

**CONNECTING BRITISH COLUMBIA PROGRAM****Economic Recovery Intake**

REPORTING FORM

**Adobe Reader 8.0+ is required to complete this reporting form.**

If you are using an earlier version, you will not be able to save any information you enter into the form.

Adobe Reader is a free download available at: <http://www.adobe.com/products/acrobat/readstep2.html>

★ **Please ensure documents are downloaded and saved to your computer desktop prior to entering any information. If opened and completed within your internet browser, any information entered will not be saved.**

**1. Proponent Profile**

Project #:	Project name:		
Proponent organization (legal name):		Mailing address:	

**2. Primary Contact Information**

Primary contact (for this report):	Position/title:
Telephone:	Email:

### 3. Required Attachments

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**A project ledger detailing all eligible project expenses, printed from your accounting software.**

**Spreadsheet detailing all project expenses, using the [Expenses Claim Form Template](#).**

✦ *Must support the amount entered in Claim Summary and must be provided in excel format.*

**Upon completion:**

**Finalized quarterly report, using the [Quarterly Report Workbook Template](#).**

**Letter of attestation, after project completion, from an external third-party professional engineer (P.Eng) that includes the following:**

- Confirmation that the project was completed as described in the application/contract
- Confirmation that any equipment noted in the application/contract is now in place and operational and was the actual equipment used in the project
  - For example for broadband: confirmation that speeds prior to the project were not at 25/5 Mbps and once the project is completed the speeds are now at 25/5 Mbps or greater

**Mapping Data in a geo-coded format** (*i.e. Google Earth KMZ, ESRI shp file, or similar. NOTE: Not accepted – PDF maps or static images*)

- Mapping must include actual upgraded network infrastructure (project specific) with the following layers and information:
  - Coverage for the communities resulting from the project; identify available speeds
  - Locations (colour differentiated) of new and upgraded: towers, PoPs, fibre, PTP microwave links, COs.
  - New PTP microwave paths (colour differentiated) between towers (*required for fixed wireless and LTE projects*)

**Photos and/or video footage of your project** (*during and completion*)

**Preferred: Marketing and promotional materials related to the project**

**Preferred: Testimonials and success stories** (*i.e. any customer testimonials or positive feedback you've received for your network including any social benefits achieved as a result of the build*)

- Where possible, please provide names and contact information as they may be contacted in future regarding their support of the project

**If applicable: New service package and pricing for consumers**

#### 4. Project Type(s)

✦ *Select the project type(s):*

<b>Community projects:</b> ✦ <i>Must complete Section 4. Community Projects.</i>					
<b>Broadband:</b>	Fibre	Coaxial	DSL	Fixed Wireless	Fixed Wireless (LTE)
<b>Cellular:</b>	Cellular				
<b>Public Wi-Fi Hotspot:</b>	Public Wi-Fi Hotspot				
<b>Satellite:</b>	Satellite				
<b>Highway projects:</b> ✦ <i>Must complete Section 5. Highway Projects.</i>					
<b>Cellular:</b>	Cellular				
<b>Public Wi-Fi Hotspot:</b>	Rest Area	Campsite	Inland Ferry Terminal		
<b>Call Boxes:</b>	Emergency Call Boxes				

#### 5. Community Projects (if applicable)

Provide a brief summary of the project using non-technical language:			
Proposed total number of communities: ✦ <i>As per application form.</i>	Proposed Indigenous communities: ✦ <i>As per application form.</i>	Proposed total number of households: ✦ <i>As per application form.</i>	Proposed number of locales: ✦ <i>As per application form.</i>
Actual total number of communities:	Actual Indigenous communities:	Actual total number of households:	Actual number of locales:

### 6. Highway Projects (if applicable)

Provide a brief summary of the project using non-technical language:		
Proposed total number of highways: ★ <i>As per application form.</i>	Proposed new cellular coverage (km): ★ <i>As per application form.</i>	Proposed total number of highway cellular sites: ★ <i>As per application form.</i>
Proposed number of rest areas: ★ <i>As per application form.</i>	Proposed number of inland ferries: ★ <i>As per application form.</i>	Proposed number of call boxes: ★ <i>As per application form.</i>
Actual total number of highways:	Actual new cellular coverage (km):	Actual total number of highway cellular sites:
Actual number of rest areas:	Actual number of inland ferries:	Actual number of call boxes:

### 7. Estimated Project Employment (Jobs)

Estimated actual project employment:

	Number of people who worked on the project:	Hours of employment per week (average):	Total person months of employment (average):	Total estimated full-time equivalent (FTE) Job Creation *
Estimated direct employees:		hours/week	months/year	
Estimated contracted labour:		hours/week	months/year	

\*Full-time equivalent (FTE) job creation is aggregated from information provided above. 1.0 FTE is equal to 1 new position working 35 hours/week for 12 months/year.

### 8. Claim Summary

Is the project complete?		Claim #:	Actual project completion date: (dd-mmm-yyyy)
Yes	No		
This claim:		Amount (\$):	
<b>Previously reported eligible costs</b> (if applicable)		\$	
<b>Reported actual eligible costs THIS CLAIM</b> (as per completed Expenses Claim Form Template)		\$	
<b>Total Reported actual eligible spend to date</b>		=	
<b>x Northern Development funding percentage</b> (as per signed agreement; enter as a decimal)		<b>x</b>	
<b>= Calculated reimbursable amount</b>		<b>=</b>	
<b>Less: funding already received</b> (previous disbursements/advances, if any)		\$	
<b>= Calculated amount requested</b>		<b>=</b>	
<b>Maximum funding approved</b> (as per signed agreement)		\$	
<b>TOTAL AMOUNT REQUESTED:</b>		<b>\$</b>	
Explain any substantial variance(s) between budget and actual costs:			

### 9. Other Funding Sources

Funding source:	Amount (\$):	Identify funding received:	Comments:
	\$	Funding received Date funding expected:	
	\$	Funding received Date funding expected:	
	\$	Funding received Date funding expected:	
<b>TOTAL OTHER FUNDING:</b>			
<i>(received and/or expected)</i>			

### 10. Authorization

I have read and understand the [Economic Recovery Intake Application Guide](#) and confirm ineligible costs have not been included.

I understand that the final payment will be withheld until project is validated by a professional engineer.

I confirm that funding received or to be received for this project will not exceed the total cost of this project.

I confirm that the information in this report (including attachments) is accurate, complete, and fairly presented.

I agree to provide upon request any additional information Northern Development staff deems necessary. I understand that Northern Development will request copies of specific invoices/support once reporting has been submitted.

I understand that information provided to Northern Development may be accessible under the Freedom of Information (FOI) Act.

I agree that information provided in this reporting form (including attachments) may be shared with the Province of British Columbia to promote the program and shared (e.g., with other government jurisdictions) to maximize the benefits to citizens. By submitting a report to the Connecting British Columbia Program you agree to the subsequent use of that information to support the goals of the Program.

I authorize Northern Development to make enquiries, collect and share information with such persons, firms, corporations, federal and provincial government agencies/departments and non-profit organizations, as Northern Development deems necessary to verify the results reported.

I agree that any equipment or infrastructure acquired and/or installed, and any service provided through it, is not the responsibility of the Province of British Columbia or Northern Development Initiative Trust.

I understand that recipient must own, operate, and maintain the resulting network for 3 years after project completion.

Name (organization signing authority): * Please type name.	Position/title:	Date:

### 11. Submitting Your Report

Completed project reporting forms (with all required attachments) should be provided electronically to Northern Development by email to [connectingbc@northerndevelopment.bc.ca](mailto:connectingbc@northerndevelopment.bc.ca).

\* Please submit this Reporting Form and all attachments in one email; do not scan this form.