



**Department of  
Management**

## **Division of Information Technology**

**Empower Rural Iowa Broadband Grants Program**

**Broadband, Equity, Access, and Deployment (“BEAD”)**

**IOWA GRANTS REGISTRATION AND APPLICATION INSTRUCTIONS  
 (“NOFA”) #009**

**(Exhibit J)**

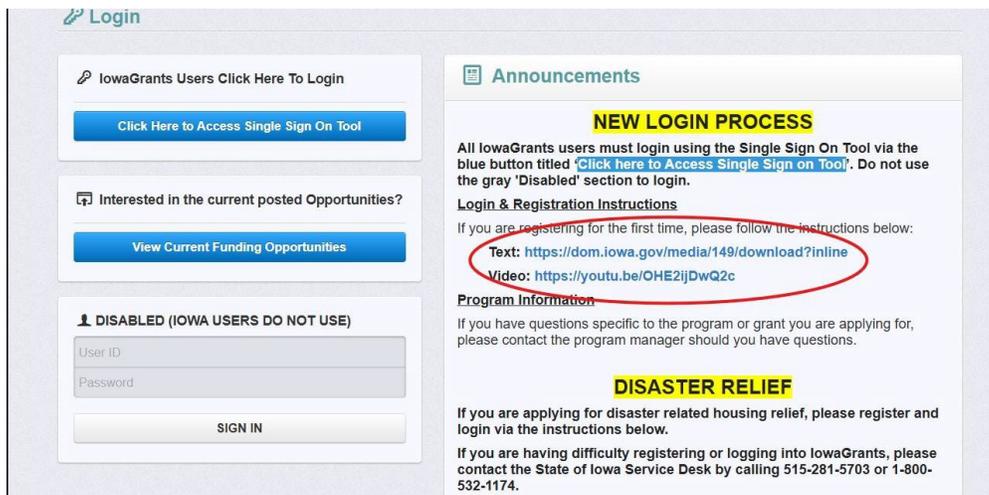
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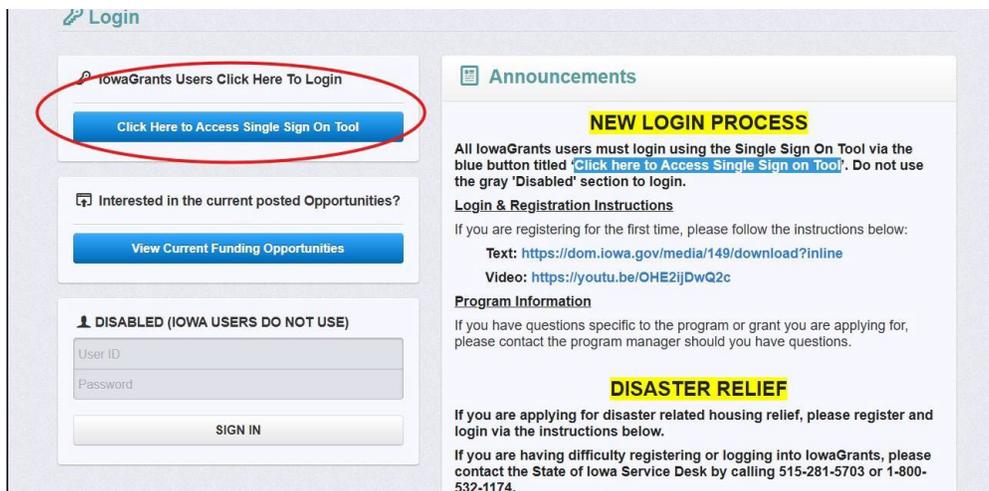
The following instructions are designed to provide applicants with step-by-step guidance concerning registration and the submission of applications to the Iowa Grants System. All applications must be submitted through the Iowa Grants System to be considered timely and valid as part of the broadband grants review process. Questions concerning the submission of applications may be submitted to [broadband@dom.iowa.gov](mailto:broadband@dom.iowa.gov).

