

11/23/2020

IowaGrants

| 2 of 5 Name* | Tom Richtsmeier Control Number 385863 | | Control Number 385863 |
|---|---|---------------|-----------------------|
| Title | GM | | |
| Organization | Vinton Municipal Communications Utility | | |
| Address | 214 E 2nd Street | | |
| City/State/Zip | Vinton _{City} | lowa State | 52349 Zip |
| Telephone Number | 319-472-4813 | | |
| E-Mail | generalmanager@vmeu.org | | |
| County(ies) Participating, Involved, or Affected by this Proposal* | Benton County | | |
| Congressional District(s) Involved or Affected by this Proposal* | 1st - Rep. Abby Finkenauer (D) Congressional Map | | |
| lowa Senate District(s) Involved or Affected by this Proposal* | 38 District Map | | |
| lowa House District(s) Involved or Affected by this Proposal* | 75 District Map | | |
| | | | |

Business Organization - NOFA #004

| Business Legal Name* | Vinton Municipal Communications Utility | | | |
|---|---|--|--|--|
| Mailing Address | | | | |
| Street * | 214 East 2nd Street | | | |
| City* | Vinton | | | |
| State* | IA | | | |
| Zip* | 52349 | | | |
| Alternate Mailing Address (used for warrants and/or payments) | | | | |
| Alternate Street | | | | |

- **Alternate City**
- Alternate State
- Alternate Zip

Additional Information

Please name and upload file "Application Number - Applicant Name - Business Organization". File can be a PDF or Word Document.

2020 11 20 VMCU Business Organization.pdf

Public Redacted Broadband Additional Information

Is the Applicant a Communications Service Provider as defined by Iowa Code chapter 8B, including but not limited to private sector carriers, local governments, utilities, and other entities that provide or intend to provide Broadband service.

Communication Service Provider*

Executive Project Summary NOFA #004

This section requires an Applicant to summarize, at a high level, its proposed Project, including but not limited to the geographic area in which the Project will occur, the primary deployment model (e.g., wireline versus wireless), and a general overview of how Applicant has/will comply with the terms, conditions, and requirements of Iowa Code section 8B.11, Iowa Administrative Code rule 129—22, and this NOFA #004. Name and upload this file "Application Number - Applicant Name - Executive Project Summary". This can be a PDF or Word Document.

Executive Project Summary* 20201122NOFA004VMCUExecutiveProjectSummary.docx

The section requires Applicant to affirm whether or not State funds are necessary for the Project to proceed.

Yes

Are State Funds Necessary for the Project to proceed?* No

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This sec 30 for an Applicant to describe how the Project will or will not proceed if State funds requested are not ultimately awarded. Control Number 385863

Describe how the Project will or will not

proceed if State funds requested are not ultimately awarded.* The project will proceed without State Funds.

Project Status

| Project Milestone | Estimated Completion date | Costs Incurred |
|---|---------------------------|----------------|
| OSP / ISP Design Complete | 03/01/2021 | \$20,000.00 |
| OSP / ISP Contract Bid and Award | 04/30/2021 | \$7,000.00 |
| Construction Start | 08/02/2021 | \$0.00 |
| Construction Complete | 08/31/2021 | \$300,000.00 |
| Service Testing and Turnup | 12/30/2022 | \$15,000.00 |
| OSP/ISP Contract closeouts - Project Complete | 12/30/2022 | \$15,000.00 |
| | | |

Demonstrated Experience NOFA #004

This section requires information about Applicant's demonstrated experience in provisioning Broadband across the State of lowa. Applicant shall include relevant information about their experience that has prepared them to deploy their Project, such as, for example, community partnerships and services; number of years in business; number of years of experience providing the types of services sought by this NOFA #004; if the Applicant is a relatively new provider/market entrant, an explanation of the benefits, if any, of being a newer provider/market entrant; the level of technical experience in providing the types of services sought by this NOFA #004; or any other information that would aid the Office in assessing whether Applicant is a Responsible Applicant.

