to assist in the application planning process.

Part 1 of the Application Packet includes a detailed overview of the program, including: project categories; grant selection criteria and scoring categories; and the Connect Illinois Fedcelerator Framework.

Please refer to the NOFO, FAQ, and Connect Illinois website for additional information regarding the Connect Illinois Grant Program: https://www2.illinois.gov/dceo/ConnectIllinois

A complete application includes the following:

A. Broadband Application
   1) Application Overview (Cover Page)
   2) Project Dashboard
   3) Executive Summary
   4) Map and Location Data
   5) Project Impact
   6) Nonstate Match and Demonstration of Financial Need
   7) Community Support
   8) Project Readiness
   9) Project Viability and Sustainability
   10) Affordability and Adoption Assistance
   11) Open Access, Shared Use and Business Strategy
   12) Appendix for Key Attachments (This section lists the required attachments. You are free to include other additional attachments as necessary to support your application.)
B. Uniform Grant Application (per NOFO)
C. Uniform Capital Budget (per NOFO)
D. Conflict of Interest Disclosure (per NOFO)
E. Mandatory Disclosures (per NOFO)
F. W-9 Form

The Illinois Broadband Office appreciates your interest in the Connect Illinois Broadband Grant Program and recognizes the level of effort required to submit your response. To maximize your chances of receiving an award, please be mindful of two key objectives as you prepare your application:

- **Level of Responsiveness**: Provide all required information for the questions below, along with the specified attachments. The responses should be comprehensive, detailed and clear.
- **Grant Selection Criteria**: Review the grant selection criteria in Part 1 of the Application Packet, and ensure that your proposal comprehensively addresses the listed consideration factors.

1. Application Summary

General Information	
Proposal Title	
Project Category (Choose One)	[___] Broadband Access [___] Broadband Innovation [___] Urban Broadband
Infrastructure Type	[___] Last Mile Infrastructure Only [___] Middle Mile Infrastructure Only [___] Both Last and Middle Mile Infrastructure

Applicant Information	
Organization Information	
Organization Legal Name	
"Doing Business As" Name	
Mailing Address	
Website	
Primary Contact	
Name	
Title	
Phone Number(s)	
Email Address	
Prior Grant Background	
Receipt of Prior Grant (Y/N) from Illinois	
State of Illinois Vendor Number	
Organization Type	

Part 2: Broadband Application

Applicant Category	[___] Incorporated Business or Partnership [___] Political Subdivision** [___] Illinois Non-Profit [___] Illinois Cooperative Association [___] Illinois Limited Liability Corporation (organized to expand broadband) ** A political subdivision includes any county, city, village, town, special district, or other political subdivision or public corporation.

2. Project Dashboard

Applicant Information

Financial Information

Grant Requested		Grant % of Budget	
Nonstate Match		Match % of Budget	
Total Project Budget			
Applying Federal Funds in Match	Yes/No	Name of Federal Program	

Communities Served

Number of Communities	
Number of Counties	

Premises Passed or Covered

Segments	Homes	Businesses	Farms	Institutions	Total
Highly Unserved Locations Below 10/1 Mbps					
Unserved Locations Between 10/1 Mbps and 25/3 Mbps					
Underserved Locations Above 25/3 Mbps and Below 100/20 Mbps					

Technology

Type (Please check one)	[___] Fiber	[___] Cable	[___] Fixed Wireless
	[___] DSL	[___] Combination	[___] Other (State below) _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _

Fiber Project: Infrastructure Metrics

Total Fiber Miles			
Fiber Miles by Deployment Method (should equal total)	New Fiber	Upgraded Fiber	Leased Fiber
Fiber Miles by Network Purpose (should equal total)	Last Mile		Middle Mile

Fixed Wireless Project: Infrastructure Metrics		
Number of Towers	New Construction	Leased
Number of Base Stations		
Coverage Footprint (Sq. Miles)		
Spectrum Frequency Band(s) Being Applied		

Service Offering		
Commercially Available Speed from Proposed Project	Lowest Speed	Highest Speed

Community	
Number of Support Letters	
Number of Project Partners	

3. Executive Summary

Directions: Please provide a succinct summary for the topics below. Please limit your response to less than 250 words for each section. However, you can exceed this word limit if required.

A. Project Overview

Please provide a high-level, introductory overview of the project.

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B. Problem Statement

Please describe the broadband-related problems and challenges facing your targeted communities and customers. Please address: a) needs and gaps; b) shortcomings of existing solutions; c) challenges with prior attempts to resolve the problem; d) how this project significantly solves the problem.

C. Description of Solution and Services

Please provide a general overview of your solution, including: a) network technology; b) Internet services (range of speeds offered); c) business strategy to drive adoption.

