RECIPIENT NAME:City of Williamstown AWARD NUMBER: NT10BIX5570058

DATE: 02/03/2011

OMB CONTROL NUMBER: 0660-0037 EXPIRATION DATE: 12/31/2013

R BROADBAND	INFRASTRUCTURE PROJECTS		
cation Number	3. DUNS Number		
058	156339889		
26			
6. Is this the last	6. Is this the last Annual Report of the Award Period?		
	○ Yes ● No		
eport is correct and	complete for performance of activities for the		
7c. Telephone (ar	ea code, number and extension)		
X	x		
7d. Email Address			
chudson@wtow	nky.org		
7e. Date Report S	ubmitted (MM/DD/YYYY):		
02-03-2011			
i	cation Number 26 6. Is this the last eport is correct and 7c. Telephone (ar X 7d. Email Address chudson@wtow) 7e. Date Report S		

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OVERALL PROJECT PERFORMANCE INDICATORS

1. Please provide the following average cost figures for your project. Please review the instructions to determine how to calculate these figures. Write "0" in the second column and "N/A" in the third column if your project does not yet have this information. Depending on whether your project contains Middle Mile and/or Last Mile components, some metrics may not apply. Please provide a narrative description if the total is different from the target provided in your baseline plan (600 words or less).

Cost Indicator	Average Cost / Speed	Narrative (describe your reasons for any variance from the baseline plan or any other relevant information)
Average cost per new mile (Middle Mile)	0	N/A
Average cost per household passed (Last Mile)	0	The homes passed at this time are with inactive plant and are in the construction phase.
Average cost per subscriber (Last Mile)	0	Subscribers passed at this time are with inactive plant and are in the construction phase.
Maximum broadband speed advertised (Middle Mile)	0	N/A
Maximum broadband speed advertised (Last Mile)	10Mbps	No Variance from Baseline
Average broadband speed provided (Middle Mile)	0	N/A
Average broadband speed provided (Last Mile)	6Mbps	No Variance from Baseline

2. Please provide each facility name and type, the county where the facility is located, and census tract information for any facilities funded by your project during this annual reporting period. Report only facilities for which construction has been completed.

Facility Identifier / Name	Facility Type	County	Census Tracts
N/A	N/A	N/A	N/A

Add Facility Remove Facility

3. Please identify (1) the total number of interconnection, peering, and/or transit agreements entered into during this annual reporting period; (2) the total number of agreements of each type that you are currently negotiating; and (3) whether you have denied any request for interconnection and if so, why. If you have not entered into any agreements, please write "N/A."

Interconnection Agreements (600 words or less)

Grant Recipient has not entered into or is currently negotiating any interconnection agreements. Grant Recipient has not had any and has not denied any request for interconnection agreements.

Peering and Transit Agreements (600 words or less)

Grant Recipient has not entered into or is currently negotiating an peering or transit agreements. Grant Recipient has not had any and has not denieid any request for peering or transit agreements.

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CAPACITY, UTILIZATION, AND CAPABILITY INDICATORS

4. Community Anchor Institutions: In the chart below, please provide information on the types of community anchor institutions capable of receiving service (i.e., anchor institutions connected to your network plus those passed by your network) as a result of BTOP funds.

Type of Community Anchor Institution	Total Number Within Service Area	Type of Community Anchor Institution	Total Number Within Service Area
Schools (K-12)	0	Public Housing	0
Libraries	0	Other Institutions of Higher Education	0
Medical and Healthcare Providers	0	Other Community Support Organizations	0
Public Safety Entities	0	Other Government Facilities	0
Community Colleges	0	Total Community Anchor Institutions	

5. Please indicate the average increase in broadband speed provided to the community anchor institution customers as a result of your project, including a description of how this increase was calculated (600 words or less).

N/A, Project does not yet offer broadband, therefore no increase can be determined.

6. What retail services are being provided by this project? Please describe below. (600 words or less). As an attachment to this report, please provide pricing plans (in \$ per month) associated with each retail service. Retail services description:

Retail Services will not be determined until network is completed, tested, and running.

- 7a. What network management policies (e.g., bandwidth limitations, traffic prioritization) are in place for the services provided by your project? 7b. Have you ever limited or blocked consumers from accessing any lawful content, service, service provider, or application, or prevented any consumers from attaching any legal device to the network? If so, please explain why (300 words or less)? Grant Recipient does not have any management polices regarding bandwidth limitations or traffic prioritization at this time. Grant Recipient has never blocked consumers from accessing any lawful content, service, service provider, application, and has not prevented any consumers from attaching any legal devices to its network.
- 8. If applicable, please provide the total number and the percentage of subscribers who have dropped the broadband service provided through this project (total number of households and/or businesses and the "churn rate") and the subscribers' reasons for discontinuing their service (600 words or less).

N/A, Project has not yet been completed.

9. Please provide the following information regarding the number of fiber strand-miles:

Total Number of	Total Number of Active Fiber	Lotal Number of		Total Nun	nber of Strand-miles Be	eing Built
Strand-miles	Strand-miles Used by Recipient	Strand-miles	Dark Fiber Strand-miles	Active	Leased	Dark
942	0	0	0	156	0	786

10. If you wholesale dark fiber, please list your wholesale customers and the number of fiber miles you currently are leasing to those customers:

N/A Grant Recipient is not currently wholesaling any fiber in the project area. System is under construction.

11. Please provide the following information regarding the facility collocation capacity:

Total Facility (total square feet for all facilities)	Number of Square Feet Used by Recipient	Number of Square Feet Leased	Number of Square Feet Available
0	0	0	0

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12. If you do not own collocation space, please describe how and where network (600 words or less).	other network providers and/or customers interconnect with your
At this time no other network providers have expressed interest in conodes located throughout system.	llocation. Customers will interconnect with network at network
13. To the extent that you have made any subcontracts or sub grants, pleen made to socially and economically disadvantaged small business 15 U.S.C. 647, as modified by NTIA's adoption of an alternative small bu of these SDB entities (150 words or less). N/A, there are no subcontract or sub grants under this grant.	(SDB) concerns as defined by section 8(a) of the Small Business Act,
14. Please describe any best practices/lessons learned that can be sha	ared with other similar BTOP projects (900 words or less).
Best practice to provide as much dark fiber as financially feasible.	
It is also best practice to provide adequate start-up and initial grant a permit delays in initial engineering, design and permit acquisition.	dministration time in the baseline performance perimeters to