

USF E-rate Funding Support Will Not Commence For the Below Funding Request Numbers Until This Form Is Returned To Frontier

Incomplete Forms Will Be Returned To The Applicant Contact For Proper Completion

Instructions:

-Complete one Data Gathering Form for each Form 471 Application Number – Attach additional sheets as necessary to include all affected account numbers

-Complete all sections of the form

-Sign and date the form

-Different categories of service (Internet Access, Data Transmission, and Internal Connections) may require separate Data Gathering Forms

SECTION A					
E-rate Fund Year (e.g., FY2022)					
Form 471 Application Number From Funding Commitment Decision Letter (FCDL) – Up to 10 numeric digits					
Will the Applicant use the Billed Entity Applicant Reimbursement invoice method via FCC Form 472 (BEAR) to receive E-rate funds? Note: California customers receiving California Teleconnect Fund discounts and Texas customers receiving Texas Distance Learning discounts cannot use the E-rate BEAR process	Yes No				
Service Provider Identification Number (SPIN) From Funding Commitment Decision Letter (FCDL)					
Service Provider Name					
Applicant (School/Library) Name					
Applicant Contact Name					
Applicant Contact Telephone Number					
Applicant Contact Fax Number					
Applicant Contact Internet E-mail Address					

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SECTION B

Applicant has reviewed any preliminary information received from Frontier (e is receiving) and has notified Frontier of any errors or omissions. Applicant H to the Form 471 Application detail that the E-rate fund administrator, Schools approved for E-rate funding. Applicant assumes full responsibility for the acc the Data Gathering Form and will hold Frontier harmless in the event of any resulting from, any inaccurate or incomplete information provided by Applica	has provided information as it pertains and Libraries Division (SLD), has curacy of the information provided in claim or liability arising out of, or
A signature and date are required below. Please return the completed form electronic signature is required. For applicants receiving E-Rate funds via dis when the billing system will be ready to discount your bills. Monthly credits w after Frontier verifies the information provided in the Data Gathering Form ar 486 has been filed with the SLD. In addition, we will issue credit(s) back to the bills that have already been paid for this current funding year. These credits appear within two billing periods after the discount has begun.	scounted bills, Frontier will contact you ill be applied to your accounts ONLY nd receives notification that your Form ne approved Service Start Date for any
Applicant/Contact Signature	Date
Applicant/Contact Name (typed or printed)	
Frontier Received Date	Initials
Fax to the attention of Frontier E-Rate Center at (888) 483-6820 or e-mail to <u>FN.ERATE-CTF@FTR.com</u>	

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SECTION C					
1	2	3	4	5	6
Funding Request Number (FRN) From Funding Commitment Decision Letter (FCDL) – Up to 10 numeric digits	Discount Percentage Approved	Funding Cap Amount	Billing Account Number Billing account number as shown on your bill(s) for each account to be included in bill discounting.	Approved Telephone/Circuit Number(s) associated with each billing account number that SLD has approved for E-rate funding	Products / services <u>NOT</u> <u>ELIGIBLE OR APPROVED</u> for E-rate funding for the approved Telephone/Circuit Number

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