Demonstrated Experience*

Community Support Document 3

2020 11 20 VMCU Demonstrated Experience.docx

References

| Name | Michael Barron |
|---------------------|--------------------------------------|
| Telephone Number | 319-472-4154 |
| Reference Letter #1 | VMCU NOFA 4 Barron reference .docx |
| Name | Michele Schoonover |
| Telephone Number | 319-472-6260 |
| Reference Letter #2 | VMCU NOFA 4 Schoonover reference.pdf |
| Name | Kurt Karr |
| Telephone Number | 319-214-3352 |
| Reference Letter #3 | MONKEYTHIS VMCU GRANT.docx |

Broadband Grants Core Application - Exhibits B, C, D, and D.1

Applicant requests that the contents of their application remain confidential in whole or in part, pursuant to Section 7.18 of the NOFA #004.

City of Vinton Grant Support Letter.pdf

DISCLAIMER: An applicant requesting confidential treatment of portions of an application must attach a redacted public copy of the application. If the applicant fails to attach a redacted public copy pursuant to Section 7.18.1.5 of the NOFA #004, the Office shall be relieved from any responsibility for maintaining the the confidentiality of the application pursuant to 7.18.5 of the NOFA #004.

NOTE: Applicants are ONLY required to submit a Public Redacted Copy IF they are requesting confidential treatment with respect to an aspect of their Application. Further, the mere fact that an Applicant submits a Public Redacted Copy (or otherwise requests confidential treatment) does not ensure the aspects of the Application that are redacted (or for which confidential treatment is otherwise sought) will be treated as confidential; the Office will only afford confidential treatment to the extent requests comply with the terms, conditions, and requirements of the NOFA #004, and solely to the extent permitted by Iowa Code Chapter 22 and the Office's corresponding fair information practices rules available at 129 IAC 2.

| Full Unredacted Copy* | CopyofVMCU112020Broadband_Grants_Core_Application_NOFA004 1.xlsm | | |
|---|--|--|--|
| Public Redacted Copy | | | |
| This section allows the Applicant to optionally attach three (3) community support documents for the Project, including but not limited to testimonials or letters of support. Please send any additional community support documents to ociogrants@iowa.gov. See NOFA Exhibit C Section 2.6. | | | |
| Community Support Document 1 | VMCU NOFA 4 Schoonover reference.pdf | | |
| Community Support Document 2 | VMCU Board Minutes 11-10-20.docx | | |

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Broadband Grants Program Grant Agreement - Exhibit E

Exceptions to Broadband Grants Program Grant Agreement* VMCU 112020 signed exhibit_e_-_broadband_grants_program_grant_agreement_nofa004.pdf

Certification, Authorization, and Release of Information - Exhibit F

Certification Letter (Public)*

VMCU 112020 signed exhibit_f_-_certification_letter_nofa_004.pdf

Request for Confidentiality or Form 22 - Exhibit G

Form 22 (Public)*

VMCU 112020 signed exhibit_g_-_request_for_confidentiality_-_form_22_nofa_004.pdf

Project Budget

| Category | Description | Total Estimated | Total Estimated | Total Estimated | Requested Grant | Grant Request |
|--------------------------|--|--------------------|--------------------|--------------------|--------------------|------------------|
| | | Cost \$ | Cost \$ | Project | Support % | (Est. Cost * |
| | | (Exhibit D) | (Exhibit D1) | Budget (D+D1) | | Request %) |
| Conduit | 1.25" Mainline Conduit Material Only | \$3,825.00 | \$0.00 | \$3,825.00 | 30.0 | \$1,147.50 |
| Fiber/Copper | Labor & material for mainline & subscriber fiber cables, access points (handholes), splice closures, ground rods, multi-port service terminals with various tail lengths, demarcation housing, field spl | \$96,750.00 | \$0.00 | \$96,750.00 | 30.0 | \$29,025.00 |
| OSP Engineering | OSP Design, As Staked Construction Prints, OSP Bill of materials, Request for Proposal process and associated Permits | \$20,425.00 | \$0.00 | \$20,425.00 | 30.0 | \$6,127.50 |
| Design Engineering | ISP Engineering, Test and Turnup | \$18,200.00 | \$0.00 | \$18,200.00 | 30.0 | \$5,460.00 |
| Construction Mgmt. | Pre-Construction meeting, Construction oversight, As Built unit verification, periodic inspection, Final closeouts with associated as built map and construction prints | \$30,450.00 | \$0.00 | \$30,450.00 | 30.0 | \$9,135.00 |
| Tower | | \$0.00 | \$0.00 | \$0.00 | 0 | \$0.00 |
| Antenna | | \$0.00 | \$0.00 | \$0.00 | 0 | \$0.00 |
| Boring | Labor only to place the mainline 1.25" Conduit | \$86,025.00 | \$0.00 | \$86,025.00 | 30.0 | \$25,807.50 |
| Trenching | | \$0.00 | \$0.00 | \$0.00 | 0 | \$0.00 |
| Knifing | Labor only to place the subscriber 0.75" Conduit | \$67,620.00 | \$0.00 | \$67,620.00 | 30.0 | \$20,286.00 |
| Aerial | | | | | | |
| Deployment/Make Ready | | \$0.00 | \$0.00 | \$0.00 | 0 | \$0.00 |
| Outside Plant | | \$0.00 | \$0.00 | \$0.00 | 0 | \$0.00 |
| Switching Equipment | | \$0.00 | \$0.00 | \$0.00 | 0 | \$0.00 |
| Routing Equipment | | \$0.00 | \$0.00 | \$0.00 | 0 | \$0.00 |
| Optical Equipment | OLT Blade, 4 GPON optics | \$9,938.00 | \$0.00 | \$9,938.00 | 30.0 | \$2,981.40 |
| Customer Premise | 1:1 ONT and Residential Gateway for 118 subscribers | \$23,836.00 | \$0.00 | \$23,836.00 | 30.0 | \$7,150.80 |
| Equipment | | | | | | |
| Other | | \$0.00 | \$0.00 | \$0.00 | 0 | \$0.00 |
| Totals | | \$357,069.00 | \$0.00 | \$357,069.00 | | \$107,120.70 |

Minority Impact Statement

Question # 1

1. The proposed grant programs or policies could have a disproportionate or unique POSITIVE IMPACT on minority persons. *

If YES, describe the positive impact expected from this project

Indicate the group(s) positively impacted.

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| 12012020 | lowaGrants | |
|---|--|-----------------------|
| 5 of 5 Question # 2 | | Control Number 385863 |
| 2. The proposed grant project programs or policies could have a disproportionate or unique NEGATIVE IMPACT on minority persons. * | No | |
| If YES, describe the negative impact expected from this project. | | |
| If YES, present the rationale for the existence of the proposed program or policy. | | |
| If YES, provide evidence of consultation with representatives of the minority groups impacted. | | |
| Indicate the group(s) negatively impacted. | | |
| Question # 3 | | |
| 3. The proposed grant project programs or policies are NOT EXPECTED TO HAVE A DISPROPORTIONATE OR UNIQUE IMPACT on minority persons. * | Yes | |
| If YES, present the rationale for determining no impact. | VMCU services are offered on a non discriminatory basis. | |
| Certification | | |
| I hereby certify that the information on this form is complete and accurate, to the best of my knowledge.* | Yes | |
| Name of Person Submitting Certification. * | Tom Richtsmeier | |
| Title of Person Submitting Certification* | GM | |
| | | Return to top |
| | | |

lowa.gov - The Official Website of the State of Iowa.

Dulles Technology Partners Inc.