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## Application

### Instructions

Annotations records internal notes/comments that are visible to internal staff only. Feedback appends a new section to the bottom of the application that is visible to the applicant and anyone viewing the application.

### Application Details

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### 390478 - Empower Rural Iowa Emergency Broadband Expansion Program (NOFA # 005) - Final Application

#### 395739 - Central Iowa Broadband Expansion Broadband Grant Program - Empower Rural Iowa

Status: Submitted

Submitted Date: 02/24/2021 10:01 AM Submitted By: Steve Frey

### Applicant Information

#### Primary Contact:

AnA User Id

STEVEN.FREY@IOWAID

First Name\*

Steve

First Name

Middle Name

Frey

Last Name

Title:

Email:\*

sfrey@stratfordtelephone.com

Address:\*

1001 Tennyson Ave

City\*

Stratford

City

Iowa

State/Province

50249

Postal Code/Zip

Phone:\*

515-838-2390

Phone

Ext.

Program Area of Interest\*

Broadband Grant Program - Empower Rural Iowa

Fax:

Agency

#### Organization Information

Organization Name:\*

Stratford Mutual Telephone

Organization Type:\*

For-Profit – Privately Held

DUNS:

Organization Website:

Address:

1001 Tennyson Ave

Stratford

City

Iowa

State/Province

50249

Postal Code/Zip

Phone:

515-838-2390

Ext.

Fax:

Benefactor

Vendor Number

**Cover Sheet-General Information****Authorized Official**

**Name\*** Steve Frey  
**Title\*** General Manager  
**Organization\*** Stratford Mutual Telephone  
*If you are an individual, please provide your First and Last Name.*  
**Address\*** 1001 Tennyson Ave  
  
**City/State/Zip\*** Stratford Iowa 50249  
City State Zip  
**Telephone Number\*** 515-838-2390  
**E-Mail\*** [sfrey@stratfordtelephone.com](mailto:sfrey@stratfordtelephone.com)

**Fiscal Officer/Agent**

*Please enter the "Fiscal Officer" for your Organization.*

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

**Name\*** Steve Frey  
**Title**  
**Organization** Stratford Mutual Telephone  
**Address** 1001 Tennyson Ave  
  
**City/State/Zip** Stratford Iowa 50249  
City State Zip  
**Telephone Number** 515-838-2390  
**E-Mail** [sfrey@stratfordtelephone.com](mailto:sfrey@stratfordtelephone.com)  
**County(ies) Participating, Involved, or Affected by this Proposal\*** Boone County, Hamilton County, Story County, Webster County  
**Congressional District(s) Involved or Affected by this Proposal\*** 4th - Rep Randy Feenstra  
[Congressional Map](#)  
**Iowa Senate District(s) Involved or Affected by this Proposal\*** 23, 24, 25  
[District Map](#)  
**Iowa House District(s) Involved or Affected by this Proposal\*** 45, 46, 48  
[District Map](#)

**Business Organization - NOFA #005**

**Business Legal Name\*** Stratford Mutual Telephone  
**Mailing Address**  
**Street \*** 1001 Tennyson Ave  
**City\*** Stratford  
**State\*** IA  
**Zip\*** 50249

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

**Alternate Street**  
**Alternate City**  
**Alternate State**  
**Alternate Zip**

**Additional Information**

Please name and upload file "Application Number - Applicant Name - Business Organization". File can be a PDF or Word Document.

\*

**Stratford Business Organization Information.pdf****Public Redacted Broadband Additional Information**

Is the Applicant a Communications Service Provider as defined by Iowa Code chapter 8B, including but not limited to private sector carriers, local governments, utilities, and other entities that provide or intend to provide Broadband service.

Communication Service Provider\* Yes

**Executive Project Summary NOFA #005**

This section requires an Applicant to summarize, at a high level, its proposed Project, including but not limited to the geographic area in which the Project will occur, the primary deployment model (e.g., wireline versus wireless), and a general overview of how Applicant has/will comply with the terms, conditions, and requirements of this NOFA #5. Please explain why CARES Act funds are necessary for the Project to proceed and how the Project will or will not proceed if the requested funds are not ultimately Awarded. Finally, please explain the current status of the Project, including the phase it is in, such as pre-planning, planning, or that building has commenced Name and upload this file "Application Number - Applicant Name - Executive Project Summary". This can be a PDF or Word Document.

**Executive Project Summary\*****Stratford Executive Summary.pdf**

The section requires Applicant to affirm whether or not federal funds are necessary for the Project to proceed.

Are federal Funds Necessary for the Project to proceed?\* Yes

This section requires an Applicant to describe how the Project will or will not proceed if State funds requested are not ultimately awarded.

Describe how the Project will or will not proceed if federal funds requested are not ultimately awarded.\*

Stratford Mutual Telephone Company (Stratford) determined the total eligible infrastructure costs to be \$2,028,100 for the Central Iowa Broadband Expansion. Stratford's Empower Rural Iowa Broadband grant request is 75%, \$1,521,075, of the total eligible infrastructure costs in the proposed area, with 25% being self-funded by Stratford. Stratford is committed to working toward overall community enhancement that includes residents, businesses, and community anchor institutions within the rural areas of Boone, Hamilton, Story, and Webster Counties. Access to high-speed broadband service should be available to every resident regardless of whether they live in town or out in the rural areas. After reviewing the financial feasibility of the project, the locations included in Stratford's application would be too costly to build without funding assistance. Due to the rural nature and relatively low population density, this project would be difficult to justify without the financial assistance from the Empower Rural Iowa Broadband Grants Program. Therefore, the proposed Central Iowa Broadband Expansion will likely not move forward as presented without grant assistance.

**Project Status**

Project Milestone	Estimated Completion date	Costs Incurred
OSP Engineering	12/01/2021	\$266,000.00
Fiber Construction(Mainline & Drops)	12/01/2021	\$1,654,800.00
FTTP Electronics (CO & ONT)	12/01/2021	\$107,300.00

**Demonstrated Experience NOFA #005**

This section requires information about Applicant's demonstrated experience in provisioning Broadband across the State of Iowa. Applicant shall include relevant information about their experience that has prepared them to deploy their Project, such as, for example, community partnerships and services; number of years in business; number of years of experience providing the types of services sought by this NOFA #005; if the Applicant is a relatively new provider/market entrant, an explanation of the benefits, if any, of being a newer provider/market entrant; the level of technical experience in providing the types of services sought by this NOFA #005; or any other information that would aid the Office in assessing whether Applicant is a Responsible Applicant.

**Demonstrated Experience\*****Stratford Demonstrated Experience.pdf****References**

Name Monica Becker, Stratford Gravel  
Telephone Number 515-318-9005

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Reference Letter #1 [02.23.21 Stratford Mutual Telephone recommendation letter.pdf](#)

Name Story City Greater Chamber Connection

Telephone Number 515-733-4214

Reference Letter #2

Name Matt Triggs

Telephone Number 515-210-4900

Reference Letter #3

### Broadband Grants Core Application - Exhibits B, C, D, and D.1

Applicant requests that the contents of their application remain confidential in whole or in part, pursuant to Section 1.25 of the NOFA #005.

**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 1.25.1.5 of the NOFA #005, the Office shall be relieved from any responsibility for maintaining the confidentiality of the application pursuant to 1.25.5 of the NOFA #005.

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 #005, 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\* [Stratford Broadband\\_Grants\\_Core\\_Application\\_NOFA005.xlsm](#)

Public Redacted Copy

Overflow Materials Exhibit C

Applicants may provide evidence of need support for their Project by uploading materials through the Iowa Grants System, which materials demonstrate how communities, households, businesses, schools, or hospitals are hindered in their ability to respond to the challenges of COVID-19 due to a lack of at least 25/3 Broadband ("Supplemental Materials of Need"). Such evidence, by way of example only, may include letters signed and endorsed by community officials, including but not limited to the mayor, city administrator, county supervisor, superintendent, hospital administrator, etc.