D. Targeted Communities and Customer Segments

Please discuss the targeted beneficiaries of the project, and specifically address: a) location of the communities; b) market size; c) economic conditions of the service areas (e.g., household income, unemployment data, poverty rates); c) targeted customers (e.g., enterprise, agriculture, healthcare, education, public safety, etc.)
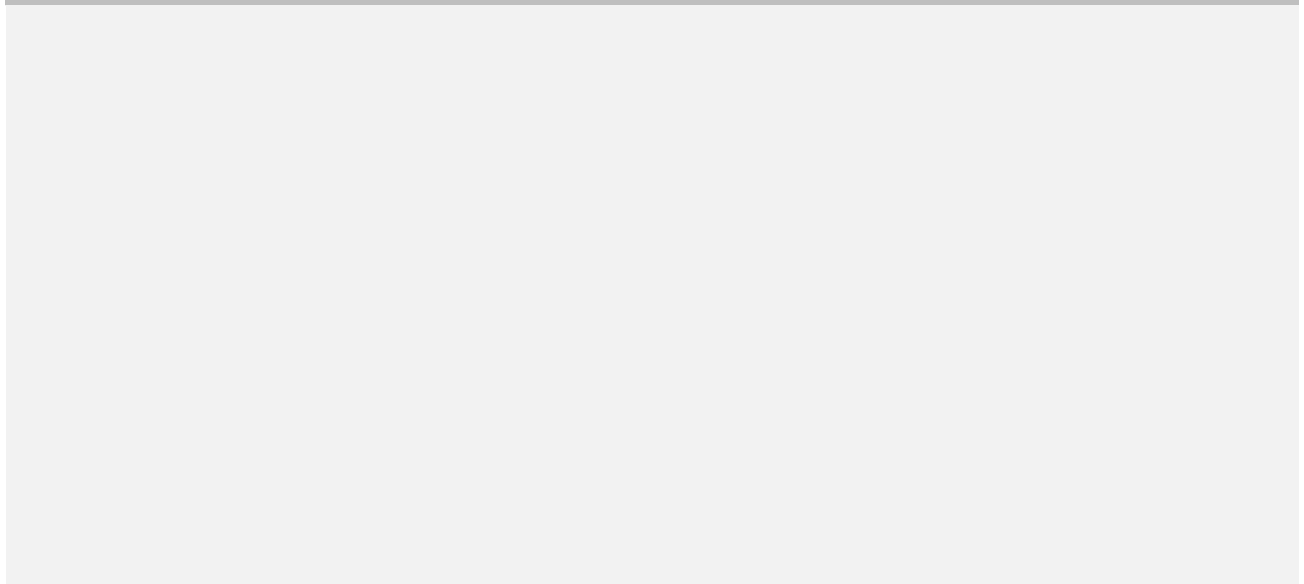
E. Project Benefits

Please discuss the anticipated social and economic benefits that will be realized by the distinct customer segments – e.g., residents, businesses, farms, institutions, public safety, etc. Please cite the key themes from the letters of support.
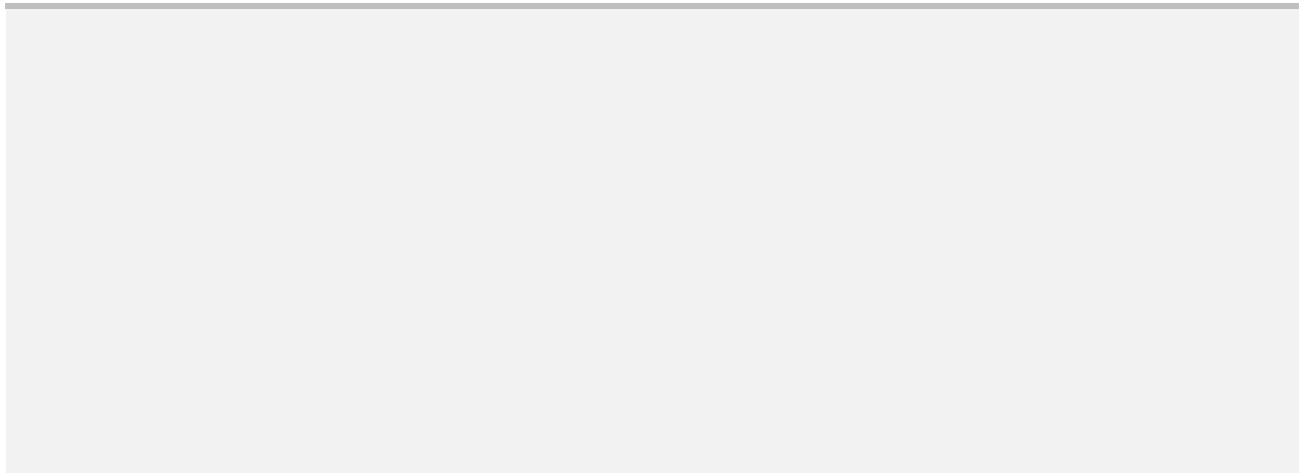
F.   Mission and Operating History

Please discuss your organization's mission and operating history.

