



## Broadband Infrastructure Program Data Report Form

*This Broadband Infrastructure Program (BIP) report form will serve as a tool to capture indicators highlighting broadband infrastructure from the award's inception to the award's closeout. The form contains three separate reports: Baseline Report, Performance (Technical) Report, and Annual Report.*

**Baseline Report:**

The Baseline Report is submitted once at the beginning of your project and is based on anticipated figures and schedules. You will use the Baseline Report to provide your projected goals and planned activities from the award start date to closeout. Some metrics will also ask you to provide data on the current state of your program before expending BIP grant funds. The Baseline Report is due 45 calendar days after NEPA approval.

**Performance (Technical) Report:**

The Performance (Technical) Report is submitted semi-annually for periods ending March 31 and September 30 and captures project performance and outcomes. You will use the Performance (Technical) Report to provide your actual completed goals and planned activities from award inception to the current reporting period. You will submit the semi-annual report twice a year until you expend all BIP grant funds, as well as upon closeout of the award. The Performance Report is due 30 calendar days after the closing period. The final closeout report is due 120 calendar days after the last Performance Technical Report.

**Annual Report:**

The Annual Report captures narrative data on your project. You will use the Annual Report to provide necessary information on BIP grant-funded project activities from award inception to the current reporting period. You will submit the annual report once a year until you expend all BIP grant funds. The Annual Report is due 30 calendar days after the closing period.

*Click on the links below to view the report forms.*

[Baseline Report](#)

[Performance \(Technical\) Report](#)

[Annual Report](#)