## Account Creation – Iowa Grants System

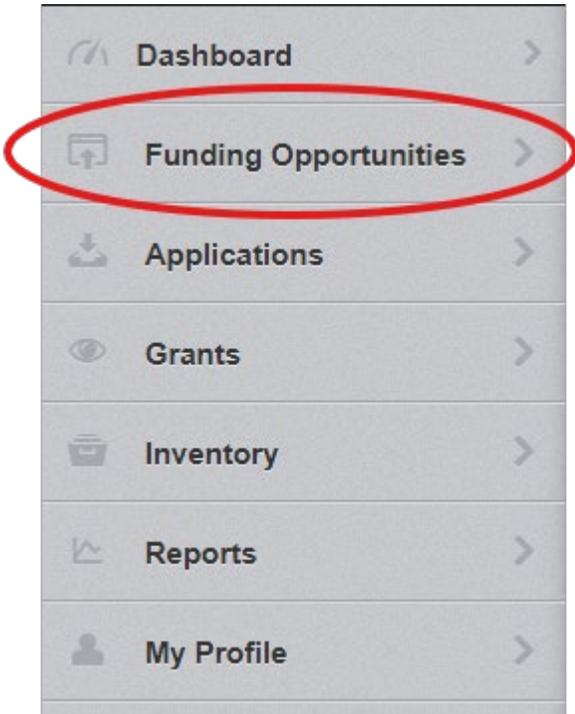
- 1) Go to <http://www.iowagrants.gov/>.
  - a) If you do not already have an account, click the link to the Login Instructions and follow them to create a new account. Note that this process is not inherently intuitive, so be sure to follow the instructions exactly. If you already have an account, continue to Step 2.



- 2) Log in by clicking the “Access Single Sign On Tool” button and enter the username and password you created.



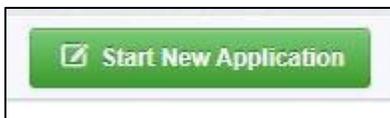
3) Click on “Funding Opportunities.”



4) Click “Empower Rural Iowa – Broadband, Equity, Access, and Deployment (BEAD)-NOFA #009.” (Note, this will be in Green and not in red test mode at the time of application)

ID	Status	Title
255758	Closed	Broadband Grant Program - Connect Every Iowan
324138	Closed	Broadband Grant Program - Empower Rural Iowa - NOFA#002
365549	Closed	Empower Rural Iowa Emergency Broadband Expansion Program (NOFA #003)
380273	Closed	Broadband Grant Program - Empower Rural Iowa - NOFA #004
390478	Closed	Empower Rural Iowa Emergency Broadband Expansion Program (NOFA# 005)
409811	Closed	Broadband Grant Program - Empower Rural Iowa - NOFA #006
427424	Closed	Empower Rural Iowa, Coronavirus State and Local Fiscal Recovery Funds (CSLFRF)-NOFA #007
512252	Closed	Empower Rural Iowa - Capital Projects Fund NOFA #008
495794	Test	Empower Rural Iowa - Broadband, Equity, Access, and Deployment (BEAD)-NOFA #009
498157	Closed	Invitation to Quality (ITQ) Broadband Intervention Zones

5) A description of the grant program will appear. Click “Start a New Application” in the top-right of the screen.



### Application - General Information

- 6) **Application Title/Primary Contact**
  - a) **Enter your Application Title**
  - b) **Select the Primary Contact**
  - c) **Click “Save Form Information” to proceed to the next step.**

**Application - General Information** Save Form Information

The Primary Contact is the individual in your organization who will be designated as the primary person responsible for this application from your organization. This individual will receive automated email notifications when your attention is needed on this application.  
Select the organization, if you belong to more than one, for which you will be submitting this application.

Application Title\*:

Primary Contact\*:

Organization\*:

Additional Contacts\*:

- 7) **Organization**
  - a) **Select the Organization with whom the grant will be associated and click “Save Form Information” to proceed to the next step.**
  - i) **The Organization selected here will be the Organization required to submit requests for reimbursement as part of the Grant Reimbursement Request Process.**

Program Area\*: Broadband Grant Program - Empower Rural Iowa

Funding Opportunity\*: 495794-Empower Rural Iowa - Broadband, Equity, Access, and Deployment (BEAD)-NOFA #009

Application Stage\*: Final Application

Application Status\*: Editing

Application Title\*:

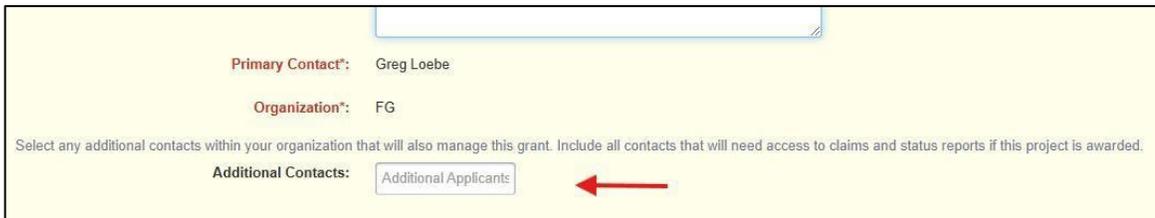
Primary Contact\*: Greg Loebe

Organization\*:  ←

Additional Contacts\*:

**8) Additional Applicants**

- a) Enter any Additional Applicants and click “Save Form Information” to proceed to the next step.
- i) **Note: Additional applicants must be set up for your organization in the IA Grants system before they can be added here.**



The screenshot shows a form with the following fields:

- Primary Contact\*:** Greg Loebe
- Organization\*:** FG

Below these fields is a text instruction: "Select any additional contacts within your organization that will also manage this grant. Include all contacts that will need access to claims and status reports if this project is awarded."

At the bottom, there is a label **Additional Contacts:** followed by a button labeled "Additional Applicants". A red arrow points to this button.

**NOTE: If you are submitting a Grant Application on behalf of a subsidiary or client and that applicant organization’s name does not appear in the list of Organizations on this screen, contact [broadband@dom.iowa.gov](mailto:broadband@dom.iowa.gov) and a staff member will provide additional assistance.**

**Multiple Users, Single Application:** Iowa Grants will permit multiple users within the Applicant’s organization to register and work on an Application. The first user to initiate an Application is designated by the system as the “primary user” for that Application. To permit additional users to work on an Application, the primary user must complete the first form, titled the General Information form. This General Information form is where the Applicant titles their Application and identifies the organization submitting the Application. After clicking “Save” for the first time, the primary user may reopen and edit this General Information form to add other users registered within Iowa Grants and associated with their organization. To do so, the user should use the “Additional Contacts” function. Each individual within the Applicant’s organization who requires access to the Application must first be separately registered in Iowa Grants. If multiple users are editing the same form within an Application at the same time, the last saved version will override any changes made by other users. Iowa Grants will permit multiple registered users to create separate Applications for the same opportunity, thereby creating multiple Applications for the same opportunity. Applicants are solely responsible for ensuring only one fully completed Application is submitted for each Project in response to this NOFA.

**9) A list of application forms will now appear.**

- a) Applicants must complete each form provided in the list under Application Details.
- i) **Details about each of these Application Forms are available in Section 2.2 of Exhibit A - Notice of Funding Availability (NOFA).**

### Cover Sheet – General Information

10) To continue, click on “Cover Sheet - General Information,” to proceed to the next form.

Component
General Information
Cover Sheet-General Information
Business Organization NOFA #009
Executive Project Summary NOFA #009
Demonstrated Experience NOFA #009
Minority Impact Statement
Central Forms NOFA #009
Supplemental Data Collection
Budget NOFA #009
Product Pricing Form NOFA #009

11) Enter the Authorized Official information requested on the Form.

- a) The Authorized Official is the person who is authorized to respond to inquiries and make binding decisions on behalf of an Applicant regarding an Application or Grant Agreement.
- i) This can be the individual who created the Iowa Grants account or another person.

Cover Sheet-General Information Save Form

Authorized Official

Name\*:

Title\*:

Organization\*:

If you are an individual, please provide your First and Last Name.

Address\*:

City/State/Zip\*:  Iowa

City State Zip

Telephone Number\*:

E-Mail\*:

- 12) You must also provide the name of a Fiscal Officer for your firm.
  - a) The Fiscal Officer is the individual who is responsible for submitting grant claims in the system on behalf of your firm. You will also be required to list the name, title, organization, address, telephone number, and email address for the Fiscal Officer as shown below.
  - i) This can be the same person as the Authorized Official or someone different.

**Fiscal Officer/Agent**  
Please enter the "Fiscal Officer" for your Organization.  
If you are an individual, please provide your First and Last Name.

Name\*

Title

Organization

Address

City/State/Zip  Iowa

City State Zip

Telephone Number

E-Mail

- 13) You must indicate all counties, federal congressional districts, Iowa Senate districts, and Iowa House districts affected by your project. Click the District Map Links provided for assistance locating the affected districts. Click "Save Form" to proceed.

County(ies) Participating, Involved, or Affected by this Proposal\*:  
Statewide  
Adair County  
Adams County  
Allamakee County  
Appanoose County

To find your district, click on the "Congressional Map" link. On the left hand side of the page, click on the link for your Congressional District, Iowa Senate District and Iowa House District.

Congressional District(s) Involved or Affected by this Proposal\*:  
Statewide  
1st - Rep. Mariannette Miller-Meeks  
2nd - Rep Ashley Hinson  
3rd - Rep Zach Nunn  
4th - Rep Randy Feenstra  
[Congressional Map](#)

Iowa Senate District(s) Involved or Affected by this Proposal\*:  
Statewide  
1  
2  
3  
4  
[Iowa Senate Map](#)

Iowa House District(s) Involved or Affected by this Proposal\*:  
Statewide  
1  
2  
3  
4  
[Iowa House Map](#)

- 14) A screen showing your Cover Sheet – General Information now appears. Click “Mark as Complete” or “Edit” to make changes.



### Business Organization NOFA #009

- 15) Next, click on “Business Organization - NOFA #009” to proceed.

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- 16) Enter your organization’s Business Legal Name (and DBA, as applicable).
  - a) Enter the Physical and Mailing address for your organization.

