

Name of Attorney preparing or Signer of Pleading  
Address  
Telephone Number

- BEFORE THE PUBLIC SERVICE COMMISSION OF UTAH -

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In the Matter of the Application **COMPANY** )  
**NAME**, for a Certificate of Public Convenience )  
and Necessity to Provide Facilities-Based and )  
Resold Local Exchange, Access, and )  
Interexchange Telecommunications Services in )  
the State of Utah. )  
)  
)  
)  
)  
)

DOCKET NO. 19-2614-01  
Type of Pleading

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Opening Statement from Company.

**GENERAL INFORMATION:**

Company Name: Utah Broadband LLC.  
d/b/a if applicable:

Utah Business Entity Number:

Principal Address: 14015 S Minuteman Dr., Draper, UT 84020  
Principal Address:

Local Address: 14015 S Minuteman Dr., Draper, UT 84020  
Local Address:

Telephone: 801-717-2000

Toll-Free Number: 877-822-8824

Fax:

Website: <http://www.utahbroadband.com>

Email Address:       steve@utahbroadband.com

Subsidiary of (if any):

Principal Address:

Principal Address:

Local Address:

Local Address:

Telephone:

Toll-Free Number:

Fax:

Website:

Email Address:

**Contact Information during Application Process:**

Name: Jake Simon

Title: Chief Technology Officer

Email: jsimon@utahbroadband.com

Telephone: 727-599-9912

Toll-Free Number:

Fax:

**Regulatory Contact Person:**

Name: Jake Simon

Title: Chief Technology Officer

Email: jsimon@utahbroadband.com

Telephone: 727-599-9912

Toll-Free Number:

Fax:

**Complaint Contact Person:**

Name: Jake Simon

Title: Chief Technology Officer

Email: jsimon@utahbroadband.com

Telephone: 727-599-9912

Toll-Free Number:

Fax:

Requirements as listed under **R746-349 “Competitive Entry and Reporting Requirements”**

**R746-349-3 “Filing Requirements”**

**R746-349-3(A)** “In addition to any other requirements of the Commission or of Title 63G, Chapter 4 and pursuant to 54-8b-2.1, each applicant for a certificate shall file, in addition to its application:”

**R746-349-3(1)** “testimony and exhibits in support of the company’s technical, financial, and managerial abilities to provide the telecommunications services applied for and a showing that the granting of a certificate is in the public interest. Informational requirements made elsewhere in these rules can be included in testimony and exhibits;”

**R746-349-3(2)** “proof of a bond in the amount of \$100,000. This bond is to provide security for customer deposits or other liabilities to telecommunications customers of the Telecommunications Corporation or liabilities to the Utah Public Telecommunications Service Support Fund, 54-8b-15, or the Hearing and Speech Impaired Fund, 54-8b-10. An applicant may request a waiver of this requirement from the Commission if it can show that adequate provisions exist to protect customer deposits or other customer liabilities;” *(also see R746-349-11(c))*

**R746-349-3(3)** “a statement as to whether the telecommunications corporation intends to construct its own facilities or acquire use of facilities from other than the incumbent local exchange carrier, or whether it intends to resell an incumbent local exchange carrier’s and other telecommunications corporation’s services;”

**R746-349-3(4)** “a statement regarding the services to be offered including:”

**R746-349-3(4)(a)** “which classes of customer the applicant intends to serve,”

**R746-349-3(4)(b)** “the locations where the applicant intends to provide services,”  
(54-8b-2.1(3)(c) “Competitive Entry, a telecommunications corporation may not receive a certificate to compete in providing local exchange service within any local exchange with fewer than 5,000 access lines that is owned or controlled by an incumbent telephone corporation with fewer than 30,000 access lines in the state.”)