Supplemental Materials of Need [Stratford Letters of Support.pdf](#)

### Broadband Grants Program Grant Agreement - Exhibit E

Exceptions to Broadband Grants Program Grant Agreement\* [Stratford Exhibit E Acceptance.pdf](#)

### Certification, Authorization, and Release of Information - Exhibit F

Certification Letter (Public)\* [Stratford Exhibit F - Certifications.pdf](#)

### Request for Confidentiality or Form 22 - Exhibit G

Form 22 (Public)\* [Stratford Exhibit G.pdf](#)

### Federal Identification Documentation

DUNS Number\* 27434190

Label upload as "Application Number - Organization Name - SAM".

SAM Registration Upload\* [SAMS\\_ System for Award Management.pdf](#)

### Project Budget

Category	Description	Total Estimated Cost \$	Total Estimated Cost \$	Total Estimated Project Budget	Requested Grant Support %(enter percentage here)	Grant Request (Est. Cost *
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		(Exhibit D)	(Exhibit D1)	(D+D1)	Control Number 395739	Request %)
Conduit		\$0.00	\$0.00	\$0.00	0	\$0.00
Fiber/Copper	Mainline & Drop Fiber (40.66 Mainline Miles)	\$1,431,572.00	\$223,228.00	\$1,654,800.00	75.0	\$1,241,100.00
OSP Engineering		\$230,110.00	\$35,890.00	\$266,000.00	75.0	\$199,500.00
Design Engineering		\$0.00	\$0.00	\$0.00	0	\$0.00
Construction Mgmt.		\$0.00	\$0.00	\$0.00	0	\$0.00
Tower		\$0.00	\$0.00	\$0.00	0	\$0.00
Antenna		\$0.00	\$0.00	\$0.00	0	\$0.00
Boring		\$0.00	\$0.00	\$0.00	0	\$0.00
Trenching		\$0.00	\$0.00	\$0.00	0	\$0.00
Knifing		\$0.00	\$0.00	\$0.00	0	\$0.00
Switching Equipment		\$0.00	\$0.00	\$0.00	0	\$0.00
Routing Equipment		\$0.00	\$0.00	\$0.00	0	\$0.00
Optical Equipment	FTTP Electronics (CO Electronics & ONT's)	\$107,300.00	\$0.00	\$107,300.00	75.0	\$80,475.00
Customer Premise Equipment		\$0.00	\$0.00	\$0.00	0	\$0.00
Other		\$0.00	\$0.00	\$0.00	0	\$0.00
<b>Totals</b>		<b>\$1,768,982.00</b>	<b>\$259,118.00</b>	<b>\$2,028,100.00</b>		<b>\$1,521,075.00</b>

### Minority Impact Statement

Does the proposed grant program or policy have a disproportionate or unique **positive impact** on minority persons? \*

Yes

Describe the positive impact expected from this project.

The proposed Central Iowa Broadband Expansion will positively impact minority persons by enhancing broadband speeds in unserved areas of Boone, Hamilton, Story, and Webster Counties.

Detail the rationale for the existence of the proposed program or policy.

According to the U.S. Census Bureau, Story County has a 13.4% minority population; Boone County, 3.4%; Hamilton County, 5.9%; and, Webster County, 8.7%. These populations of individuals within the grant area will benefit as a result of the fiber broadband infrastructure. The proposed project will eliminate any disadvantage resulting from lack of access to reliable, high-speed broadband.

Indicate the group(s) positively impacted.

Women, Persons with a Disability, African Americans, Latinos, Asians or Pacific Islanders, American Indians, Alaskan Native Americans

Could the proposed grant program or policy have a disproportionate or unique **negative impact** on minority persons? \*

No

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

Yes

\*

General Manager

Title

Steve

First Name

Frey

Last Name

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