|   |  |   |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
|---|--|---|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|--|----------------------|----------------------|----------------------|----------------------|---|
| 3   | 3a. Unserved Households  | 1. Number of Households passed/serviceable                              |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
|   |  | 2. Households with new access   |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
|   |  | 3. Households with improved access                                      |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
|   |  | Total number of Households served                                       | 0                    | 0                    | 0                    | 0                    | 0                    | 0                    | 0                    | 0  | 0                    | 0                    | 0                    | 0                    | 0 |
|   |  | 4. Number of Households served with speeds of at least 25/3             |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
|   | 5. Number of Households served with speeds of at least 100/20  |   |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
|   | Using the Excel spreadsheet template titled "BIP Reports Addendum A", please provide an updated count of Households within each of the eligible census block groups along with their Location ID that you plan to connect to your network in column titled '# of Units'. The locations should match and conform to the Federal Communications Commission (FCC) Broadband Serviceable Location Fabric, which is a unique identifier the geographic coordinates, and where available, the address(es) associated with each location. Please be sure to select 'Baseline Report' checkbox when completing the addendum. |   |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
|   | 3b. Businesses   | 1. Number of Businesses passed/serviceable                              |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
|   |  | 2. Businesses with new access   |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
|   |  | 3. Businesses with improved access                                      |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
| Total number of Businesses served   |  | 0   | 0                    | 0                    | 0                    | 0                    | 0                    | 0                    | 0                    | 0  | 0                    | 0                    | 0                    | 0                    |   |
| 4. Number of Businesses served with speeds of at least 25/3   |  |   |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
| 5. Number of Businesses served with speeds of at least 100/20   |  |   |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
| Using the Excel spreadsheet template titled "BIP Reports Addendum B", please provide an updated count of Businesses within each of the eligible census block groups along with their Location ID that you plan to connect to your network in column titled '# of Units'. The locations should match and conform to the Federal Communications Commission (FCC) Broadband Serviceable Location Fabric, which is a unique identifier the geographic coordinates, and where available, the address(es) associated with each location. Please be sure to select 'Baseline Report' checkbox when completing the addendum.                  |  |   |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
| 3c. Community Anchor Institutions (CAIs)  | 1. Number of CAIs passed/serviceable   |   |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
|   | 2. CAIs with new access  |   |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
|   | 3. CAIs with improved access   |   |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
|   | Total number of CAIs served  | 0   | 0                    | 0                    | 0                    | 0                    | 0                    | 0                    | 0                    | 0  | 0                    | 0                    | 0                    | 0                    |   |
|   | 4. Number of CAIs served with speeds of at least 25/3  |   |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
| 5. Number of CAIs served with speeds of at least 100/20   |  |   |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
| Using the Excel spreadsheet template titled "BIP Reports Addendum C", please provide an updated count of Community Anchor Institutions (CAIs) within each of the census block groups along with their Location ID that you plan to connect to your network in column titled '# of Units'. The locations should match and conform to the Federal Communications Commission (FCC) Broadband Serviceable Location Fabric, which is a unique identifier the geographic coordinates, and where available, the address(es) associated with each location. Please be sure to select 'Baseline Report' checkbox when completing the addendum. |  |   |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
| 3d. Broadband Wholesalers or Last-Mile Providers  | 1. Number of Broadband wholesalers or last-mile providers passed/ser   |   |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
|   | 2. Broadband wholesalers or last-mile providers with new access  |   |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
|   | 3. Broadband wholesalers or last-mile providers with improved access   |   |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
|   | Total number of Broadband wholesalers or last-mile providers served  | 0   | 0                    | 0                    | 0                    | 0                    | 0                    | 0                    | 0                    | 0  | 0                    | 0                    | 0                    | 0                    |   |
|   | 4. Number of Broadband wholesalers or last-mile providers served with speeds of at least 25/3  |   |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
| 5. Number of Broadband wholesalers or last-mile providers served with speeds of at least 100/20   |  |   |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
| <b>OTHER INDICATORS</b>   |  |   |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
| 4   | Please use the following table to provide the total for each workforce indicator. List the projected total for each period. The projected totals should be cumulative from the award inception. Please write "N/A" if your project does not include this indicator.  |   |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
|   | Workforce Indicator  |   | Year 1               |                      | Year 2               |                      | Year 3               |                      | Year N               |  |                      |                      |                      |                      |   |
|   | Outcome  | Questions   | Period 1 - Projected | Period 2 - Projected | Period 1 - Projected | Period 2 - Projected | Period 1 - Projected | Period 2 - Projected | Period 1 - Projected | Period 2 - Projected                         | Period 1 - Projected | Period 2 - Projected | Period 1 - Projected | Period 2 - Projected |   |
|   | 4a. New positions available and funded through BIP grant   | 1. Number of new positions created<br>2. Number of new positions filled |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
| <b>CERTIFICATION</b>  |  |   |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
| CERTIFICATION   | I certify to the best of knowledge and belief that this report is correct and complete for performance of activities for the purposes set forth in the award documents.  |   |                      |                      |                      |                      |                      |                      |                      |  |                      |                      |                      |                      |   |
|   | Typed or printed name and title of Authorized Certifying Official:   |   |                      |                      |                      |                      |                      |                      |                      | Telephone (area code, number and extension): |                      |                      |                      |                      |   |
|   | Signature of Certifying Official:  |   |                      |                      |                      |                      |                      |                      |                      | Email Address:                               |                      |                      |                      |                      |   |
|   |  |   |                      |                      |                      |                      |                      |                      |                      | Date:  |                      |                      |                      |                      |   |

**BROADBAND INFRASTRUCTURE PROGRAM PERFORMANCE (TECHNICAL) REPORT**

**GENERAL INFORMATION**

|                |  |  |  |                              |
|----------------|--|--|--|------------------------------|
| <b>GENERAL</b> | Recipient Organization                     |  | Award Identification Number              |                              |
|                | Recipient Street Address                   |  | Report Date (MM/DD/YYYY)                 |                              |
|                | City, State, Zip Code                      |  | Final Report                             | Yes <input type="checkbox"/> |
|                | DUNS/UEI Number                            |  |  | No <input type="checkbox"/>  |
|                | Performance Period Start Date (MM/DD/YYYY) |  | Performance Period End Date (MM/DD/YYYY) |                              |
|                | Report Period Start Date (MM/DD/YYYY)      |  | Report Period End Date (MM/DD/YYYY)      |                              |

