

## SCRPS Status Update

FCC Form 5640

OMB Control No. 3060-1270

File No. SC-SU0002941

### Applicant Information

Applicant FRN 0006146120

Applicant Address 219 W. Emmitt Ave

Applicant Name Southern Ohio Communicatio Applicant City Waverly

Applicant Email gcooper@socs.cc Applicant State OH

Applicant Phone 7409472409 Applicant ZIP Code 45690

### Contact Information



Is the contact the same as the contact listed on the Application Request for Funding Allocation? If not, please list below.

Contact Name Summit Ridge Group

Contact Address 49 W 38Th

Contact Email SOCSRNR@summitridgegrou

Contact City New York

Contact Phone (212) 433-4800

Contact State NY

Contact ZIP Code 10018

\*Indicate which deadline you are meeting with this filing.

2024-10-07

## Explanation of Effort and Availability of Commercial Equipment

\*Provide an explanation of efforts undertaken, and challenges encountered, in permanently removing, replacing, and disposing of covered communications equipment or service.

Southern Ohio Communications Services Inc. (“SOCS”) has largely completed its SCRP (“Rip & Replace”) project. The remaining items include the core router and the destruction of covered equipment. However, the lack of full funding has hindered SOCS’ ability to complete the project and continues to adversely impact its business.

SOCS has successfully ordered and received replacement customer-premise equipment, which is installed at all customer locations. The migration of all customers to the new system is complete, and SOCS’s employees have undergone training on the new equipment. The PON network has also been completed. SOCS’s covered equipment was removed from customer homes, inventoried, palletized, and stored in a locked facility, with access controlled by electronic badges.

SOCS ordered the core router and switch equipment in January 2024. The switches are programmed and installed in the network. Since all the equipment was ordered before the program was fully funded, SOCS had to finance over half the costs independently, placing SOCS in a difficult financial situation. The lack of full funding and the time it has taken to install and integrate equipment into the network, forced SOCS to request a build deadline extension.

SOCS continues to have difficulty finding additional employees with adequate telecommunications experience and credentials. The issue is not one of compensation but rather the lack of suitable candidates. These additional employees are needed for the Rip & Replace project. SOCS needs its current employees to maintain and grow its core business. If SOCS needs to shift those employees to Rip & Replace, their inability to commit to Rip & Replace full-time could delay the project.

All ZTE PON equipment is in the warehouse waiting for disposal. The only remaining ZTE in the network is one ZTE router. SOCS has received the replacement equipment; however, SOCS is waiting for the vendor to schedule the configurations for the new equipment before it can be installed.

SOCS has sourced an ITAR-certified destruction vendor. Once the final piece of ZTE equipment is removed from its network, SOCS will seek financing to independently fund destruction. However, without full funding, the costs associated with destruction may pose a significant financial burden for SOCS. Continued financial strain could jeopardize SOCS’s future as a broadband provider.

SOCS looks forward to completing the Rip & Replace project as soon as possible. However, it has exhausted its 39.5% allocation; therefore, it has self-funded any significant removal, replacement, and disposal progression. This financial burden has impacted SOCS’s ability to maintain its core business and serve its clients.

\*Explain whether you are finding commercially available equipment in the marketplace. If not, then explain efforts taken to obtain replacement equipment.

SOCS has not encountered any recent difficulties due to equipment availability.

\* If there is additional information relevant to the preceding questions or that you believe the Commission should be aware of, please include the information below.

## Program Compliance

\*Indicate whether recipient has fully complied with (or is in the process of complying with) all requirements of the Reimbursement Program.

Yes  No

\*Indicate whether recipient has permanently removed from its communications network all covered communications equipment or services that were in the recipient's network as of the date of the submission of the recipient's application request for funding.

Yes  No

If recipient has not yet completed the removal process, what estimated percentage of the removal process have you completed?

70

\*Indicate whether recipient has replaced all covered communications equipment or services that were in the recipient's network as of the date of the submission of the recipient's application request for funding.

Yes  No

If recipient has not yet completed the replacement process, what estimated percentage of the replacement process have you completed?

70

\*Indicate whether recipient has disposed of all covered communications equipment or services that were in the recipient's network as of the date of the submission of the recipient's application request for funding.

Yes  No

If recipient has not yet completed the disposal process, what estimated percentage of the disposal process have you completed?

0

\*Indicate whether recipient has fully complied with (or is in the process of complying with) the timeline submitted by the recipient. If not, provide explanation for deviation.

Yes  No

\*The filer has indicated no to a question in this section, please provide additional information.

SOCS has exhausted its SCRP allocation. Without full funding from Congress or additional financing, SOCS will be unable to finish the removal, replacement, and disposal process. SOCS is a small service provider in rural Ohio, and the out-of-pocket costs related to this program have placed an undue burden on the company.

## Certifications

\*By checking the box and providing the electronic signature where indicated below, the Certifying Official on behalf of the filer certifies under penalty of perjury that:

(1) The Certifying Official is authorized to submit this status report on behalf of the above-named filer and, based on information known to me or provided to me by employees responsible for the information being submitted, the information set forth in this status report has been examined and is true, accurate, and complete, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. The Certifying Official acknowledges that any false, fictitious, or fraudulent information or statement, or the omission of any material fact on this status report or on any other document submitted by the filer may subject the filer and the undersigned to punishment by fine or forfeiture under the Communications Act (47 U.S.C. §§ 502, 503(b), 1606), or fine or imprisonment under Title 18 of the United States Code (18 U.S.C. § 1001, §§ 286-287, and § 1343), or can lead to liability under the False Claims Act (31 U.S.C. §§ 3729-3733, and §§ 3801-3812). (2) The filer is in compliance with the statute, rules, and orders governing the Reimbursement Program, including but not limited to allocations, draw downs, payments, obligations and expenditures of money, and the Certifying Official acknowledges that failure to be in compliance and remain in compliance with those statutes, rules, and orders may result in the denial of funding, cancellation of funding commitments, and/or recoupment of past disbursements. The Certifying Official acknowledges that the filer will maintain detailed records, including receipts, of all costs eligible for reimbursement actually incurred for a period of 10 years; and will file all required documentation for its expenses. The Certifying Official acknowledges that failure to comply with the statute, rules, and orders governing the Reimbursement Program could result in civil or criminal prosecution by law enforcement authorities.

## Certifier Information

Certifier  
Signature      **Bret W. Childers**

Certifier Phone   **7409473502**

Certifier Name   **Bret W. Childers**

Certifier Email   **bchilders@socs.cc**

Certifier Title    **COO**

Date Signed      **2024-10-07**