Available for Public Use



## Schools and Libraries (E-Rate) Program FCC Form 473 (SPAC Form) User Guide

**March 2023** 



## FCC Form 473 (Service Provider Annual Certification)

Service providers file an FCC Form 473 (Service Provider Annual Certification (SPAC) Form) in the E-Rate Productivity Center (EPC) to certify that they will comply with Schools and Libraries (E-Rate) program rules. Service providers must have a SPAC form on file for each funding year they participate in the E-Rate program and for each Service Provider Identification Number (SPIN) ID.

Service providers can file a SPAC Form on or shortly after the application filing window opens for the upcoming funding year, generally in early January for the upcoming funding year.

A service provider must have a SPAC form on file for the specific funding year before USAC can pay invoices submitted by applicants on the FCC Form 472 (BEAR) or by service providers on the FCC Forms 474 (SPI).

## How to Submit the FCC Form 473 in EPC

 Navigate to the <u>USAC</u> home page or the <u>E-Rate</u> home page. Click **Sign In** at the top to access EPC.



2. The **Service Provider Landing Page** opens. Click the waffle icon on the upper right and select **EPC Invoice**.





3. The **Dashboard** window opens and you can see the SPINs for which you have permissions to submit and certify a SPAC or prepare an invoice. You will also see any actions that are available to you. Click **File FCC Form 473** to start your SPAC form submission.

2 Dashboard							
Good Morning John Dunn			. 6	1	1		
		My Organization		My Forms and	Requests	My Pending Tas	ks
		My Organization		My Forms and	Requests	My Pending Tas Submit E	ks lectronic Invoice
Q. Search Service Providers		My Organization		My Forms and	Requests	My Pending Tas Submit E	ks lectronic Invoice
Q. Search Service Providers SPIN	Service Provider Na	My Organization SEARCH me	City	My Forms and State	Requests Entity Type	My Pending Tas Submit E	ks lectronic Invoice T -

4. The **FCC Form 473 - The Service Provider Annual Certification** window opens. Select the funding year for your SPAC from the **Funding Year** dropdown menu. Then click **Continue**.

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FCC Form 473 - Service Provid	der Annual Certification		100
			OVB Number: 3060-0856
Service Pro	wider Information	Certification	
Name of Service Provider	Service Provider Identification Number (SPIN)	Functing Year*	
Telecom Inc.	345000002	- Select a Functing Vear -	•
Contact Information		- Select a Functing Year -	
term the min and a mini a mark		2016	
we you the main contact person:		2017	
		2018	
YES NO		2019	
Main Contact Person *		2020	
		2021	
DISCARD FORM			CONTINUE



- 5. Click **Yes** or **No** depending on if you are the Main Contact. Then click **Continue**.
  - If you click **No** you are not the main contact you can start typing to see a list of possible names and you will need to select one.
  - If you click **Yes**, information auto-populates from your EPC profile.

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FCC Form 473 – Servio	e Provider Annual Certification			
				OMB Number: 3060-0856
	Service Provider Information		Certification	
Name of Service Provider	Service Provider Identification Number (SP	IN)	Funding Year *	
New Horizon Communications Corp.	143029113		2021	•
Contact Information				
Are you the main contact person?				
YES 🗸 NO				
Main Contact Person *	Joh	n Dunn		
👤 John Dunn	420	Bedford Street Suite 250		
	Le	ington, MA 02420-1508		
	781	-290-4615		
	jdu	nn@nhcgrp.com		
DISCARD FORM				CONTINUE

6. The **Certifications** screen opens. Review and check each FCC Form 473 certification if you can accurately make the statement.

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FCC Form 473 – Service Provider Annual Certification	n
	OMB Number: 3060-0856
Service Provider Information	Certification
Certifications	
l declare under penalty of perjury that:*	
I certify that the Service Provider Invoice Forms (FCC Form 474) that are submitted by this Service Provider con Provider's customers on behalf of schools, libraries, and consortia of those entities, as deemed eligible for uni	ntain requests for universal service support for services which have been billed to the Service versal service support by the fund administrator.
I certify that the Service Provider Invoice Forms (FCC Form 474) that are submitted by this Service Provider are on behalf of schools, libraries, and consortia of those entities as deemed eligible for universal service support administrator for which the fund administrator has not yet issued a reimbursement decision.	: based on bills or invoices issued by the Service Provider to the Service Provider's customers by the fund administrator, and exclude any charges previously invoiced to the fund
I certify that the bills or invoices issued by this Service Provider to the Billed Entity are for equipment and serv previously invoiced to the Administrator by the Service Provider.	ices eligible for universal service support by the Administrator, and exclude any charges
I certify that any requests for reimbursement that are sought under a Service Provider Invoice Form (FCC Forn components are properly allocated as required by the Commission's rules at 47 C.F.R. § 54.504(e).	n 474) for discounts for products or services that contain both eligible and ineligible
I certify that the invoices that are submitted by this Service Provider to the Billed Entity for reimbursement pu	rsuant to Billed Entity Applicant Reimbursement Forms (FCC Form 472) are accurate and
	$\sim\!\!\sim\!\!\sim\!\!\sim\!\!\sim\!\!\sim\!\!\sim\!\!\sim\!\!\sim\!\!\sim\!\!\sim\!\!\sim\!\!\sim\!\!$
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I certify that no Federal subsidy made available through a program administered by the Commission that provi communications services has been or will be used to purchase, rent, lease, or otherwise obtain, any covered co service previously purchased, rented, leased, or otherwise obtained, as required by 47 C.F.R. § 54.10.	des funds to be used for the capital expenditures necessary for the provision of advanced mmunications equipment or service, or maintain any covered communications equipment or
Signature *     By logging into your account, checking this box, and clicking the "certify" button at the end of the form, you hav     as a handwritten signature on the form	e electronically signed the form. You are reminded that an electronic signature is the same
BACK DISCARD FORM	CERTIFY