**INFRASTRUCTURE MILESTONE CATEGORIES**

Please provide the percent complete for the following key milestones of your project. Write "0" in the Percent Complete column and "N/A" in the Narrative column if your project does not include this activity. If you provided additional milestones in your baseline plan, please include them at the bottom of the table and specify. Unless otherwise indicated in the instructions, figures should be reported cumulatively from award inception to the end of the most recent reporting period. Please provide a narrative description if the percent complete is 5% more or less from the target provided in your baseline plan. (300 words or less)

|    | MILESTONES   | Percent Complete | Narrative (Describe reasons for variances of 5% or more from the baseline plan) |
|----|--|------------------|---|
| 1a | 1. Overall Project   |                  |   |
|    | 2. Environmental Assessment  |                  |   |
|    | 3. Network Design  |                  |   |
|    | 4. Rights Of Way   |                  |   |
|    | 5. Construction Permits And Other Approvals  |                  |   |
|    | 6. Site Preparation  |                  |   |
|    | 7. Equipment Procurement   |                  |   |
|    | 8. Network Build (all components - owned, leased, Indefeasible Rights of Use, etc.)  |                  |   |
|    | 9. Equipment Deployment  |                  |   |
|    | 10. Network Testing  |                  |   |
|    | 11. Other (please specify):  |                  |   |
| 1b | Please describe significant project accomplishments during this reporting period funded through BIP grant. (600 words or less)                 |                  |   |
| 1c | Please describe any challenges to achieving project accomplishments during this reporting period funded through BIP grant. (600 words or less) |                  |   |

**NETWORK BUILD PROGRESS**

Please report the following information regarding network build progress. Write "0" in the Total column and "N/A" in the Narrative column if your project does not include this activity. Please select the appropriate drop-down option to indicate if the network build progress item is either middle-mile, last-mile, both, or not applicable. Unless otherwise indicated in the instructions, figures should be reported cumulatively from award inception to the end of the most recent reporting semi-annual period. Please provide a narrative description if the total is 5% more or less from the target provided in your baseline plan. (300 words or less)

|   | NETWORK BUILD PROGRESS   | Middle Mile or Last Mile | Total | Narrative (Describe reasons for variances of 5% or more from the baseline plan) |
|---|--|--------------------------|-------|---|
| 2 | 2a. Number of new fiber miles (aerial or underground)  |                          |       |   |
|   | 2b. Number of fiber miles leased   |                          |       |   |
|   | 2c. Number of existing fiber miles upgraded  |                          |       |   |
|   | 2d. Number of new wireless links   |                          |       |   |
|   | 2e. Number of new towers   |                          |       |   |
|   | 2f. Number of new interconnection points   |                          |       |   |
|   | 2g. Number of signed agreements with broadband wholesalers or last-mile providers (include names of broadband wholesalers or last-mile providers in the narrative column)            |                          |       |   |
|   | 2h. Number of potential agreements (i.e., agreements currently being negotiated) with broadband wholesalers or last-mile providers (This number should NOT be reported cumulatively) |                          |       |   |
|   | 2i. Number of wireless licenses obtained   |                          |       |   |
|   | 2j. Other (please specify):  |                          |       |   |

**BROADBAND ACCESS KEY INDICATORS**

Please use the following table to provide anticipated key indicators with the cumulative totals for each beneficiary category and access type for your infrastructure service or project. Information should be reported cumulatively from award inception through the end of the semi-annual period. Please write "N/A" if your project does not include this indicator. Please provide a narrative description if the total is 5% more or less from the target provided in your baseline plan. (300 words or less)

|   | PROJECTED NUMBER OF SUBSCRIBERS AND SPEED | Total   | Narrative (Describe reasons for variances of 5% or more from the baseline plan) |
|---|---|---|---|
| 3 | 3a. Unserved Households                   | 1. Number of Households passed/serviceable                    |   |
|   |   | 2. Households with new access                                 |   |
|   |   | 3. Households with improved access                            |   |
|   |   | Total number of Households served                             |   |
|   |   | 4. Number of Households served with speeds of at least 25/3   |   |
|   |   | 5. Number of Households served with speeds of at least 100/20 |   |
|   | 3b. Businesses                            | 1. Number of Businesses passed/serviceable                    |   |
|   |   | 2. Businesses with new access                                 |   |
|   |   | 3. Businesses with improved access                            |   |
|   |   | Total number of Businesses served                             |   |
|   |   | 4. Number of Businesses served with speeds of at least 25/3   |   |
|   |   | 5. Number of Businesses served with speeds of at least 100/20 |   |
|   |   | 1. Number of CAIs passed/serviceable                          |   |

