**2018-2019 Construction Period Pre-Monitoring Checklist (To be completed by the Grantee)**

|  |  |
| --- | --- |
| **Project Number:** |  |
| **County of Project:** |  |
| **Date of Visit:** |  |
| **Grantee Contact Name & Title:** |  |
| **Grantee Address, Phone, & Email** |  |
| **Grant Agreement Effective Date:** |  |
| **Construction Period End Date:** |  |
| **Technology Type****(DSL, Coax, FTTH or Wireless):** |  |
| **Fixed Wireless Providers – General description of the project.****Address or geo-coordinates of vertical assets/structures used to mount fixed wireless equipment Make and model of the fixed wireless equipment used to deploy service****Frequencies used to deploy service****Information on the types of speeds offered and cost of service** |
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