G.   Execution and Sustainability

Please discuss the capabilities, experiences, and track record for your organization and its partners to successfully implement, operate, and sustain this project. Please reference unique resources, market presence, and experience in implementing similar projects.

4. Location Information

A. General Information

Project Location: Please describe the location of the project's service area (e.g., region, degree of rurality, breadth of communities involved, etc.)

List of Counties Served: Please list all counties served. Also indicate whether coverage is full or partial coverage.

Name of County	Fully or Partially Served

List of Communities Served: Please list all cities, towns, and villages served. Also indicate whether coverage is full or partial coverage.

Name of Community (Town, City)	Fully or Partially Served

B. Service Area Map

Project Map: Please include a service map of the proposed project area. Please include PDF version and an electronic version in .shp, .kmz, or .kml format. Please ensure that your maps include the following:

- Last-Mile Project: Includes the service area boundaries and also include place names, boundaries, buildings, road/street names or other features that clearly identify the project coverage area.
- Middle-Mile Project: Indicate the location of the middle mile facilities that will be placed.

Please include map as a separate attachment in the Appendix and label as **"Attachment 4-B".**

Confirmation

Check this box to confirm that the Map is included in both PDF and electronic versions. •

5. Project Impact

A. Broadband Impact

Serviceable User Segments: Please state the number of premises passed or covered by the broadband infrastructure for the speed tiers identified below.

Premises in Service Area by User Segment

Speed Now (Mbps)		≤25/3	≤25/3	≤25/3	≤100/20	≤100/20	<100/20
Minimum Available Speed After Build (Mbps)		>100/20	>100/100	1G/1G	>100/20	>100/100	1G/1G
Premises	Homes						
	Businesses						
	Farms						
	Institutions						
	Total						

B. List of Served Premises

Table for Served Premises: Please list the premises that will benefit from the broadband infrastructure, for these categories: businesses, farms, and community institutions (e.g., public safety, education, healthcare, government offices, etc.) These include all connected, passed or covered premises. Please include these in the Appendix and label as **"Attachment 5-B".**

Name	Maximum Available Speed Today (Mbps down/up)	Provide Support Letter (Y/N)
Businesses		
Farms		
Institutions		

C. List of Interconnection Points

Interconnection Points (Middle Mile Projects): Please list all points of interconnection. These can include peering points, carrier hotels, colocation facilities, and other examples of where you interconnect with another telecom operator. Please include these in the Appendix and label as **"Attachment 5-C".**

Middle Mile (Peering Points, Carrier Hotel, Colocation Facility, etc.)		
Name	Type (e.g., peering point)	Address

Justification for Middle-Mile Deployment: Please explain why your project necessitates the deployment of middle-mile and backhaul network elements. If your community has existing middle-mile network capacity from private and/or publicly-owned networks, please explain the reason(s) for not using those facilities.

D. Benefits to Targeted Customer Segments

Narrative on Benefits to Targeted Customers: Please provide a DETAILED narrative regarding examples of the specific social and economic benefits of connecting the following user segments. Please see Exhibit A (below) for several general factors to consider during your outreach and communication efforts with community stakeholders. The narrative should be relevant to the specific circumstances of your project. Generalized examples will receive limited consideration.
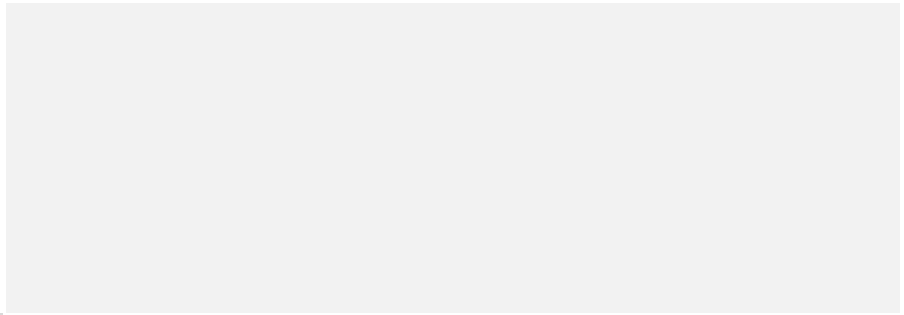
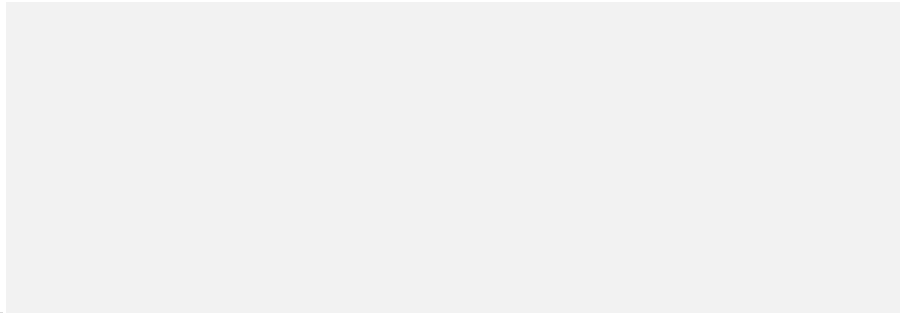|	
Residents	
Businesses	
Continue on next page	

