ATTACHMENT C Broadband Build For Unserved Locations (Coronavirus Capital Project Funds) RFP DBEA 2026-01 Contractor Data Sheet

1.	Years in Business: Indicate the length of time you have been in business providing this				
	type of service.	Years	_ Months		
2.		ate below at least four (4 band service. Include the		whom you have provided urnished, and contacts.	
Clie	ent	City/State	Date	Contact name/phone	
3.	•	ary firm? Yes No			
	If yes, list parent	affiliation:			
	Company:				
	Address:			<u></u>	
	City:		State:_		
4.	Current Number	of Clients:			
5	Number of Full-Ti	me Employees:			

Authorized Signature(s)This form must be completed and signed by an officer of the company:

, ,	•	' '	
Name of Firm:			-
Contact:			-
Address:			_
City:	State:	Zip:	-
Phone:			-
Fax:			
Email:			
Date of incorporation:			-
If not a corporation, state the type of bus address and phone of principle place of borganized.	_		
I certify the accuracy of this information.			
Signature:			-
Name and title (print or type):			_
Date:			