**R746-349-3(4)(c)** “the types of services to be offered;”

**R746-349-3(5)** “a statement explaining how the applicant will provide access to ordinary IntraLATA and InterLATA message toll calling, operator services, directory assistance, directory listings and emergency services such as 911 and E911;”

**R746-349-3(6)** ”an implementation schedule pursuant to 47 U.S.C. 252(c)(3) of the Telecommunications Act of 1996 which shall include the date local exchange service for residential and business customers will begin;”

**R746-349-3(7)** “summaries of the professional experience and education of all managerial personnel who will have responsibilities for the applicant’s proposed Utah operations;”

**R746-349-3(8)** “an organization chart listing all the applicant’s employees currently working or that plan to be working in or for Utah operations and their job titles;”

**R746-349-3(9)** “a chart of accounts that includes account numbers, names and brief descriptions;”

**R746-349-3(10)** “financial statements that at a minimum include:”

**R746-349-3(10)(a)** “the most recent balance sheet, income statement and cash flow statement and any accompanying notes, prepared according to GAAP;”

**R746-349-3(10)(b)** “a letter from management attesting to their accuracy, integrity and objectivity, and that the statements were prepared in accordance with GAAP;”

**R746-349-3(10)(c)** “if the applicant is a start-up company, a balance sheet following the above principles must be filed;”

**R746-349-3(10)(d)** “if the applicant is a subsidiary of another corporation, financial statements following the above principles must also be filed for the parent corporation;”

**R746-349-3(11)** “financial statements to demonstrate sufficient financial ability on the part of the applicant. At a minimum, the applicant’s statements must show:”

**R746-349-3(11)(a)** “positive net worth for the applicant CLEC;”

**R746-349-3(11)(b)** “sufficient projected and verifiable cash flow to meet cash needs as shown in a five-year projection of expected operations,”

**R746-349-3(11)(c)** “proof of bond as specified in R746-349-3(A)(2);”

**R746-349-3(12)** “a five-year projection of expected operations including the following:”

**R746-349-3(12)(a)** “proforma income statements and proforma cash flow statements,”

**R746-349-3(12)(b)** “when applicable, a technical description of the types of technology to be deployed in Utah including types of switches and transmission facilities,”

**R746-349-3(12)(c)** “when applicable, detailed maps of proposed locations of facilities including a description of the specific facilities and services to be deployed at each location;”

**R746-349-3(13)** “an implementation schedule pursuant to 47 U.S.C. 252(c)(3) of the Telecommunications Act of 1996 which shall include the date local exchange service for residential and business customers will begin;”

**R746-349-3(14)** “evidence of sufficient managerial and technical ability to provide the public telecommunications services contemplated by the application must be demonstrated by a showing of at least the following;

**R746-349-3(14)(a)** “proof of certification in other jurisdictions; and that service is currently being offered in other jurisdictions by the applicant,”

**R746-349-3(14)(b)** “or the corporation has had at least two years of recent experience in providing telecommunications services related to the type of services the CLEC intends to provide;”

**R746-349-3(15)** “a statement as to why entry by the applicant is in the public interest;

**R746-349-3(16)** “proof of authority to conduct business in Utah;

**R746-349-3(17)** “a statement regarding complaints or investigations of unauthorized switching, otherwise known as slamming, or other illegal activities of the applicant or any of its affiliates in any jurisdiction. This statement should include the following”

**R746-349-3(17)(a)** “sanctions imposed against the applicant for any of these activities,”

**R746-349-3(17)(b)** “copies of any written documents related to these complaints, investigations, or sanctions, including: orders or other materials from the FCC or state commissions, any courts, or other government bodies, and any complaint letters or other documents from any non-government entities or persons,”

**R746-349-3(17)(c)** “the applicant’s responses to any of these issues;”

**R746-349-3(18)** “statement about the applicant’s written policies regarding the solicitation of new customers and a description of efforts made by the applicant’s to prevent unauthorized switching of Utah local service by the applicant, its employees, or its agents.”

**R746-349-3(B)** “Additional questions relating to the technical, financial, and managerial capabilities of the applicant and public interest issues may be submitted by the Division or other parties in accordance with R746-100-8. Discovery.”