Community Institutions	
Other ISPs (if offering open-access for your last-mile and/or middle mile network)	

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Exhibit A:

Consideration Factors for Question 5E: Please include in your narrative specific examples from your communication with beneficiaries that will be served by this project. We offer these categories to prompt your thinking regarding several types of social and economic benefits.

- ✓ Residents: Ability to telework, remote learning engagement, new housing starts, etc.
- ✓ Businesses: Degree of competitiveness, market expansion, workforce development, job creation, attracting new business establishments, etc.
- ✓ Farmers and Agricultural Use Customers: Farming efficiency and productivity, new applications for precision agriculture, etc.
- ✓ Community Institutions: Enhancement to capabilities to execute mission in more effective and efficient manner (across schools, libraries, hospitals, clinics, social service centers, community gathering centers, etc.)
- ✓ Other: Public safety improvements; other complementary infrastructure improvements; etc.
- ✓ Letters of support describing project impact – specific to the target customers' circumstances

E.   Level of Economic Distress

Level of Economic Distress in Targeted Service Area: Please address whether the project is providing broadband improvements to an economically distressed area. The level of economic distress can be measured by the degree to which unemployment rates, poverty rates, or population loss levels are significantly higher than the statewide average. The Applicant may also utilize references to median household income, or percent of students eligible for free or reduced cost school lunches.

Key Economic Indicators in Service Area: Please provide the following indicators for your community and State. Please see Exhibit B for links to find the key indicators for your service area.

Indicator	Service Area	State Average (included below)*	Percentage Difference (Unfavorable/ Favorable)
Unemployment Rates		9.8%	
Average Poverty Rate		11.5%	
Children Qualifying for School Lunch Program		51.53%	
Median Income		$63,575	

*As of September 1, 2021

Exhibit B:

Information Sources for Key Indicators: Please consult these resources to find the relevant indicator for your communities.
Unemployment Rates • https://www2.illinois.gov/ides/lmi/Pages/Current_Monthly_Unemployment_Rates.aspx Median Income (reported by US Census 2018) • https://www.census.gov/quickfacts/fact/table/IL/BZA210218 Children Qualifying for School Lunch Program (reported by IL Sec of State for the NSLP) • https://www.cyberdriveillinois.com/departments/library/libraries/pdfs/il-nslp-eligibility.pdf Average Poverty Rate (reported by US Census) • https://www.census.gov/quickfacts/fact/table/IL/BZA210218

6.   Nonstate Match and Demonstration of Financial Need

A. Nonstate Match			
Nonstate Match Amount		Nonstate Percentage of Project Budget	
Match Source: Please discuss source of the match.			
Evidence: Please describe the type of proof being submitted (e.g., letter of credit for loan, funds on balance sheet, signed contract for 3rd party investment, etc.)			
Evidence of Match Attachment (Please include separate attachment and label as **"Attachment 6-A".**	**Confirmation** Check this box to confirm that evidence for nonstate match from ALL contributors is included in the Appendix. •		
Specific Contributors of Nonstate Match	Nonstate Match Contributor	Contact Info. (Email and Phone)	Amount ($)

B.	Need for State Grant Support

Narrative on Need for State Support: Please describe why this project cannot move forward absent a state grant. Discuss the status of the business case without and with subsidy. Address prior attempts to make this investment and the key barriers to financing the project.

Rationale for Level of Nonstate Match: Please describe the justification for the specific amount of nonstate match contribution being invested, and not a higher amount.

**Financial Assessment: Section C is required of applicants seeking to use federal funding for a portion of the Connect Illinois nonstate match – and is encouraged, but optional, for other applicants.