**Business Organization - NOFA #008** Save Form

This section requires an Applicant to provide the following general background information.  
Please list the business legal name as it is used by federal and state taxing agencies, banks, and for other legal purposes.

**Business Legal Name\*:**

**Doing Business As:**

Are you a local government, non-profit, and/or cooperative?:  Yes  No

**Physical Address**

**Street\*:**

**City\*:**

**State\*:**

United States ZIP code (five digits) concatenated with the additional +4 digits where the vendor is physically located (e.g., 50312-5307)

**Zip\*:**

**Mailing Address (used for warrants and/or payments)**

**Street or PO Box\*:**

**City\*:**

**State\*:**

United States ZIP code (five digits) concatenated with the additional +4 digits where the vendor is physically located (e.g., 50312-5307)

**Zip Code\*:**

Save Form

- b) Answer the questions regarding your business organization.
    - c) Click “Save Form”

Is the applicant a Communications Service Provider as defined by Iowa Code chapter 8B, including but not limited to private sector carriers, utilities, tribal entities, local governments, and other entities that provides or will provide telecommunications services?  
**Service Provider\*:**  Yes  No

Is your organization minority-owned? (Initial Proposal, Vol 2 2.9)  
**Minority-Owned\*:**  Yes  No

Is your organization women-owned? (Initial Proposal, Vol 2 2.9)  
**Women-Owned\*:**  Yes  No

Is your business a labor surplus firm? (Initial Proposal, Vol 2 2.9)  
**Labor Surplus Firm\*:**  Yes  No

Is the applicant the entity that will (1) own the network constructed with grant funds awarded under this program?  
**Network Ownership\*:**  Yes  No

**17) Organization Type**

- a) Select the type of organization from the drop-down list.
- b) Complete the Interested Parties Form, linked below the field, and upload as a PDF.

**Organization Type**

Select your business type.

**Business Type\*:**

Upload the interested parties form that includes the real party or parties in interest in the applicant or application, including a complete disclosure of the identity and relationship of those persons (NOFA 2.2.2.1.1.1.)

**Interested Parties\*:**

[Interested Parties Form](#)

**18) Holdings Information**

- a) Review each of the following and indicate Yes/No as applicable. When indicating Yes, you will be asked to complete the respective form to disclose the holding interests.
- b) Stockholders, Limited Partnership, General Partnership, Limited Liability Company, Indirect Ownership, and FCC Regulation.
- c) Name files as: “Application Number – Date (yyyymmdd) – [Form Name]”

**19) Subsidiary**

- a) Indicate whether your business structure includes any parent or subsidiary organizations.
- b) If yes, upload an organizational chart to show this structure as a PDF.
- c) Name file as: “Application Number – Date (yyyymmdd) – Org Chart”

**Subsidiary**

Does your business organization structure include any parent or subsidiary organizations?

**Subsidiary\*:**

Upload any necessary organizational charts detailing all parent, subsidiaries, and affiliates. (NOFA 2.2.2.1.1.8.)

**Subsidiary\*:**

- 20) Resumes - Upload resumes for all key management personnel as a single PDF document.
  - a) Name file as: "Application Number – Date (yyyymmdd) – Resumes"

**Resumes**

Upload resumes for all key management personnel as a single PDF document. (NOFA 2.2.2.1.1.8.)

**Resumes of Key Personnel\*:**

- 21) Federal Identifiers
  - a) Upload a PDF of your organization's SAM registration.
  - b) Enter your Unique Entity Identifier (formerly DUNS number)
  - c) Enter your Taxpayer Identification Number
  - d) Enter your FCC FRN number.
  - e) Enter your FCC-assigned Provider ID (A list of FCC Provider ID's can be found using the link below this field or at SAM.gov).
  - f) Click "Save Form" to continue.

**Federal Identifiers**

All eligible applicants are required to have an active registration with the System for Award Management (SAM) (<https://www.sam.gov>). Please upload a PDF of your organization's status.

**SAM.gov\*:**

A Unique Entity Identifier (UEI) is a unique 12-digit number used to identify your organization (this has replaced the DUNS number). The federal government uses the UEI to track how federal money is allocated. Please see <https://www.sam.gov>

**Unique Entity Identifier\*:**

Enter your organization's Federal Tax Identification Number.

**Taxpayer Identification Number (TIN)\*:**

Enter your organization's FCC FRN number.

**FCC\_FRN\*:**

Enter your organization's FCC-assigned Provider ID. Follow the link below to a list of these ID's by provider. The ID is listed in the column labeled "HOCONUM" or Holding Company Number.

