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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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### 409811 - Broadband Grant Program - Empower Rural Iowa - NOFA #006 - Final Application

#### 417326 - Casey Mutual Rural Fiber Project Broadband Grant Program - Empower Rural Iowa

Status: Submitted Submitted Date: 07/28/2021 11:56 AM Submitted By: Curtis Dean

### Applicant Information

#### Primary Contact:

AnA User Id

CURTISWDEAN@IOWAID

First Name\*

Curtis

First Name

Middle Name

Dean

Last Name

Title:

President

Email:\*

curtis@smartsourceconsulting.com

Address:\*

9712 Turnpoint Drive

City\*

West Des Moines

City

Iowa

State/Province

50266

Postal Code/Zip

Phone:\*

515-650-0251

Phone

Ext.

Program Area of Interest\*

Broadband Grant Program - Empower Rural Iowa

Fax:

Agency

#### Organization Information

Organization Name:\*

Casey Mutual Telephone Co

Organization Type:\*

Private

DUNS:

Organization Website:

caseytelco.com

Address:

108 East Logan St

108 East Logan St

Casey

City

Iowa

State/Province

50048

Postal Code/Zip

Phone:

641-746-2222

Ext.

Fax:

Benefactor

Vendor Number

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

**Name\*** John Breining  
**Title\*** General Manager  
**Organization\*** Casey Mutual Telephone  
*If you are an individual, please provide your First and Last Name.*  
**Address\*** 108 E Logan Street

**City/State/Zip\*** Casey Iowa 50048  
City State Zip

**Telephone Number\*** 641-746-2222  
**E-Mail\*** [jbreining@netins.net](mailto:jbreining@netins.net)

**Fiscal Officer/Agent**

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

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

**Name\*** John Breining  
**Title** General Manager  
**Organization** Casey Mutual Telephone Company  
**Address** 108 E Logan Street

**City/State/Zip** Casey Iowa 50048  
City State Zip

**Telephone Number** 641-746-2222  
**E-Mail**

**County(ies) Participating, Involved, or Affected by this Proposal\*** Adair County, Audubon County, Guthrie County  
**Congressional District(s) Involved or Affected by this Proposal\*** 3rd - Rep Cindy Axne, 4th - Rep Randy Feenstra  
[Congressional Map](#)  
**Iowa Senate District(s) Involved or Affected by this Proposal\*** 6, 10  
[District Map](#)  
**Iowa House District(s) Involved or Affected by this Proposal\*** 12, 20  
[District Map](#)

**Business Organization - NOFA #006**

*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\*** Casey Mutual Telephone Company

**Doing Business As:**

**Physical Address**

**Street \*** 108 E Logan Street  
**City\*** Casey  
**State\*** IA  
**Zip\*** 50048

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

**Street or PO Box \*** 108 E Logan Street  
**City\*** Casey  
**State\*** IA  
**Zip Code\*** 50048

**Applicant Business Structure**

*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

*Identification of whether the Applicant is a subsidiary of one or more parent companies.*

**Are you a subsidiary of one or more parent companies?\*** No

**Executive Project Summary NOFA #006**

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

**Are state 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 state funds requested are not ultimately awarded.\*** Because the areas that are part of the proposed project are sparsely populated, the cost per premise is prohibitive without state funding support.

**Has construction on the project begun?\*** No

**Project Status**

Project Milestone	Estimated Completion date	Costs Incurred
Project completed	12/31/2024	\$7,436,916.00

**Demonstrated Experience NOFA #006**

*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; history of organization; number of years in business; number of years of experience providing the types of services sought by this NOFA #006; 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 #006.*

**Demonstrated Experience\*** [Demonstrated Experience NOFA.docx](#)

**References**

<b>Name</b>	Randy Crawford
<b>Telephone Number</b>	641-742-3855
<b>Name</b>	Teresa and Carey Noland
<b>Telephone Number</b>	641-742-3350
<b>Name</b>	
<b>Telephone Number</b>	

**Community Support Letter**

**Community Support Letter** [Casey Mutual support letters 3.pdf](#)

**Minority Impact Statement**

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

No

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 John Breining  
Title First Name Last Name

### 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 2.2.6.6. and 7.18 of the NOFA #006.

**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 #006, the Office shall be relieved from any responsibility for maintaining the confidentiality of the application pursuant to 7.18.4 of the NOFA #006.

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 #006, 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\* [Casey Mutual Broadband\\_Grants\\_Core\\_Application\\_NOFA006.xlsm](#)

Public Redacted Copy

Optional Upload: A letter from a professional engineer certifying that the proposed Project design will be capable of simultaneously Facilitating 100/100 Broadband or 100/20 Broadband, as applicable, to the Total Broadband Units Facilitated as represented in Applicant's proposed Project.

Professional Engineer Project Certification Letter [Casey Certification41.pdf](#)

### Broadband Grants Program Grant Agreement - Exhibit E

Have you read and do you accept the terms and conditions set forth in the grant agreement (Exhibit E)?\*

Yes

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

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

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

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

### Project Budget

Category	Description	Total Estimated Cost \$ (Exhibit D)	Total Estimated Cost \$ (Exhibit D1)	Total Estimated Project Budget (D+D1)	Requested Grant Support %(enter percentage here)	Grant Request (Est. Cost * Request %)
Conduit		\$0.00	\$0.00	\$0.00	0	\$0.00
Fiber/Copper	Distribution fiber (259.92 mi mi.); drop fiber (499 drops)	\$6,466,988.00	\$0.00	\$6,466,988.00	39.27	\$2,539,586.19
OSP Engineering		\$130,061.00	\$0.00	\$130,061.00	39.27	\$51,074.95
Design Engineering		\$0.00	\$0.00	\$0.00	0	\$0.00
Construction Mgmt.		\$0.00	\$0.00	\$0.00	0	\$0.00

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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	Transport optics; OLT	\$397,242.00	\$0.00	\$397,242.00	39.27	\$155,996.93
Customer Premise Equipment	Ont's; wiring	\$392,625.00	\$0.00	\$392,625.00	39.27	\$154,183.84
Other	Cabinets	\$50,000.00	\$0.00	\$50,000.00	39.27	\$19,635.00
<b>Totals</b>		<b>\$7,436,916.00</b>	<b>\$0.00</b>	<b>\$7,436,916.00</b>		<b>\$2,920,476.91</b>

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