

U.S. DEPARTMENT OF COMMERCE

Performance Progress Report

2. Award Or Grant Number
34-50-M09066

4. Report Date (MM/DD/YYYY)
10-25-2010

1. Recipient Name
State of New Jersey

6. Designated Entity On Behalf Of:
NJ Office of Information Technology

3. Street Address
300 Riverview Plaza,

8. Final Report? Yes No
9. Report Frequency
 Quarterly
 Semi Annual
 Annual
 Final

5. City, State, Zip Code
Trenton, NJ 08625-0212

7. Project / Grant Period
Start Date: (MM/DD/YYYY)
02-01-2010

7a. End Date: (MM/DD/YYYY)
01-31-2015

7b. Reporting Period End Date:
09-30-2010

9a. If Other, please describe:
N/A

10. Broadband Mapping

10a. Provider Table

Number of Providers Identified	Number of Providers Contacted	Number of Agreements Reached for Data Sharing	Number of Partial Data Sets Received	Number of Complete Data Sets	Number of Data Sets Verified
65	57	20	20	8	24

10b. Are you submitting the required PROVIDER DATA by using the Excel spreadsheet provided by the SBDD grants office? Yes No

10c. Have you encountered challenges with any providers that indicate they may refuse to participate in this project? Yes No

10d. If so, describe the discussions to date with each of these providers and the current status

One provider, Hotwire Communications, stated that the process was too onerous and declined to submit data. Lighttower Fiber Networks (also New Jersey DataNet Telecom) is currently constructing their network and will not have data to submit until the next reporting cycle. Lastly, although Broadview Network Holdings provided data, it arrived too late to be included in the submission. Broadview's data will be included in the next submission.

10e. If you are collecting data through other means (e.g. data extraction, extrapolation, etc), please describe your progress to date and the relevant activities to be undertaken in the future

N/A

10f. Please describe the verification activities you plan to implement

- * Provider Name and FRN verification against FCC data
- * Coverage area limited to NJ
- * Address verification via geo-coding
- * Validate data in all fields (i.e., census block ids, TIGERLine street segments, speed tier codes)
- * Technology and speed consistency checks (versus known provider capabilities and/or Web site advertisements)
- * Visual inspection of individual provider coverage maps for outlier detection
- * Data consistency across tables
- * NTIA validation rule set (i.e., speed codes versus technology, overview versus detail consistency)

10g. Have you initiated verification activities? Yes No

10h. If yes, please describe the status of your activities

All data provided by providers was verified using the aforementioned tactics.

10i. If verification activities have not been initiated please provide a projected time line for beginning and completing such activities

N/A

Staffing

10j. How many jobs have been created or retained as a result of this project?

2.8 positions were retained as a result of the Broadband Mapping program

10k. Is the project currently fully staffed? Yes No

10l. If no, please explain how any lack of staffing may impact the project's time line and when the project will be fully staffed

N/A

10m. When fully staffed, how many full-time equivalent (FTE) jobs do you expect to create or retain as a result of this project?

N/A

10n. Staffing Table

Job Title	FTE %	Date of Hire
Executive Director/Senior Principal Engineer	30	03/01/2010
Principal Engineer	100	03/01/2010
Senior Systems Engineer	100	03/01/2010

Add Row

Remove Row

Sub Contracts

10o. Subcontracts Table

Name of Subcontractor	Purpose of Subcontract	RFP Issued (Y/N)	Contract Executed (Y/N)	Start Date	End Date	Federal Funds	In-Kind Funds
Telcordia Technologies	Perform data collection and planning activities	Y	Y	05/25/2010	05/25/2012	4,926,106	1,317,573

Add Row

Remove Row

Funding

10p. How much Federal funding has been expended as of the end of the last quarter? \$320,000 10q. How much Remains? \$4,606,106

10r. How much matching funds have been expended as of the end of last quarter? \$63,997 10s. How much Remains? \$1,253,276

10t. Budget Worksheet

Mapping Budget Element	Federal Funds Granted	Proposed In-Kind	Total Budget	Federal Funds Expended	Matching Funds Expended	Total Funds Expended
Personal Salaries	\$840,000	\$358,286	\$1,198,286	\$0	\$63,997	\$63,997
Personnel Fringe Benefits	\$292,656	\$128,983	\$421,639	\$0	\$0	\$0
Travel	\$30,927	\$0	\$30,927	\$0	\$0	\$0
Equipment	\$0	\$0	\$0	\$0	\$0	\$0
Materials / Supplies	\$125,136	\$350,000	\$475,136	\$0	\$0	\$0
Subcontracts Total	\$3,637,387	\$480,304	\$4,117,691	\$320,000	\$0	\$320,000
Subcontract #1	\$0	\$0	\$0	\$0	\$0	\$0
Subcontract #2	\$0	\$0	\$0	\$0	\$0	\$0
Subcontract #3	\$0	\$0	\$0	\$0	\$0	\$0
Subcontract #4	\$0	\$0	\$0	\$0	\$0	\$0
Subcontract #5	\$0	\$0	\$0	\$0	\$0	\$0
Construction	\$0	\$0	\$0	\$0	\$0	\$0
Other	\$0	\$0	\$0	\$0	\$0	\$0
Total Direct Costs	\$0	\$0	\$0	\$0	\$0	\$0
Total Indirect Costs	\$0	\$0	\$0	\$0	\$0	\$0