# Statements From Utah Broadband

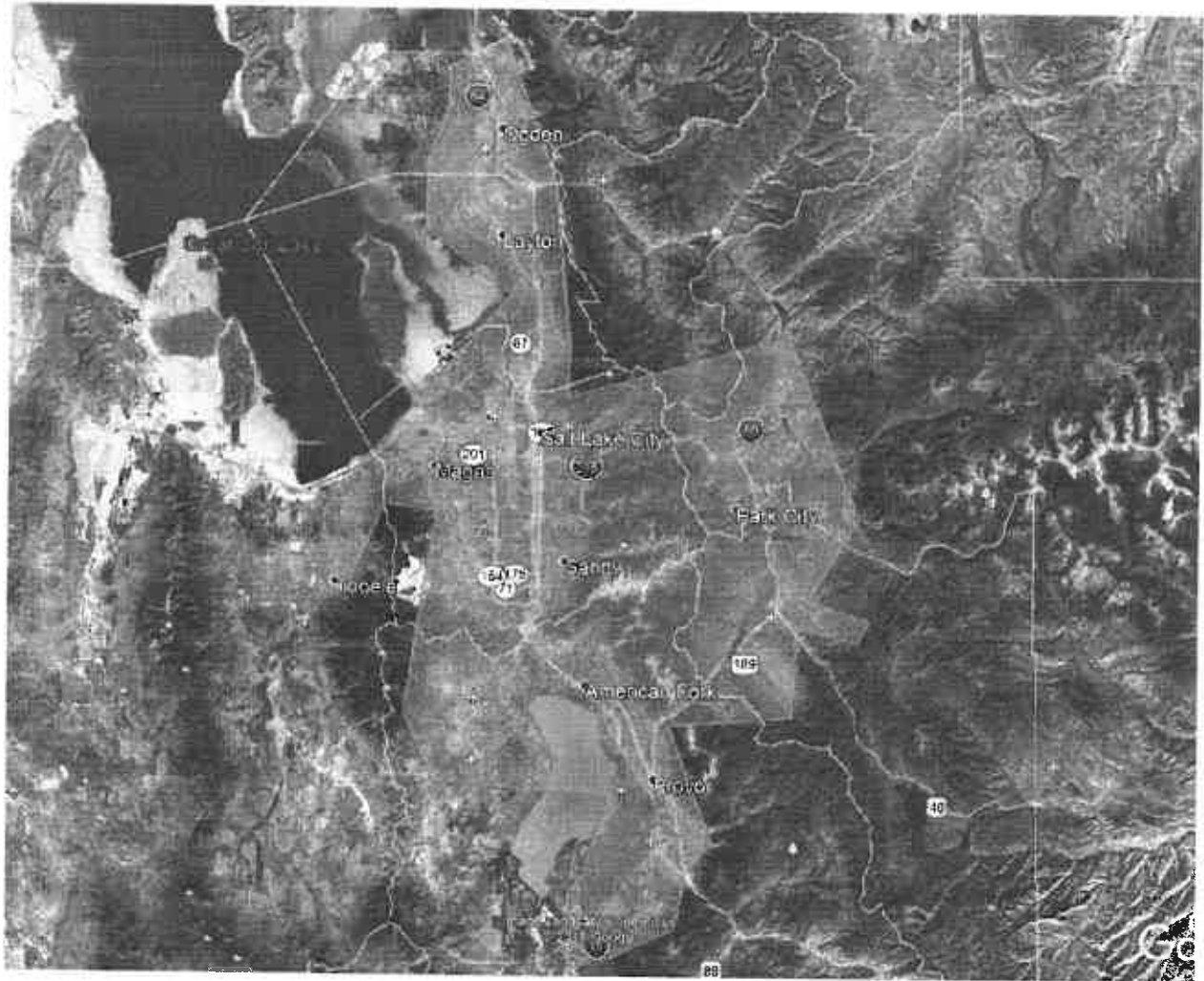
## Statement of Construction

Utah Broadband intends to construct our own facilities and co-locate in public rights-of-way with incumbent providers in accordance with SB0189. We also intend to construct facilities on private property with express written permission from landowners.