|  |   |  |  |
|--|---|--|--|
| 3c. Community Anchor Institutions (CAIs)         | 2. CAIs with new access   |  |  |
|  | 3. CAIs with improved access  |  |  |
|  | Total number of CAIs served   |  |  |
|  | 4. Number of CAIs served with speeds of at least 25/3   |  |  |
|  | 5. Number of CAIs served with speeds of at least 100/20   |  |  |
| 3d. Broadband Wholesalers or Last Mile Providers | 1. Number of Broadband wholesalers or last-mile providers passed/services                       |  |  |
|  | 2. Broadband wholesalers or last-mile providers with new access                                 |  |  |
|  | 3. Broadband wholesalers or last-mile providers with improved access                            |  |  |
|  | Total number of Broadband wholesalers or last-mile providers served                             |  |  |
|  | 4. Number of Broadband wholesalers or last-mile providers served with speeds of at least 25/3   |  |  |
|  | 5. Number of Broadband wholesalers or last-mile providers served with speeds of at least 100/20 |  |  |

**INFRASTRUCTURE BUDGET EXECUTION DETAILS**

Please provide details below on your total budget and total fund expended to date for each budget element, including detailed disbursements of both matching funds approved and federal funds obligated from project inception through end of this reporting period. Figures should be reported cumulatively from award inception to the end of the applicable reporting period.

| Projected Budget Element                              | Federal Funds | Non Federal Funds | Total Budget (Federal plus Non Federal) | Federal Funds Expended to Date | Non Federal Funds Expended to Date | Total Funds Expended |
|---|---------------|-------------------|---|--------------------------------|------------------------------------|----------------------|
| 4a. Administrative and legal expenses                 | \$ -          | \$ -              | \$ -                                    | \$ -                           | \$ -                               | \$ -                 |
| 4b. Land, structures, rights-of-way, appraisals, etc. | \$ -          | \$ -              | \$ -                                    | \$ -                           | \$ -                               | \$ -                 |
| 4c. Relocation expenses and payments                  | \$ -          | \$ -              | \$ -                                    | \$ -                           | \$ -                               | \$ -                 |
| 4d. Architectural and engineering fees                | \$ -          | \$ -              | \$ -                                    | \$ -                           | \$ -                               | \$ -                 |
| 4e. Other architectural and engineering fees          | \$ -          | \$ -              | \$ -                                    | \$ -                           | \$ -                               | \$ -                 |
| 4f. Project inspection fees                           | \$ -          | \$ -              | \$ -                                    | \$ -                           | \$ -                               | \$ -                 |
| 4g. Site work   | \$ -          | \$ -              | \$ -                                    | \$ -                           | \$ -                               | \$ -                 |
| 4h. Demolition and removal                            | \$ -          | \$ -              | \$ -                                    | \$ -                           | \$ -                               | \$ -                 |
| 4i. Construction                                      | \$ -          | \$ -              | \$ -                                    | \$ -                           | \$ -                               | \$ -                 |
| 4j. Equipment   | \$ -          | \$ -              | \$ -                                    | \$ -                           | \$ -                               | \$ -                 |
| 4k. Miscellaneous                                     | \$ -          | \$ -              | \$ -                                    | \$ -                           | \$ -                               | \$ -                 |
| 4l. Subtotal  | \$ -          | \$ -              | \$ -                                    | \$ -                           | \$ -                               | \$ -                 |
| 4m. Contingencies                                     | \$ -          | \$ -              | \$ -                                    | \$ -                           | \$ -                               | \$ -                 |
| 4n. Totals  | \$ -          | \$ -              | \$ -                                    | \$ -                           | \$ -                               | \$ -                 |

**OTHER INDICATORS**

Please use the following table to provide the total for each question. List the projected total for the number of new position created and or filled this reporting period. Information should be reported cumulatively from award inception through the end of the semi-annual period. Please write "N/A" if your project does not include this indicator.

| Outcome  | Workforce Indicator                |  | Total | Narrative (Describe reasons for variances of 5% or more from the baseline plan) |
|--|------------------------------------|--|-------|---|
|  | Questions                          |  |       |   |
| 5a. New positions available and funded through BIP grant | 1. Number of new positions created |  |       |   |
|  | 2. Number of new positions filled  |  |       |   |

Please use the following table to provide the maximum upload and download speed for each question. Information should be reported as of the report date. Please write "N/A" if your project does not include this indicator.