**FCC-assigned Provider ID\*:**

[FCC-Assigned Provider ID Table](#)

**22) Review the information for accuracy and click “Mark as Complete” to proceed.**

**Business Organization - NOFA #009** →

This section requires an Applicant to provide the following general background information:

Please list the business legal name as it is used by federal and state taxing agencies, banks, and for other legal purposes.

**Business Legal Name\*:** Greg Test  
**Doing Business As:**

**Physical Address**

**Street\*:** 123 1st St  
**City\*:** Cedar Rapids  
**State\*:** Iowa

United States ZIP Code (five digits) concatenated with the additional --4 digits where the vendor is physically located (e.g., 50312-5307)  
**ZIP Code\*:** 52402

**Mailing Address (used for warrants and/or payments)**

**Street or PO Box\*:** 123 1st st  
**City\*:** Cedar Rapids

**Executive Project Summary NOFA #009**

**23) Click on “Executive Project Summary NOFA #009”.**

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<b>Executive Project Summary NOFA #009</b> ←
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## Demonstrated Experience NOFA #009

25) Next, click on “Demonstrated Experience NOFA #009” to proceed.

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Product Pricing Form NOFA #009

### 26) Eligibility and Demonstrated Experience

- a) This section will require you to answer a few questions and upload respective forms, depending on the answers provided. Each form is an Excel file linked below the file upload. These forms can also be found on the BEAD website: <https://dom.iowa.gov/broadband/broadband-grants/notice-funding-availability-009>
- b) Name files as: “Application Number – Date (yyyymmdd) – [Form Name]”

#### Eligibility and Demonstrated Experience

Do you certify that your organization has provided a voice, broadband, and/or electric transmission or distribution service for at least the two (2) con (NOFA 2.2.4.1.1)

**Operational Capability\*:**

Has the applicant provided voice and/or broadband service? (NOFA 2.2.4.1.2)

**Voice or Broadband?\***

Does the applicant or its affiliates currently have any broadband deployment projects underway or have committed to undertake at the time of this a

**Grant Projects\*:**

Has the applicant or its affiliates submitted or plan to submit any applications for public funding of broadband deployment? (NOFA 2.2.4.3)

**Other Applications\*:**

Applicant must upload the Demonstrated Experience Form, providing a narrative describing its readiness to manage a broadband services network, experience undertaking projects of similar size and scope, recent and upcoming organizational changes including mergers and acquisitions, and rel

**Demonstrated Experience\*:**

Demonstrated Experience Form 

27) Review the information for accuracy and click “Mark as Complete” when ready to proceed.



### Minority Impact Statement

28) Next, click on the Minority Impact Statement.

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29) Enter responses to the Minority Impact Statement questions. Click “Save Form.”

**Minority Impact Statement** Save Form

Does the proposed grant program or policy have a disproportionate or unique positive impact on minority persons?  Yes  No

Could the proposed grant program or policy have a disproportionate or unique negative impact on minority persons?  Yes  No

I hereby certify the information above is complete and accurate to the best of my knowledge.

Title First Name Last Name

Save Form

30) Review the information for accuracy and click “Mark as Complete” when ready to proceed.



### Budget NOFA #009

31) Next, click “Budget NOFA #009”. Please reference your Core Application - Exhibit D to complete this form.

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a) Use the “Requested Grant Support” percentage and the dollar amounts from your Core Application Budget Plan (Exhibit D) to fill out the Project Budget here. For conflicting or inconsistent information between the Budget Plan in the Core Application and the Iowa Grants Project Budget Form, the information in the Core Application Budget Plan will be determinative.

**32) Click “Add Row” to add the first budget line item from Exhibit D**

The screenshot shows the 'Project Budget - Multi-List' interface. At the top right, there is a green '+ Add Row' button. A red arrow points to this button. Below the button is a table with columns: Category, Description, Cost, Award %, and Award Amount. The table is currently empty, with the text 'No Data for Table' centered below the header. At the bottom right of the table area, there is another green '+ Add Row' button.

- a) Select the budget category from the drop-down menu.
- b) If there is any additional description, enter that in the Expense Description box.
- c) Enter the \$\$ amount.
- d) Enter the requested grant support % as a decimal (i.e. – 75% = .75)
- e) Click “Save Row”

The screenshot shows the form fields for adding a budget line item. The 'Category' dropdown menu is set to 'Conduit'. The 'Expense Description' box is empty. The 'Cost' field contains '\$0' and the 'Award %' field contains '.75'. Red arrows point to each of these four fields. On the right side, there are two green 'Save Row' buttons, with the top one circled in red.