## Statement of Services Offered

Utah Broadband offers Residential and Commercial internet services only, using fixed-wireless transmission (WiFi) in unlicensed Radio Frequencies(RF), Microwave transmission in unlicensed and licensed RF, and wired connections using fiber-optic cables and copper based ethernet.

## Intended Service Locations



**Waiver of offering phone services**

Utah Broadband will not be offering telephone services on it's network. Therefore we request a waiver of requirements R746-349-3(5) and R764-349-3(6)

**Professional Experience**

*See attached - Managerial Bios.pdf*

**Org Chart**

*See attached - Org Chart.pdf*

**Statement of Financials**

*See attached financial documents*

**Proof of bond**

*See attached - Bond certificate*

**Certificate of liability insurance**

*See attached - Utah Broadband - COI.pdf*

**Statement of Public Interest**

"Utah Broadband has been serving Utah residents for 20 years. We boast one of the highest customer satisfaction indexes of all ISP's serving our community. Our online reviews, for example, are the highest in the state. We accomplish this by providing very competitive priced and highly reliable Internet service. Additionally, all of our staff are local so we go to great lengths to provide personalized customer service. We continually look for ways to improve our service and speeds and look forward to working with the State and Municipalities to accomplish that."

**Proof of authority to operate in Utah**

*See attached - W9.pdf, Draper Utah Business License 2019.pdf*

**Statement of Solicitation****Written policy on acquiring new customers**

"Utah Broadband acquires its customers primarily through the use of traditional media (billboards, online ads, etc.). Approximately 55% of our leads come from inbound calls



generated from these sources. The other 45% of our leads come from customer referrals.”

### **Written policies on security**

“Utah Broadband provides core and edge network firewalling to prevent common forms of internet abuse or hacking attempts. Should security threats exist on our network that originate on subscriber computers, we reach out to inform the infected subscribers. We comply with Payment Card Industry (PCI) standards for banking and credit card information storage. We also protect user passwords and details by requiring subscriber passwords at 30 bits of entropy that are not on known “hacking” lists and conform to the National Institute of Standards and Technology (NIST) recommended password ratings. Utah Broadband offers no telephone services, therefore, unauthorized switching is not a concern.”

***Steven C. McGhie, Founder & Chief Executive Officer Utah Broadband***

Mr. McGhie is an entrepreneur in the purest sense of the word. Mr. McGhie has a passion for creating and growing businesses. He currently owns and operates several companies. A few of these companies include Utah Broadband, Alpine Networks, Fibercom and Sunbrook Properties.

Utah Broadband is one of the largest and most successful wireless broadband companies in the western United States. Providing Internet service in Utah since 1999, Utah Broadband (UBB) is one of the fastest growing and most reputable Internet providers in Utah. Through Mr. McGhie's leadership, UBB has acquired five companies, merged with another company, sold to a public company from Canada and re-acquired UBB a year after selling. Alpine Networks builds, owns and leases communication towers. Fibercom is one of the largest fixed wireless Internet companies in the state of Idaho. Sunbrook Properties is a real estate investment company with multiple properties in various states.

Prior to starting Utah Broadband, Mr. McGhie held several positions including Executive Director of Business Development, Sales, and International at Talk2 Technology, Inc., a telecommunications software engineering firm. Before Talk2, he held various management positions at Franklin Covey Company, including Manager, Southeast Area office in Atlanta, GA.

He currently serves on several Boards and engages in philanthropic endeavors on a regular basis.

He and his wife have seven children. On top of spending time with his family, he enjoys fly-fishing, golf and other outdoor activities.

He served an LDS mission in Zurich, Switzerland and graduated from Brigham Young University with a Bachelor of International Business and a Minor in German.