| Outcome   | Broadband Speed  |  | Upload | Download |
|---|--|--|--------|----------|
|   | Questions  |  |        |          |
| 6a. Maximum available speed upon project completion | 1. What is the maximum available speeds for HH in your eligible area         |  |        |          |
|   | 2. What is the maximum available speeds for Businesses in your eligible area |  |        |          |
|   | 3. What is the maximum available speeds for CAIs in your eligible area       |  |        |          |

**CERTIFICATION**

|   |  |  |  |
|---|--|--|--|
| I certify to the best of knowledge and belief that this report is correct and complete for performance of activities for the purposes set forth in the award documents. |  |  |  |
| CERTIFICATION   | Typed or printed name and title of Authorized Certifying Official: |  | Telephone (area code, number and extension): |
|   | Signature of Certifying Official:                                  |  | Email Address:                               |
|   |  |  | Date:  |

**BROADBAND INFRASTRUCTURE PROGRAM ANNUAL REPORT**

| GENERAL INFORMATION |  |  |  |
|---------------------|--|--|--|
| GENERAL             | Recipient Organization   |  | Award Identification Number                  |
|                     | Recipient Street Address   |  | Report Date (MM/DD/YYYY)                     |
|                     | City, State, Zip Code  |  | DUNS/UEI Number                              |
|                     | Performance Period Start Date (MM/DD/YYYY)   |  | Performance Period End Date (MM/DD/YYYY)     |
|                     | Report Period Start Date (MM/DD/YYYY)  |  | Report Period End Date (MM/DD/YYYY)          |
| 1                   | Please describe significant project accomplishments during this period. (600 words or less)  |  |  |
| 2                   | Please describe each service provided with BIP grant funds. (600 words or less)  |  |  |
| 3a                  | Provide the number of locations or geographic areas at which broadband service was provided using the grant funds. (Please attach associated shapefiles of geographic areas) (600 words or less)   |  |  |
| 3b                  | Using the Excel spreadsheet template titled "BIP Reports Addendum A", please provide an updated count of Households within each of the eligible census block groups along with their Location ID that you connected to your network in column titled '# of Units'. The locations should match and conform to the Federal Communications Commission (FCC) Broadband Serviceable Location Fabric, which is a unique identifier the geographic coordinates, and where available, the address(es) associated with each location. Please be sure to select 'Annual Report' checkbox when completing the addendum.                           |  |  |
| 3c                  | Using the Excel spreadsheet template titled "BIP Reports Addendum B", please provide an updated count of Businesses within each of the eligible census block groups along with their Location ID that you connected your network in column titled '# of Units'. The locations should match and conform to the Federal Communications Commission (FCC) Broadband Serviceable Location Fabric, which is a unique identifier the geographic coordinates, and where available, the address(es) associated with each location. Please be sure to select 'Annual Report' checkbox when completing the addendum.                              |  |  |
| 3d                  | Using the Excel spreadsheet template titled "BIP Reports Addendum C", please provide an updated count of Community Anchor Institutions (CAIs) within each of the eligible census block groups along with their Location ID that you connected to your network in column titled '# of Units'. The locations should match and conform to the Federal Communications Commission (FCC) Broadband Serviceable Location Fabric, which is a unique identifier the geographic coordinates, and where available, the address(es) associated with each location. Please be sure to select 'Annual Report' checkbox when completing the addendum. |  |  |
| 4                   | If applicable, please list each subrecipient that received a subgrant from the covered partnership and a description of the specific project for which the grant funds were provided. (600 words or less)  |  |  |
| CERTIFICATION       | I certify to the best of knowledge and belief that this report is correct and complete for performance of activities for the purposes set forth in the award documents.  |  |  |
|                     | Typed or printed name and title of Authorized Certifying Official:   |  | Telephone (area code, number and extension): |
|                     | Signature of Certifying Official:  |  | Email Address:                               |
|                     |  |  | Date:  |



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| <b>CERTIFICATION</b> | I certify to the best of knowledge and belief that this report is correct and complete for performance of activities for the purposes set forth in the award documents. |  |  |
|                      | Typed or printed name and title of Authorized Certifying Official:  |  | Telephone (area code, number and extension): |
|                      | Signature of Certifying Official:   |  | Email Address:                               |
|                      |   |  | Date:  |





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|                      |   |  | Date:  |



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|                      | Signature of Certifying Official:   |  | Email Address:                               |  |
|                      |   |  | Date:  |  |