**33) Repeat step 32 for all line items in your Exhibit D**

The screenshot shows the 'Project Budget - Multi-List' interface with a table containing three rows of budget items. The table has columns: Category, Description, Cost, Award %, and Award Amount. The rows are: Conduit (\$1,000,000.00, 0.75, \$750,000.00), Switching Equipment (\$10,000.00, 0.75, \$7,500.00), and Fiber/Copper (\$1,500,000.00, 0.75, \$1,125,000.00). A total row at the bottom shows a cost of \$2,510,000.00 and an award amount of \$1,882,500.00. At the top right, there are buttons for 'Mark as Complete', '+ Add Row', and 'Edit All Rows'. At the bottom right, there is a 'Last Edited By: Greg Loebe - Jan 7, 2025 11:57 AM' and an '+ Add Row' button.

Category	Description	Cost	Award %	Award Amount
Conduit		\$1,000,000.00	0.75	\$750,000.00
Switching Equipment		\$10,000.00	0.75	\$7,500.00
Fiber/Copper		\$1,500,000.00	0.75	\$1,125,000.00
		\$2,510,000.00		\$1,882,500.00

**34) Review the information for accuracy and click “Mark As Complete” when you are ready to proceed.**

The screenshot shows two buttons: a green 'Mark as Complete' button and a blue 'Edit Form' button.

### Central Forms NOFA #009

**35) Next, click on Central Forms NOFA #009. Applicants are required to submit an upload in response to each section in the Central Forms.**

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### 36) Full Unredacted Copy of Core Application

- a) You must upload a Full Unredacted Core Application
- b) Click the “Select File” button to upload your Core Application (XLSM File).
  - i) Name file as: “Application Number – Date (yyyymmdd) – Core Application.”

**Broadband Grants Core Application - Exhibits B, C, and D** Save Form

The Broadband Grants Core Application includes an excel file containing Exhibits B, C, and D. See NOFA #008 sections 2.2.6.1 - 2.2.6.3. Please attach the Broadband Grants Core Application here. Name and upload the excel file "Application Number - Applicant Name - Core Application".

Applicant requests that the contents of their application remain confidential in whole or in part, pursuant to Section 2.2.6.6, and 7.18 of the NOFA #008.  
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 of the NOFA #008, the Office shall be relieved from any responsibility for maintaining the confidentiality of the application pursuant to 7.18.4 of the NOFA #008.  
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 #008, 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:   

Public Redacted Copy:

Wireless projects must demonstrate infrastructure deployed as a function of the project contains adequate backhaul capabilities to support stated broadband delivery speeds to the entire coverage area listed in Exhibit B. See Exhibit I - Wireless Project Design.

Are you implementing a wireless project?:  Yes  No

Save Form

**37) Public Redacted Copy of Core Application**

- a) If you are submitting a redacted version of the Core Application, you may upload the Public Redacted Copy in the designated box.
- i) The Public Redacted Copy must be in the form of an Adobe PDF file as generated using the Redact function in the Core Application Excel Workbook with redactions applied to any areas that the Applicant requests to be treated as confidential under applicable law.

**(1) Name file as: "Application Number – Date (yyyymmdd) – Redacted Core Application."**

*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; DOM will only afford confidential treatment to the extent requests comply with the terms, conditions, and requirements of the NOFA #009, and solely to the extent permitted by applicable law and DOM's corresponding fair information practices rules.*

**38) Indicate whether you are implementing a wireless or satellite project.**

- a) If so, you must complete and upload a PDF version of Exhibit I – Wireless Project Design Worksheet.
- b) Name file as: "Application Number – Date (yyyymmdd) – Exh I"

**39) You must indicate whether you have read and agree to the terms and conditions set forth in Exhibit E – Grant Agreement. If you do NOT accept the terms identified in the Grant**

**Agreement, upload an Exhibit E – Grant Agreement following these directions: If Applicant takes exception to a provision in the Grant Agreement, it must identify such exception by page and section number, state the reason for the exception, and set forth the specific language it proposes to include in place of that section or provision. This may be communicated through a redline with comments in the margins. If applicant’s exceptions or proposed responses materially alter the NOFA or the requirements of other applicable law, or if applicant submits its own terms and conditions or otherwise fails to follow the process described herein, DOM may reject the application, in its sole discretion. DOM reserves the right to either award grant funds without further negotiation with a successful applicant, or to negotiate terms and conditions with a successful applicant if the best interests of DOM, the Program, and the State would be served. Name and upload file as "Application Number - Applicant Name - Exhibit E".**

