



#### **Contact Information**

The Local Public Offic	ial may be a County Judge or a May	yor.	
Name			
Held Office		Phone Number	
Mailing Address			
City		Z	ip
Unique Project Name	(Community Name)	(ISP Name)	- (Rank)
Date Awarded			
complaints from citizen	ect Rules require the Local Public Ons who believe that their homes are sofficial. County Judges and Mayors	still not being offered service a	
Name			
Held Office			
Phone Number			



#### **Project Completion Information**

The rules state that when the ISP has completed deployment to $95\%$ of locations in the project footprint, it shall
notify the Department of Commerce Broadband Office and the municipality, unincorporated community or
county of that fact.

Original Expected date of project completion	
Have you been notified by the ISP that at least 95% of the residents are served the project? (Yes/No)	l by
If you answered "No" to the previous question, please, provide a reason why, regarding possible delays on completion. (If so, include the new date of comp	<b>.</b>
Evaluation of the Project	
For the following questions, limit your answers to residents within the pro- Internet Service Provider acting as co-applicant of this project.	ject footprint and regarding the
What type of infrastructure was built, i.e., fiber, fixed wireless, etc.?	
Have you received complaints regarding speed by customers of the service provided in the project? (Yes/No. If yes, include an approximate number of complaints.)	
Have you received complaints regarding lack of service in areas that were promised to be served by the project? (Yes/No. If yes, include an approximate number.)	
Have you received any other complaints regarding poor service, including customer service and delays in repairs/installation? (Yes/No. If yes, include an approximate number.)	
Have you received positive feedback from the public about the service provided through the project? (Yes/No. If yes, include an approximate number.)	

Please, include all the addresses of complaints received regarding service in the project in Annex 1 and the positive feedback in Annex 2, at the end of the form.



Please, list below the service interruptions experienced in the last six months.

Date(s)	Duration	Area and approximate number of locations affected



_	tion regarding ed	lucational benefi	ts, increase in bus	service. If applicable iness sales, job creat	
ase, describe brief	ly, in your own w	ords, your opini	on of whether the	ISP is fulfilling its s	ervice obligations



You can use the Annex Section to list resiresidents is too large or the extension of the letter and attach it to this report, or you of at kimberly.young@arkansasedc.com	he lack of service require a more co	mplex explar	nation, you may write a
Signature of Official tasked with hearing complaints from citizens		Date	
Signature of Local Official			

Note: Please complete, if applicable, Annex 1 and 2 attached to this document.



#### Annex 1

Use the table below to list residents in the project footprint that have reported lack of access to broadband after the Internet Service Provider notified your office that 95% of the broadband infrastructure has been achieved.

Name	Address	Issue (lack of service/insufficient speed/other)



Name	Address	Issue (lack of service/insufficient speed/other)



Name	Address	Issue (lack of service/insufficient speed/other)



#### Annex 2

Use the table below to add any positive feedback from the public about the ARC project, including quality of connection, customer service and any indirect positive outcomes related to the project.

	Positive Feedback
Name	
- 10	
Address	
Name	
Address	
Name	
Address	
Name	
Name	
Address	
Name	
Address	
Address	
Name	
Address	



	Positive Feedback
Name	
Address	
Name	
Address	
Name	
Address	
Name	
Address	
Name	
Address	
Name	
Address	
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