C.	Financial Assessment of Grant Requirement

(Please see Exhibit C: "Calculation of Metrics")	Without Grant	With Grant
Payback Period Please calculate the payback period with and without the grant. (Years and Months)		
Project NPV Please state the net present value of the project with and without the grant.		

Narrative on Financial Metrics Supporting State Grant: Please provide a narrative regarding how the results of the payback period and NPV analysis with and without the subsidy support the specific grant amount requested.

Supporting Analysis	**Confirmation**
Include the supporting analysis in spreadsheet form (copy/paste from Excel). If attached separately, please label as **"Attachment 6-C"**	Check this box to confirm that supporting analysis is provided to show the Payback Period and NPV – with and without the grant. ●

Exhibit C:

Calculation of Metrics

Payback Period

The payback period involves the time it takes to recover the initial capital investment based on future operating cash flows from the project. Please provide the payback period for your project for two scenarios: 1) without the grant; 2) with the grant. For the second scenario (with grant), simply discount the capital investment level by the percentage that the grant represents of the total project budget.

Please follow these guidelines:

- Consider only those after-tax operating cash flows involving revenue and operating expenses for the project. This means do not consider depreciation.
- Do not consider any financing expenses (e.g., payment of interest/principal, dividends, etc.)
- The first month of the analysis should start when you first start to incur capital expenses. For example, if you first start to incur expenses on 6/15/2022, then the period should start with June 2022.
- Express the payback period in years and months.
- Please be sure to include the detailed spreadsheet in the Appendix; this should show all sources of capital investment and operating cash flows. The capital investment should match the project budget.

Net Present Value

The Net Present Value (NPV) involves the present value of net cash flows taking into account all revenues, expenses, and investments. A negative NPV implies the project fails to earn its cost of capital, thereby thwarting any private investment. The grant from Connect Illinois should be commensurate with the negative NPV. Please compute the NPV with and without grant support. Please follow these guidelines:

- The cash flows should include operating cash flows and investments.
- Operating Cash Flows (OCF) involve all net cash flows generated from the annual operation of the project. Annual OCF equals after-tax operating income plus depreciation.
- The investments include all upfront and recurring capital expenditures.
- Please apply a discount rate that reflects your weighted average cost of capital (WACC). The WACC reflects the cost of debt (net of taxes) and equity. If you are unsure of what WACC to apply, please use 15% which reflects a common benchmark.
- Please include a terminal value (TV) for the project in year 10. The TV reflects what the project could be sold for in the 10th year. Thus, for your analysis, please multiply the net OCF in Year 10 by a factor of "8" – i.e., eight times the net OCF in year 10. Please apply this assumption for the TV multiplier.
- Please be sure to include the detailed spreadsheet of the NPV analysis.

D. Project Budget

Budget Narrative: Please provide a narrative for your budget. Identify all major expenditure categories and the total sums for those categories.

Budget Efficiency: Please describe the steps that will be taken to achieve efficiencies in expenditures. These can include: a) leveraging existing assets; b) engaging in competitive procurement through request for proposals (RFPs) for major purchases; c) other, etc.

Detailed Budget Schedule: Please provide a budget schedule in the Appendix, and label as **"Attachment 6-D"** and include in Appendix. The budget should show all required units of material and labor, cost per unit, and total cost for each line item. Please refer to the Budget Template on the program website.

Confirmation

Check this box to <u>confirm</u> that the Budget Schedule is included in the Appendix: •

Non-Eligible Cost: Please address if there are additional costs being incurred for this project that are ineligible, in order to deploy broadband to this area. If yes, identify and list all ineligible costs associated with the proposed project and state your commitment to funding without grant funds.

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E. Cost Metrics and Key Indicators

Please complete the following metrics. The costs include all expenditures related to network elements, plant, and placement costs.

Fiber Project

Cost per Fiber Mile Deployed (Last or Middle Mile Project): Please calculate the cost per fiber mile that reflects all planning and constructions costs. The cost elements should include: engineering design; permitting; pre-construction costs (e.g., make ready); outside plant materials (e.g., fiber, poles, hardware, conduit, splitters, etc.); labor; and construction management. Please do not include the costs for network equipment, fiber drops, equipment external to premise (e.g., ONT), customer premise equipment.

Construction Cost per Home Passed: Please calculate the cost per home passed. The cost elements should include the total costs applied in the prior question and then divided by each home passed. Please do not include the costs for the fiber drops or equipment to the particular premise.

Cost per Premise Connected: Please calculate the incremental cost for each premise connected. This includes the fiber drop, external electronics, and any customer premise equipment not charged to the customer.

Cost per IRU Fiber-Strand Mile: Please calculate the cost for fiber-strand mile purchased.