**Broadband Grants Program Grant Agreement - Exhibit E** Save Form

In accordance with Section 1.7.8 Grant Agreement Negotiation and Execution, By submitting an Application, Applicant acknowledges its acceptance of the terms, conditions, criteria, and other requirements of the NOFA and the Grant Agreement, labeled as "Exhibit E," without change, except as otherwise expressly stated in its Application and otherwise permitted herein. If you do NOT accept the terms identified in the Grant Agreement, upload an Exhibit E following these directions: If Applicant takes exception to a provision in the Grant Agreement, it must identify such exception by page and section number, state the reason for the exception, and set forth the specific language it proposes to include in place of that section or provision. This may be communicated through a redline with comments in the margins. If Applicant's exceptions or proposed responses materially alter the NOFA or the requirements of Iowa Code section 88.11 or Iowa Administrative Code rule 129--22, or if Applicant submits its own terms and conditions or otherwise fails to follow the process described herein, the Office may reject the Application, in its sole discretion. The Office reserves the right to either Award grant funds without further negotiation with a successful Applicant, or to negotiate terms and conditions with a successful Applicant if the best interests of the Office, the Program, and the State would be served. Name and upload file as "Application Number - Applicant Name - Exhibit E".

Have you read and do you accept the terms and conditions set forth in the grant agreement (Exhibit E)?:  Yes  No

Exceptions to Broadband Program Grant Agreement:  Select file

Save Form

**40) Certification, Authorization, and Release of Information – Exhibit F**

- a) You must upload a signed PDF copy of Exhibit F – Certification, Authorization, and Release of Information.**
  - i) Click the “Select File” button to upload your PDF.**
  - ii) Name file as: “Application Number – Date (yyyymmdd) – Exh F”**

**Certification, Authorization, and Release of Information - Exhibit F** Save Form

This is a form by which a representative of Applicant's with legal authority to bind Applicant certifies to the Office the completeness, accuracy, truthfulness, performance capabilities, and satisfaction of key legal requirements of or related to the Application or any subsequent performance should Applicant be Awarded grant funds and successfully execute a Grant Agreement with the Office, and which authorizes the Office, its officers, employees, agents, independent contractors, and the members of the Evaluation Committee to obtain information about Applicants from third parties, and which authorizes such third parties to supply such requested information to the Office. Please sign, name, and upload file "Application Number - Applicant Name - Exhibit F".

Please ensure Exhibit F is signed, in PDF format for upload, and titled "Application Number - Applicant Name - Exhibit F".

Exhibit F - Certification Letter (Public):  Select file

Save Form

- 41) **Request for Confidentiality or Form 22 – Exhibit G**
  - a) **All Applicants must upload a signed PDF copy of Exhibit G - Form 22 – Request for Confidentiality.**
    - i) **Complete the top section if you are NOT requesting confidential treatment or**
    - ii) **Complete the bottom section if you ARE requesting confidential treatment.**
  - b) **Click the “Select File” button to upload your PDF.**
  - c) **Name file as: “Application Number – Date (yyyymmdd) – Exh G”**

Request for Confidentiality or Form 22 - Exhibit G

Request for Confidentiality or Form 22. This is a form submitted as part of an Application where Applicant may request the confidential treatment of specifically identified information or materials submitted as part of an Application in accordance with the terms, conditions, and requirements of Iowa Administrative Code rule 129—22 and the NOFA. See Section 2.2.6.6 "Form 22", Section 7.18 (Disposition of Applications/Public Records) for specific information regarding this process and the limitations associated therewith. Please sign (electronic or hand written will be accepted, but NOT typed), name and upload file as "Application Number - Applicant Name - Exhibit G".

Please ensure Exhibit G is signed, in PDF format for upload, and titled "Application Number - Applicant Name - Exhibit G".

Exhibit G - Request for Confidentiality - Form 22 (Public)\*:

Save Form

- 42) **Project Design**
  - a) **In this section, upload the network design, network diagram, project costs, and build-out timeline and milestones for project implementation as a single PDF. Applicants may submit the documents without a Professional Engineer stamp during the application process. However, the documents must be stamped by a Professional Engineer and submitted to DOM before the conclusion of the Supplemental Data Collection Phase. (NOFA 2.2.6.9)**
  - b) **Click the “Select File” button to upload your PDF.**
  - c) **Name file as: “Application Number – Date (yyyymmdd) – Design**

Project Design

In this section, upload the network design, network diagram, project costs, and build-out timeline and milestones for p Professional Engineer stamp during the application process. However, the documents must be stamped by a Professio Supplemental Data Collection Phase. (NOFA 2.2.6.9)

Upload the Network Design, Network Diagram, Project Costs, and Build-out timeline with milestones for project implementation as a single PDF (NOFA 2.2.6.9)

Network Design\*:

Save Form

- 43) **Once all Central Forms documents have been loaded, click “Save Form.” Review submissions for accuracy and click “Mark as Complete” to proceed.**

## Product Pricing Form NOFA #009

**44) Lastly, click on Product Pricing Form NOFA #009.**

Component
General Information
Cover Sheet-General Information
Business Organization NOFA #009
Executive Project Summary NOFA #009
Demonstrated Experience NOFA #009
Minority Impact Statement
Central Forms NOFA #009
Supplemental Data Collection
Budget NOFA #009
Product Pricing Form NOFA #009 