***Taunya Martin, Chief Operations Officer Utah Broadband***

Taunya Martin is a native of Utah and after graduating from BYU with a BS in Business she started working for Unisys holding management positions in accounting, human resources, manufacturing, and product development. With her broad experience in all areas of management, she took a job with Square D, a division of Schneider Electric, working in both Marketing and Manufacturing. As Vice President of Manufacturing one of the highlights of that job was leading the manufacturing deployment of a product that was designed in Salt Lake, built in China, and sold into the Asian market. Today Taunya is the COO of Utah Broadband, a wireless Internet company. She enjoys managing the operations side of the business and the opportunity to affect change and help people grow to their full potential. Taunya and her husband have 4 children and 10 grandchildren. They enjoy boating, hiking and just being around family.

***Jacob Simon, Chief Technical Officer Utah Broadband***

Jacob Simon is a hands-on engineering professional equipped with more than 19 years of technology and engineering experience, delivering a valuable combination of technical and business acumen, along with a record of achievement improving processes, saving expenses, modernizing technologies, and training corporate teams.

Throughout his career, he has held such positions as Chief Technology Officer, Senior Vice President, Network Engineering, Network Engineer, and Computer Operations Engineer.

A few accomplishments from these roles include:

- Combining IT operations and engineering groups into a cohesive technology team.
- Streamlining operations for 60 broadcast television stations across the US.
- Directing the modernization of all technical aspects for multiple companies in various industries.
- Design and implementation of several broadband and fiber-based ISP networks.
- Developing disaster recovery strategies.
- Creating corporate training materials for technical and non-technical operations.
- Designing rural and educational networks to reach under-served communities.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
06/27/2019

**THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.**

**IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).**

<b>PRODUCER</b> Diversified Insurance Group 136 E. South Temple Street Suite 2300 Salt Lake City UT 84111	<b>CONTACT NAME:</b> Kimmie Ortman <b>PHONE (A/C, No, Ext):</b> (801) 325-5000 <b>FAX (A/C, No):</b> (801) 532-2804 <b>E-MAIL ADDRESS:</b> ksmedley@diversifiedinsurance.com													
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: center;">NAIC #</th> </tr> </thead> <tbody> <tr> <td><b>INSURER A:</b> One Beacon Insurance</td> <td></td> </tr> <tr> <td><b>INSURER B:</b> WCF Mutual Insurance Company</td> <td></td> </tr> <tr> <td><b>INSURER C:</b></td> <td></td> </tr> <tr> <td><b>INSURER D:</b></td> <td></td> </tr> <tr> <td><b>INSURER E:</b></td> <td></td> </tr> <tr> <td><b>INSURER F:</b></td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	<b>INSURER A:</b> One Beacon Insurance		<b>INSURER B:</b> WCF Mutual Insurance Company		<b>INSURER C:</b>		<b>INSURER D:</b>		<b>INSURER E:</b>		<b>INSURER F:</b>
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**COVERAGES**                                  **CERTIFICATE NUMBER:** 19-20 GL WC                                  **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSTR	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS														
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b>  <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			711014741	03/20/2019	03/20/2020	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>EACH OCCURRENCE</td><td style="text-align: right;">\$ 1,000,000</td></tr> <tr><td>DAMAGE TO RENTED PREMISES (Ea occurrence)</td><td style="text-align: right;">\$ 500,000</td></tr> <tr><td>MED EXP (Any one person)</td><td style="text-align: right;">\$ 10,000</td></tr> <tr><td>PERSONAL &amp; ADV INJURY</td><td style="text-align: right;">\$ 1,000,000</td></tr> <tr><td>GENERAL AGGREGATE</td><td style="text-align: right;">\$ 2,000,000</td></tr> <tr><td>PRODUCTS - COMP/OP AGG</td><td style="text-align: right;">\$ 2,000,000</td></tr> <tr><td></td><td style="text-align: right;">\$</td></tr> </table>	EACH OCCURRENCE	\$ 1,000,000	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 500,000	MED EXP (Any one person)	\$ 10,000	PERSONAL & ADV INJURY	\$ 1,000,000	GENERAL AGGREGATE	\$ 2,000,000	PRODUCTS - COMP/OP AGG	\$ 2,000,000		\$
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B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> Y/N <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below <input checked="" type="checkbox"/> N    N/A			3330885	03/20/2019	03/20/2020	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> PER STATUTE    <input type="checkbox"/> OTH-ER</td> <td></td> </tr> <tr><td>E.L. EACH ACCIDENT</td><td style="text-align: right;">\$ 500,000</td></tr> <tr><td>E.L. DISEASE - EA EMPLOYEE</td><td style="text-align: right;">\$ 500,000</td></tr> <tr><td>E.L. DISEASE - POLICY LIMIT</td><td style="text-align: right;">\$ 500,000</td></tr> </table>	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER		E.L. EACH ACCIDENT	\$ 500,000	E.L. DISEASE - EA EMPLOYEE	\$ 500,000	E.L. DISEASE - POLICY LIMIT	\$ 500,000						
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DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