Fixed Wireless Project

Cost per Premise Covered: Please calculate the cost for each premise covered by the wireless network. The cost elements should include: engineering design; permitting; pre-construction cost; spectrum; tower site acquisition and construction; fiber backhaul construction; labor; construction management; base station equipment. Please do not include the costs for customer equipment – including external equipment (e.g., receivers) and customer premise equipment.

7. Community Support

A. Evidence of Community Support

Degree of Community Support: Please provide a narrative regarding the breadth and depth of community support.

Overview of Letters of Support: Please provide an overview of the letters of support, and specifically address: a) number of letters; b) sources; c) degree to which letters are personalized and reflect the unique support of the particular stakeholder; d) specific level of need of the supporter; e) process (and any challenges) to solicit the letters.

Appendix for Letters of Support: Please include all Letters of Support in the Appendix. Please label as **"Attachment 7-A"**

Confirmation

Check this box to confirm that Letters of Support are included in the Appendix: •

Community Strategic Plan: Please discuss whether, and if so, how this project fits into an existing community strategic plan.

Community Survey and Feedback: Please discuss whether you conducted any type of a survey to evaluate the needs, gaps, and overall project support. If so, summarize the results of the survey. Also, if you collected any other feedback from members of your community (e.g., community forum, etc.), please describe that process and summarize the results.

Survey Results: Please attach the results of the survey in the Appendix and label as "**Attachment 7-A2".**

Confirmation

Check this box to confirm that Survey Data, if available, is included in the Appendix: •

B. Financial Commitment from Community Stakeholders

Financial Contribution by Community Stakeholders: Please discuss any financial investment made by community members and organizations. Address the following: a) degree of financial contribution from community-based members and institutions; b) in-kind resource commitments from community-based members and institutions; c) evidence to support verification of pledge. Please include any evidence in the Appendix, and label as: "**Attachment 7-B".**

Confirmation

Check this box to confirm that evidence, if available, is included in the Appendix regarding any financial commitment from community stakeholders. •

8. Project Readiness

A. Detailed, Reasonable Project Schedule

Project Schedule Narrative: Please provide a detailed narrative regarding your project schedule. Please address: a) project start and end dates; b) key dependencies; c) key risk factors and mitigation strategies.

Government Approvals and Permits: Please address whether all required government approvals and permits for this project to begin construction have been identified and included in the project schedule. This includes permissions required from various government authorities (e.g., municipal, city, township, county, state) regarding such areas as planning, zoning, rights of way, roadwork, railroad crossings, etc.

Please itemize the approvals that will be required prior to project construction with the corresponding entity that will provide approval, and a brief description of the process required to obtain approval.

Include the permitting process as a step on the Project Schedule.

Detailed Project Schedule: Please include a detailed project schedule in the Appendix and label as **"Attachment 8-A" .**

Confirmation

Check this box to confirm that the Project Schedule is included in the Appendix: •

*** Other Special Reviews:** Please note that construction projects may require other reviews – e.g., Environmental, Historical Architecture and Resources, etc. Please ensure that your project plan reflects the time to apply and obtain these authorizations.

B. Detailed Engineering Design and Network Map

Narrative of Geographic Coverage: Please provide a narrative that describes the geographic coverage of the proposed project.

Network Map: Please include a detailed network map in the Appendix and label as **"Attachment 8-B"** . Maps should be included in both PDF version, and a spatial data version (e.g., .shp, .kmz, or .kml) as an electronic attachment or USB, if necessary. Please see infrastructure type specific instructions below.

Last Mile Fiber Project or Combination (Last-Mile and Middle-Mile): Please include a route map that shows: a) service area with boundaries; b) lateral miles and middle-mile (separate colors); c) all premises served by the network (residents, businesses, farms, institutions); d) all peering points with middle-mile and colocation facilities; e) names of places, boundaries, buildings, road/street names or other features that clearly identify the project coverage area; f) location of any existing and leased facilities (separately color coded).

Middle-Mile Project: Please include a route map that shows: a) service area with boundaries; b) middle-mile; c) meet-me points with last-mile networks; d) connections to points of interconnection with Internet backbone (e.g., carrier hotel); e) names of places, boundaries, buildings, road/street names or other features that clearly identify the project coverage area; f) location of any existing and leased facilities (separately color coded).

Wireless Project: The coverage map should show: a) coverage area; b) location of all towers and base stations; c) backhaul to the base stations (e.g., fiber or microwave); d) backhaul interconnection points to the Internet backbone; e) location of any existing and leased facilities (separately color coded).

Confirmation

Check this box to confirm that a detailed Network Map is included in the Appendix: •

Technology and Engineering System: Please provide details regarding the network technology, including: a) architecture; b) standards; c) equipment; d) vendors (if already chosen); e) design parameters used in the system (e.g., oversubscription ratio calculations, bandwidth consumption per user, link loss, data rates per link, redundancy requirements, and technical specifications). For wireless projects, please also include propagation assumptions and underlying evidence.

Professional Engineering Certification: Applicants MUST PROVIDE a certification from a Professional Engineer. Please include a signed copy of the Certification in Appendix and label as **"Attachment 8-B2"** .

Confirmation

Check this box to ensure that you have included a signed Professional Engineering Certification. Absent this document, your Application will be deemed "Incomplete":   •

C.   Leveraging Existing Resources and Operating Assets

Please identify all network assets being leveraged – e.g., middle-mile, data centers, colocation facilities, towers, etc. This includes all publicly and privately funded assets.

Please clearly identify all non-network resources and assets being contributed (e.g. personnel, premises, offices, etc.)

9. Project Viability and Sustainability

A. Network Capacity and Scalability

Network Capacity: Please address: a) total network capacity today; b) how this capacity effectively supports the service speeds being offered in the near-term.

Scalability to 100/100 Mbps download/upload: Please provide evidence that the installed broadband infrastructure is scalable to speeds of at least 100 Mbps download and 100 Mbps upload. This can include, for example, documentation from the equipment manufacturer, or certification from the registered Professional Engineer.

Future Proofing Today's Investment: Please discuss the scalability of the proposed network and technology solution, by addressing: a) the maximum speeds that can be marketed in 10 years; b) process and required investment for upgrading capacity in the future; c) the useful life of the assets.

B. Financial Sustainability

Narrative on Financial Sustainability: Please provide a detailed narrative regarding the key drivers to financial sustainability of this project. Please address: the following: a) minimum take rate (i.e., percentage of passed or covered premises that become customers) required to achieve positive operating cash flow; b) managing growth of operating expenditures to be in line with revenue growth; c) duration (years and months) to achieve positive operating cash flow.

***Financial Sustainability Risks*:** Please discuss key risks to financial sustainability and mitigation plans, including: a) competition risks that could impede targeted customer penetration rates; b) adoption risks by customers; c) liquidity risk (if the project is taking on debt).

Pro Forma Financial Statements: Please provide detailed financial forecasts for the next 10 years, including: a) income statement; b) cash flow statement; c) balance sheet. These financial statements should be for this project only. The numbers should be consistent with other financial information provided in the application – e.g., Project Budget, Match Amount, Payback/NPV analysis, etc. Please include these pro forma statements in Appendix and label as **"Attachment 9-B"** .

Confirmation

Please check box to confirm that you have provided a financial forecast spanning 10 years in the Appendix: •

Audited Financial Statements: Please provide two years of audited financial statements. Include a copy in the Appendix and label as **"Attachment 9-B2"** . If not, please explain why you cannot include audited statements.

Confirmation

Please check this box to confirm that two years of audited statements are included in the Appendix: •

C. Organization Capability and Track Record

Experience: Please provide details regarding your organization's experience and results in having deployed similar networks.

Personnel: Please provide a summary of key personnel that will manage this project – e.g., planning, infrastructure deployment, service roll-out, and growth.

Resumes: Please include resumes of these personnel in the Appendix and label as **"Attachment 9-C".**

Confirmation

Please check this box to confirm that resumes and included in the Appendix: ●

Key Project Partners: Please list all key partners and their roles. These partners can include: local government; community advocates; project investors; anchor institutions; marketing firms; construction contractors; broadband retail service providers; etc. Please cite any letters of support from project partners.

10. Affordability and Adoption Assistance

A. Low Price Service Tier

Please address your pricing strategy and programs that may involve: a) special programs and partnerships that provide discounts to economically disadvantaged customers or institutions with limited budgets (e.g., community institutions); b) entry-level service tier(s) that provides minimum level of broadband for an affordable rate. Please also discuss if and how you plan to leverage the FCC's Affordable Connectivity Program (ACP) and Lifeline Program to serve qualifying low-income households.
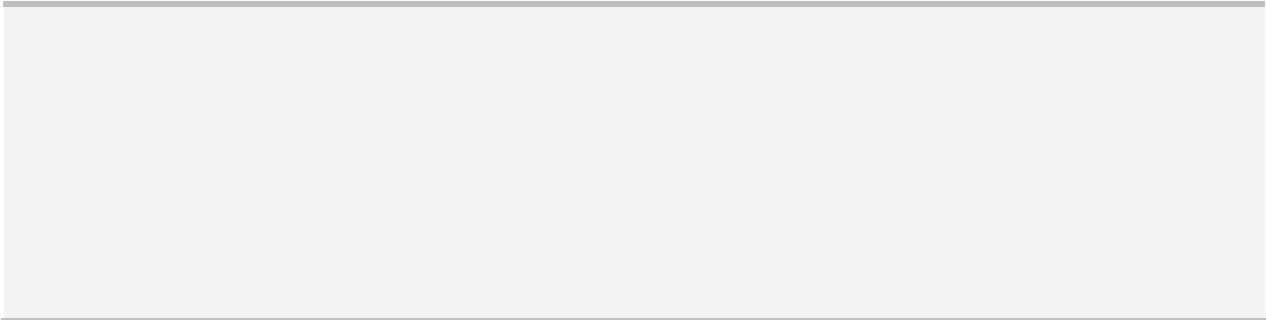
B. Programs to Foster Adoption