- 45) This form requires information on the speed and pricing of your proposed project.**
- a) **If proposing an end-to-end fiber project, provide the pricing of your Gig Symmetrical package.**
  - b) **If proposing a different technology type, enter the max speeds offered and the respective pricing.**

**Low-Cost Option**

Enter the speed of your low cost service offering. Must be at least 100mb download/20mb upload. (NOFA 1.3.15)

Enter the download speed (in mb/s) of the low-cost option offered to locations within this project area. Must be at least 100mb

**Low-Cost Option Download Speed (in mb/s)\*:**

Enter the upload speed (in mb/s) of the low-cost option offered to locations within this project area. Must be at least 20mb.

**Low-Cost Option Upload Speed (in mb/s)\*:**

Enter the monthly price of the low cost option, inclusive of all fees.

**Monthly Price of the Low-Cost Option\*:**

- 46) Low-Cost Option**
- a) **Enter the speeds and pricing of your low-cost option.**
  - b) **Click “Save Form”**

**47) Review for accuracy and click “Mark as Complete”**



**48) Review all forms for accuracy and verify that all forms have a checkmark in the “Complete” column. You may revisit any form by clicking on the form. Click on “Submit” to submit the form.**

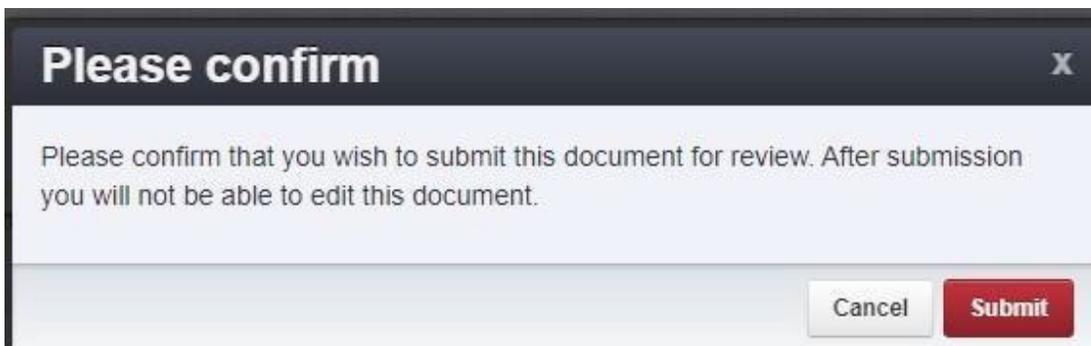
Application Details

Application is in compliance and is ready for Submission!

Component	Complete?	Last Edited
General Information	✓	Jun 12, 2023 1:58 PM - Greg Loebe
Cover Sheet-General Information	✓	Jun 12, 2023 2:21 PM - Greg Loebe
Business Organization NOFA #008	✓	Jun 12, 2023 3:46 PM - Greg Loebe
Demonstrated Experience NOFA #008	✓	Jun 12, 2023 3:55 PM - Greg Loebe
Minority Impact Statement	✓	Jun 12, 2023 4:00 PM - Greg Loebe
Executive Project Summary NOFA #008	✓	Jun 13, 2023 12:19 PM - Greg Loebe
Central Forms NOFA #008	✓	Jun 13, 2023 9:20 AM - Greg Loebe
Budget NOFA #008	✓	Jun 13, 2023 9:36 AM - Greg Loebe
Product Pricing Form NOFA #008	✓	Jun 13, 2023 12:30 PM - Greg Loebe

Buttons: Preview Application, Submit Application (highlighted with a red arrow), Withdraw

**49) The following submission confirmation screen will appear. Click “Submit” to complete the application process. You will be taken to the Applications screen where you can view the status of any current or previous applications.**



**50) You may now log out by clicking “Log Out” at the top of the screen. If you wish to submit an additional application(s), scroll up to Step 5 and follow through the process for each application.**

## Resources

**NOFA #009 Website:** <https://dom.iowa.gov/broadband/broadband-grants/notice-funding-availability-009>

- **Applicant Toolkit**
- **Broadband Grants Core Application (NOFA #009)**
- **Exhibit A – Notice of Funding Available (NOFA #009)**
- **Exhibit E – Grant Agreement (NOFA #009)**
- **Exhibit F – Certification Letter (NOFA #009)**
- **Exhibit G – Request for Confidentiality – Form 22 (NOFA #009)**
- **Exhibit I – Wireless Project Design Worksheet**
- **Exhibit K – Project Selection and Data Export/Import Instructions**

**DOM-DoIT Help Desk – [broadband@dom.iowa.gov](mailto:broadband@dom.iowa.gov)**