Mapping Budget Element	Federal Funds Granted	Proposed In-Kind	Total Budget	Federal Funds Expended	Matching Funds Expended	Total Funds Expended
Total Costs	\$4,926,106	\$1,317,573	\$6,243,679	\$0	\$63,997	\$383,997
% Of Total	100	100	100	6	5	6

Hardware / Software

10u. Has the project team purchased the software / hardware described in the application? Yes No

10v. If yes, please list

N/A

10w. Please note any software / hardware that has yet to be purchased and explain why it has not been purchased

N/A

10x. Has the project team purchased or used any data sets? Yes No

10y. If yes, please list

N/A

10z. Are there any additional project milestones or information that has not been included? Yes No

10aa. If yes, please list

N/A

10bb. Please describe any challenge or obstacle that you have encountered and detail the mitigation strategies the project team is employing

N/A

10cc. Please provide any other information that you think would be useful to NTIA as it assesses your Broadband Mapping Project

N/A

11. Broadband Planning

11a. Please describe progress made against all goals, objectives, and milestones detailed in the approved Project Plan. Be sure to include a description of each major activity / milestone that you plan to complete and your current status

During this time period, the primary focus was on Broadband Mapping and not Planning.

11b. Please describe any challenge or obstacle that you have encountered and detail the mitigation strategies the project team is employing

N/A

11c. Does the Project Team anticipate any changes to the project plan for Broadband Planning? Yes No

11d. If yes, please describe these anticipated changes. Please note that NTIA will need to approve changes to the Project Plan before they can be implemented

N/A

Funding

11e. How much Federal funding has been expended as of the end of the last quarter? \$0

11f. How much Remains? \$0

11g. How much matching funds have been expended as of the end of last quarter? \$0

11h. How much Remains? \$0

11i. Planning Worksheet

Planning Budget Element	Federal Funds Granted	Proposed In-Kind	Total Budget	Federal Funds Expended	Matching Funds Expended	Total Funds Expended
Personal Salaries	\$0	\$0	\$0	\$0	\$0	\$0
Personnel Fringe Benefits	\$0	\$0	\$0	\$0	\$0	\$0
Travel	\$0	\$0	\$0	\$0	\$0	\$0
Equipment	\$0	\$0	\$0	\$0	\$0	\$0
Materials / Supplies	\$0	\$0	\$0	\$0	\$0	\$0
Subcontracts Total	\$0	\$0	\$0	\$0	\$0	\$0
Subcontract #1	\$0	\$0	\$0	\$0	\$0	\$0
Subcontract #2	\$0	\$0	\$0	\$0	\$0	\$0
Subcontract #3	\$0	\$0	\$0	\$0	\$0	\$0
Subcontract #4	\$0	\$0	\$0	\$0	\$0	\$0
Subcontract #5	\$0	\$0	\$0	\$0	\$0	\$0
Construction	\$0	\$0	\$0	\$0	\$0	\$0
Other	\$0	\$0	\$0	\$0	\$0	\$0
Total Direct Costs	\$0	\$0	\$0	\$0	\$0	\$0
Total Indirect Costs	\$0	\$0	\$0	\$0	\$0	\$0
Total Costs	\$0	\$0	\$0	\$0	\$0	\$0
% Of Total	0	0	0	0	0	0

Additional Planning Information

11j. Are there any additional project milestones or information that has not been included?

N/A

11k. Please describe any challenge or obstacle that you have encountered and detail the mitigation strategies the Project Team is employing

N/A

11l. Please provide any other information that you think would be useful to NTIA as it assesses your Broadband Mapping Project

N/A

12. Certification: I certify to the best of my knowledge and belief that this report is correct and complete for performance of activities for the purpose set forth in the award documents.

12a. Typed or Printed Name and Title of Authorized Certifying Official

Shelley Bates

12c. Telephone
(area code, number, and extension)

X

12d. Email Address

shelley.bates@oit.state.nj.us

12b. Signature of Authorized Certifying Official

Submitted Electronically

12e. Date Report Submitted
(Month, Day, Year)

01-06-2011

Performance Progress Report
OMB Approval Number: 0660-0034
Expiration Date: 08/31/2010