Please provide: a) detailed description of broadband adoption activities planned for project – e.g., training, technical support, community networks, etc.; b) technology strategies to enable adoption to general public (e.g., community networks that provide free public Wi-Fi, others).

Please check the Illinois Broadband Office's website for best practices and innovative programs to foster adoption: https://www2.illinois.gov/dceo/ConnectIllinois

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11. Open Access, Shared Use & Business Strategy

A. Service Packages

Please include the following: a) list of service packages (download/upload) for all your targeted customer segments; b) price points for each package and other recurring fees (e.g., Wi-Fi router rental); c) ability to purchase unbundled Internet (i.e., broadband service without having to purchase other services); d) specific contractual terms required to purchase service; e) non-recurring charges (e.g., equipment, installation, and any other non-recurring fees); f) any restrictions.

Service Packages and Pricing: Please include your proposed services and pricing in the Appendix and Label as **"Appendix 11-A."**

Confirmation

Please check this box to confirm that a schedule of your offerings and pricing is included in the Appendix:

B. Price Points Comparable to Rates in Competitive, Urban Markets

Narrative on Competitive Pricing: Please explain whether prices are commensurate with prices in urban, competitive markets. In addition, please review the FCC's Urban Rate Survey at the following link, and provide a narrative on how your rates compare to the most competitive rates listed for your service tiers. https://www.fcc.gov/economics-analytics/industry-analysis-division/urban-rate-survey-data-resources.

Five-Year Service Commitment: Please confirm your commitment to offer these service packages at the stated price points for next five years. The absence of this commitment will deem your application as "incomplete".

Competitor Offerings and Pricing: Please include services and pricing from existing service providers in **Appendix 11-B**.

Confirmation

Please check this box to confirm that a schedule of competitor offerings and pricing is included in the Appendix:

C. Customer Acquisition

Customer Acquisition Plan and Strategy: Please provide a detailed narrative regarding: a) plan to acquire and retain customers; b) strategy for marketing, customer segmentation, targeting and positioning; c) details regarding overall sales strategy to support customer journey – e.g., awareness, evaluation, purchase, service initiation, customer care/billing, retention; d) details regarding sales organization and relevant partners

D. Open Access Plan

Open Access Policies and Programs: Please address the following: a) policies to enable 3rd party ISPs to purchase wholesale services and serve retail customers; b) wholesale services and rates; c) details regarding the identification of retail ISP partners and status of contract negotiations (e.g., MoU, signed commitment).

12. Appendix – Required Attachments

Please include the following documents as attachments. The lack of any of these documents may deem the application incomplete. Also, feel free to include other attachments that convey other relevant information regarding your service area, network, business model, and organization.

Required Attachments	
Attachment Number	Purpose
Attachment 4-B	• Service Area Map (PDF File) and please add electronic version
Attachment 5-B	• List of Premises in Service Areas (businesses, farms, and institutions)
Attachment 5-C	• List of Interconnection Points
Attachment 6-A	• Evidence of Non-State Match
Attachment 6-C	• Financial Analysis of Payback Period and NPV
Attachment 6-D	• Budget Schedule
Attachment 7-A	• Letters of Support
Attachment 7-A2	• Community Survey
Attachment 7-B	• Financial Investment by Community Stakeholders
Attachment 8-A	• Project Schedule
Attachment 8-B	• Detailed Network Map (passing's and coverage)
Attachment 8-B2	• Certification from Professional Engineer
Attachment 9-B	• Pro Forma Financials
Attachment 9-B2	• Audited Financial Statements
Attachment 9-C	• Resumes of Key Personnel
Attachment 11-A	• Service Offerings and Pricing Schedule from Applicant
Attachment 11-B	• Service Offerings and Pricing Schedule from Existing Service Providers
Other Attachments	• Please add other items as needed to support your application

[End of Application Packet]