<b>CERTIFICATE HOLDER</b>  Evidence Of Insurance	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE
--	--



Agency Name or Code <u>Diversified Insurance Group</u>
Producer Name _____

### Bond Express – GENERAL SURETY APPLICATION

(Specific applications are required for Motor Vehicle Dealer Bonds, Mortgage Broker Bonds, and Lost Instrument Bonds.)  
 This application must be **fully completed**, as well as signed, witnessed, and dated by the Applicant and all other Indemnitors.  
**THIS IS A LEGAL DOCUMENT - PLEASE TYPE OR PRINT LEGIBLY.**

Bond No. \_\_\_\_\_

Applicant's Name in full (As it should appear on the bond) <b>Utah Broadband, LLC</b>		Phone: <b>801-717-2002</b>	<input type="checkbox"/> Sole Ownership <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> LLC
		Fax: _____ Email: <u>taunya@utahbroadband.com</u>	
Business Address (Street Address, City, State and Zip Code) <b>14015 Minuteman DR, Draper, UT 84020</b>		Social Security Number _____	
Type of Bond Required	Amount of Bond <b>\$ 100,000</b>	Applicant's Current Occupation <b>COO</b>	Business License Number _____
Number of years under current ownership <b>17</b>	Years experience <b>17</b>	Market value of primary residence <b>\$ 3,000,000</b>	Balance of mortgage <b>\$ 2,400,000</b>
Has application for this bond been declined by another company? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, which surety and why?		Currently bonded? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, give name of surety and reason for change.	
Has the Applicant or anyone involved professionally or personally:			
a. Had any lawsuits or judgments against them? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		d. Ever had their license suspended, revoked or denied, or been subject to any legal/administrative proceedings resulting in disciplinary action? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b. Ever failed in business or declared bankruptcy? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		e. Ever been party to a surety bond claim? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
c. Ever been convicted of a crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		(If any answers are yes, please provide details on a separate page.)	
Obligee Name and Address _____			

### GIVE THE FOLLOWING INFORMATION ON EACH OWNER OR STOCKHOLDER

Name <b>Steven McGhie</b>	Social Security Number <b>528-35-2344</b>	Percent Ownership <b>100%</b>
Address <b>6302 West Adonis Drive, Highland, UT 84003</b>	City State Zip	Telephone <b>801-717-2000</b>
Name	Social Security Number	Percent Ownership
Address	City State Zip	Telephone

### COMPLETE FOR PROBATE/COURT BONDS

**\*PLEASE PROVIDE COPIES OF ALL APPLICABLE COURT DOCUMENTS INCLUDING WILLS, PETITIONS, COURT ORDERS, TRUSTS, ETC.**

Name of: <input type="checkbox"/> Deceased _____ Date of Death: _____ <input type="checkbox"/> Minor _____ DOB/Age: _____ <input type="checkbox"/> Incompetent* _____ DOB/Age: _____ *Describe condition of ward: _____	Applicant's relationship to Deceased/Minor/Incompetent:	Is the Applicant indebted to the estate or trust? <input type="checkbox"/> Yes <input type="checkbox"/> No	Does the Applicant share in the estate? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Date Appointed:	If yes, please explain. If yes, what %?	
Applicant's qualifications for handling estate:	List liabilities of estate or trust:		
List assets of estate or trust: Bonds: _____ Stocks: _____ Real Estate: _____ Cash: _____ Other: _____	Name and Address of Attorney:		
Does the estate include an ongoing business? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide a description.	Area of expertise:		
	Will the attorney remain involved throughout the duration of this estate? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Is this bond required on the demand of an interested person other than the court? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, who?	Are guardianship funds to be used for support of the minor/incompetent? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide copies of monthly expenditures and income.		
Does the presiding court require an annual accounting be filed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is there a will or trust? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please provide a copy.		
List all heirs and the percentage they share in the estate:	Are there any disputes among the heirs? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide details.		
Submission Checklist: <input type="checkbox"/> Wills & Codicils <input type="checkbox"/> Court Papers <input type="checkbox"/> Financial Inventory <input type="checkbox"/> Attorney or Applicant Resume			

**COMPLETE FOR PUBLIC OFFICIAL BONDS**

\*We will consider all public official bonds \$50,000 and under except: special bond issues and bonds for tax collectors, treasurers & their subordinates, and deputies who collect money. (Please contact us for guidance on these exceptions.)

4

Has the Applicant experienced any public official losses in the last five years?  Yes  No  
(If yes, please provide details.)

Official Title of Applicant	<input type="checkbox"/> Elected <input type="checkbox"/> Appointed	Term of office in years	Start Date: End Date:
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Has the Applicant previously occupied this position?  Yes  No  
If yes, during what period?

Does the Applicant currently have E&O or Liability Insurance?  Yes  No  
If so, please provide the following information. Company: \_\_\_\_\_ Limit: \_\_\_\_\_ Policy number: \_\_\_\_\_

**AGENT'S RECOMMENDATION**

5

Describe the length and nature of your relationship with the Applicant.

Do you recommend the Applicant for this bond?  Yes  No  
Why?

**INDEMNITY AGREEMENT**

The undersigned Applicant and Indemnitor(s), all hereinafter referred to as "Indemnitors," hereby certify that the declarations made and answers given are the truth without reservation, and are made for the purpose of inducing TRAVELERS CASUALTY AND SURETY COMPANY OF AMERICA, ST. PAUL FIRE AND MARINE INSURANCE COMPANY, any of their present or future direct or indirect parent companies, any of the respective present or future direct or indirect affiliates or subsidiaries of such companies and parent companies, and/or any of the aforementioned entities' successors or assigns, hereinafter referred to, individually and/or collectively, as "Company," to furnish a certain bond or undertaking applied for and any renewal and increase of the same or of any bond or undertaking of similar nature given in substitution or renewal thereof (all comprehended in the word "Bond" as herein used). Indemnitors agree that Company may decline the Bond applied for or may cancel or terminate same without incurring liability whatsoever to Indemnitors. In consideration of Company executing said Bond or the forbearance of cancellation of said Bond, Indemnitors do undertake and agree as follows:

Indemnitors will pay all premiums, as they fall due, until Company has been provided with competent legal evidence that the Bond has been duly discharged. Indemnitors will at all times indemnify and exonerate Company from and against any and all loss, cost and expense of whatever kind which it may incur or sustain as a result of or in connection with the furnishing of the Bond and/or the enforcement of this Agreement, including unpaid premiums, interest, court costs and counsel fees, and any expense incurred or sustained by reason of making any investigation. To this end Indemnitors promise: a) to promptly reimburse Company for all sums paid and b) to deposit with Company on demand an amount sufficient to discharge any claim made against the Company on the Bond. This sum may be used by Company to pay such claim or be held by Company as collateral security against loss or cost on the Bond.

Indemnitors hereby expressly authorize Company to access credit records and to make such pertinent inquiries as may be necessary from third party sources for underwriting purposes, claim purposes and/or debt collection. To the extent required by law, Company will, upon request, provide notice whether or not a consumer report has been requested by Company, and if so, the name and address of the consumer reporting agency furnishing the report.

Regardless of the date of signature(s), this Agreement is effective as of the date of execution of the Bond and is continuous until Company is satisfactorily discharged from liability pursuant to the terms and conditions contained herein. An Indemnitor may terminate participation in this Agreement with respect to future renewals or substitution bonds or undertakings by providing written notice to Company of such intent to terminate. Such notice shall be addressed to Travelers Bond & Financial Products, Attention: Senior Vice President Commercial Surety, One Tower Square, Hartford, Connecticut 06183 and shall become effective sixty (60) days after Company's receipt of the same. Termination hereunder shall not relieve the terminating Indemnitor(s) from liability with respect to any renewals or substitution bonds or undertakings issued, or for which Company has obligated itself to issue, before the effective date of termination.

*Attention: Any person who knowingly and with intent to defraud a surety company or any other person files an application for a surety bond containing any materially false information, or conceals, for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent act and may be subject to civil and/or criminal penalties.*

6 Signed this 8 day of July, 2019 ←

**CORPORATE INDEMNITY**

<p>x <u>Mart</u> Witness Sign Here</p> <p><u>Tawnya Martin</u> Print Name</p>	<p>Name of Applicant: <u>Utah Broadband LLC</u> Social Security Number/Tax I.D.: <u>48-1264567</u></p> <p>x <u>[Signature]</u> Applicant Sign Here</p> <p><u>Steven C McElhie / CEO</u> If Applicant is an Entity, Print Name and Title of Signatory</p>
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**INDIVIDUAL / ADDITIONAL INDEMNITORS MUST SIGN BELOW**

<p>x <u>Mart</u> Witness Sign Here</p> <p><u>Tawnya Martin</u> Print Name</p>	<p>Name of Indemnitor: <u>Steven McElhie</u> Social Security Number/Tax I.D.: <u>528-35-2344</u></p> <p>x <u>[Signature]</u> Indemnitor Sign Here</p> <p>_____ If Indemnitor is an Entity, Print Name and Title of Signatory</p>
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<p>x _____ Witness Sign Here</p> <p>_____ Print Name</p>	<p>Name of Indemnitor: _____ Social Security Number/Tax I.D.: _____</p> <p>x _____ Indemnitor Sign Here</p> <p>_____ If Indemnitor is an Entity, Print Name and Title of Signatory</p>
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UTAH BROADBAND

Steve McGhie  
CEO

Jake Simon  
CTO

Taunya Martin  
COO

Sales

Engineering

Accounting/  
Human Resources

Support

Field Operations  
Manager

Field Operations

## Request for Taxpayer Identification Number and Certification

**Give Form to the  
 requester. Do not  
 send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

See Specific Instructions on page 3.  Print or type.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>UTAH BROADBAND, LLC</b>	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.  <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ <u>C</u> <small>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small>  <input type="checkbox"/> Other (see instructions) ▶	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any) _____  Exemption from FATCA reporting code (if any) _____  <small>(Applies to accounts maintained outside the U.S.)</small>
	5 Address (number, street, and apt. or suite no.) See instructions. <b>14015 S MINUTEMAN DRIVE</b>	Requester's name and address (optional)
	6 City, state, and ZIP code <b>DRAPER, UT 84020</b>	
	7 List account number(s) here (optional)	

### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number	
[ ] [ ] [ ] - [ ] [ ] - [ ] [ ] [ ] [ ]	
or	
Employer identification number	
4 8 - 1 2 6 4 5 6 7	

### Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person ▶ <i>[Handwritten Signature]</i>	Date ▶ <u>1-11-19</u>
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### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*