PUBLIC UTILITIES COMMISSION

505 VAN NESS AVENUE SAN FRANCISCO, CA 94102-3298



CONSENT FORM

Name of Grantee:
The California Advanced Services Fund (CASF) Grantee identified above
cknowledges receipt of either a Resolution or a letter from Commission Staff
approving a grant under the Ministerial Review process. The Grantee agrees to
comply with all grant terms, conditions, and requirements set forth in Resolution
Γ or letter, as well as all CASF rules,
ncluding those in the Broadband Infrastructure Accounts Requirements,
Guidelines and Application Materials

Licensed Contractor Reporting Requirement

All CASF Broadband Infrastructure Accounts grantees approved on or after July 21, 2021 must fulfill the monthly reporting requirements set forth in Public Utilities Code section 281(l)(1) when work done on this project by a licensed contractor or subcontractor to undertake a contract or subcontract exceeds twenty-five thousand dollars (\$25,000). Grantee must submit this information monthly in an email to CASF_Infrastructure_Grant_Administrator@cpuc.ca.gov with the subject line "Project Name> Contractor monthly report Month> ">Year>"."
Please note that pursuant to section 281(l)(2), the Commission will post this information on its website. The grantee must include the following:

- 1. The name and contractor's license number of each licensed contractor and subcontractor undertaking a contract or subcontract in excess of twenty-five thousand dollars (\$25,000) to perform work on a project funded or financed pursuant to this section.
- 2. The location where a contractor or subcontractor described in subparagraph

	(1) will be performing that work.
3.	The anticipated dates when that work will be performed
	Undersigned representative of [Name of Grantee] is duly authorized to execute this Consent Form on behalf of the Grantee and to bind the Granteeto the terms, conditions, and requirements set forth in California Public Utilities Commission Resolution T or the letter referenced above.
Dated	day of, 20
	ed Name
Signa	ature
Title	
Orga	nization or Name of Company:
Busin	ness Address (include street address, suite/apt. number, city, state, and ZIP Code)

Telephone Number (include area code): (

Email Address: