

# FORM 500 NOTIFICATION LETTER (Funding Year xxxx: 07/01/xxxx - 06/30/xxxx)

Date xx

SP Contact Name

SP Name

SP Contact Address Line 1

SP Contact Address Line 2

SP Contact City, SP Contact State SP Contact Zip

Re: Service Provider Name:

Service Provider Identification Number:

We are issuing this Form 500 Notification Letter to notify you that the Schools and Libraries Division (SLD) of the Universal Service Administrative Company (USAC) has received and accepted FCC Form(s) 500, Adjustment to Funding Commitment and Modification to Receipt of Service Confirmation Form, from Billed Entities - your customers - requesting changes to Funding Request Number(s) (FRN) listing your company's Service Provider Identification Number (SPIN).

Attached to this letter is a Report summarizing the modifications or changes made to previously approved FRNs. An explanation of the data provided in our letter reports is in the "Guide to USAC Letter Reports" posted in the Reference Area of our website.

### DEADLINES:

Recurring services must be delivered during the funding year (between July 1 and June 30). In general, non-recurring services must be delivered between July 1 and September 30 following the close of that Funding Year. The deadline may be extended for delivery and installation of non-recurring services as described in Step 11: Service Delivery Deadlines and Extension Requests on our website.

Invoices must be postmarked no later than 120 days after the last date to receive service or 120 days after the date of the Form 486 Notification Letter, whichever is later. If an invoice is postmarked after the later of those two dates, payment will be denied.

Applicants can request a Service Delivery Deadline Extension or Invoice Deadline Extension from USAC following the guidance posted on our website.

Work with your customers to establish whether discounts will appear on bills or whether they prefer a reimbursement process. USAC will process either reimbursements based on Form 472 (BEAR) or discounts based on Form 474 (SPI) for a given FRN. Once established, however, the selected process - SPIs or BEARs - must be used consistently for the entire Funding Year.

NOTE: USAC will base the billing mode (reimbursement or discounting) on the first invoice type that it processes for payment. It is therefore imperative for the service provider and the customer to establish together the preferred invoicing mode.

#### NOTICE ON SERVICE START DATE

The Service Start Date as reflected on this letter may have been changed from what was indicated on the Form 500. The Service Start Date may not be before the Allowable Vendor Selection/Contract Date (AVSCD) from the Form 470 cited for this FRN on the Form 471. Additionally, applicants cannot use the Form 500 to change the Service Start Date from a Service Start Date that was adjusted on a Form 486. You will know that a change has been made if there is an asterisk (\*) next to the Service Start Date Change. It is important that you and your customer both recognize that USAC should only be invoiced and USAC may only direct disbursement of the discounts on eligible, approved services actually delivered and installed after the Service Start Date indicated on this letter.

### TO APPEAL THE SERVICE START DATE CHANGE DECISION

If you wish to appeal a decision in this letter, your appeal must be received by USAC or postmarked within 60 days of the date of this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. In your letter of appeal:

- 1. Include the name, address, telephone number, fax number, and (if available) email address for the person who can most readily discuss this appeal with us.
- 2. State outright that your letter is an appeal. Include the following to identify the letter and the decision you are appealing:
  - appellant name,
  - applicant or service provider name, if different than appellant,
  - applicant BEN and service provider SPIN,
  - Form 500 number as assigned by USAC,
  - Funding Request Number(s) (FRNs) you are appealing if provided in the letter,
  - "Form 500 Notification Letter for FY<####>", AND
  - the exact text or the decision that you are appealing.
- 3. Please keep your letter to the point, and provide documentation to support your appeal. Be sure to keep a copy of your entire appeal, including any correspondence and documentation.
- 4. If you are an applicant, please provide a copy of your appeal to the service provider(s) affected by USAC's decision. If you are a service provider, please provide a copy of your appeal to the applicant(s) affected by USAC's decision.
- 5. Provide an authorized signature on your letter of appeal.

To submit your appeal to USAC by email, email your appeal to appeals@sl.universalservice.org. USAC will automatically reply to incoming emails to confirm receipt.

To submit your appeal to us by fax, fax your appeal to (973) 599-6542.

To submit your appeal to us on paper, send your appeal to:

Letter of Appeal Schools and Libraries Division - Correspondence Unit 30 Lanidex Plaza West PO Box 685 Parsippany, NJ 07054-0685

For more information on submitting an appeal to USAC, please see the "Appeals Procedure" posted on our website.

You have the option of filing an appeal with USAC or directly with the Federal Communications Commission (FCC). You should refer to CC Docket No. 02-6 on the first page of your appeal to the FCC. Your appeal must be received by the FCC or postmarked within 60 days of the date of this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. We strongly recommend that you use the electronic filing options described in the "Appeals Procedure" posted on our website. If you are submitting your appeal via United States Postal Service, send to: FCC, Office of the Secretary, 445 12th Street SW, Washington, DC 20554.

Schools and Libraries Division
Universal Service Administrative Company

# FORM 500 NOTIFICATION LETTER REPORT (Funding Year ####)

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Service Provider Name:
Service Provider Identification Number (SPIN):

Funding Request Number (FRN):
Form 471 Application Number:
Name of 471 Applicant:
Entity Number:
Name of Form 500 Contact Person:
Form 500 Contact Person Information:
Funding Year:
Billing Account Number:
Service Start Date Change (SHOWN ONLY IF REQUESTED):
Service Start Date Change Explanation (SHOWN ONLY IF RELEVANT):
Contract Expiration Date Change (SHOWN ONLY IF REQUESTED):
Cancel FRN (SHOWN ONLY IF REQUESTED):
Reduce FRN (SHOWN ONLY IF REQUESTED):
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