- 7. After you have checked all the certifications, you will reach the signature section of the form (red box above). Check the box if you agree that clicking the **Certify** button constitutes you electronically signing the form and after you check the box, you can click **Certify**.
- 8. The **Certification Confirmation** screen opens. A popup window appears. Review the text and click **Certify** to complete certification.

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I certify that the Service Provider Invoice Forms (FCC Form 474) that are submitted by this those entities as deemed eligible for universal service support by the fund administrator.	Service Provider are based on bills or invoices issued by the Service Pr and exclude any charges previously invoiced to the fund administrator	ovider to the Service Provider's customers on behalf of schools, libraries, and consortia of for which the fund administrator has not yet issued a reimbursement decision.
I certify that the bills or invoices issued by this Service Provider to the Billed Entity are for Service Provider.	By clicking the "Certify" button, you have electronically signed the	ninistrator, and exclude any charges previously invoiced to the Administrator by the
I certify that any requests for reimbursement that are sought under a Service Provider I Commission's rules at 47 C.F.R. § 54.504(e).	form. An electronic signature is the same as a handwritten signature on the form.	ntain both eligible and ineligible components are properly allocated as required by the
I certify that the invoices that are submitted by this Service Provider to the Billed Entity Service Provider for equipment and services provided pursuant to E-rate program rules	NO	ms (FCC Form 472) are accurate and represent payments from the Billed Entity to the
I certify that this Service Provider makes available to customers, upon their request, sep entities for eligible purposes.		ying the portions of their bills that represent the costs of services provided to eligible
I certify that no non-discount portion of the costs for eligible services will be waived, paid, unrelated to the supported service or product constitutes a rebate of the non-discount por	or promised to be paid by this Service Provider. I acknowledge that the ortion of the supported services as stated in 47 C.F.R. § 54.523.	e provision by any service provider of a supported service, or of free services or products
I certify that no kickbacks, as defined in 41 U.S.C. § 8701, were paid by this Service Provide	er to anyone in connection with the schools and libraries universal supp	port program.
I certify that this Service Provider is in compliance with the Commission's rule and orders value to any eligible schools, libraries, or consortium that includes eligible schools or libra	regarding gifts and this Service Provider has not directly or indirectly o iries, except as permitted by the Commission's rule at 47 C.F.R. § 54.50	ffered or provided any gifts, gratuities, favors, entertainment, loans, or any other thing of 3(d).
I certify that if the fund administrator, as necessary, requests additional supporting inform Provider will retain for at least 10 years (or whatever retention period is required by the n (1) any and all records that 1 rely upon to complete this form and each Service Provider II Billed Entity for relimbursement pursuant to Billed Entity Applicant Relimbursement Forms universal service support program as required by 47 C.F.R. § 54.516(a)(2) I acknowledge the 54.516(b)	nation, this Service Provider will make all documents requested availab tules in effect at the time of this certification), after the latter of the last solice Form (FCC Form 474) that is submitted by this Service Provider d (FCC Form 472), and (3) all documents necessary to demonstrate com nat this Service Provider may be audited pursuant to 47 C.F.R. § 54.516	sle to the Fund Administrator as required by 47 C.F.R. § 54.516(b). I certify that this Service day of the applicable funding year or the service delivery deadline for the funding requests, uring the present funding year.(2) any and all records issued by this Service Provider to the pliance with the statutory or regulatory requirements for the schools and libraries (c) and that the Service Provider must provide such records as required by 47 C.F.R. §

9. The **Certification Confirmation** screen opens. Click the link to return to the Service Provider record or click **Close** if you are done

Certification Confirmation          You have successfully filed FCC Form 473 #SPAC202100318         Click here to return to the Service Provider record         Certifier Information            • Name	Dashboard					III 🚺 🎼 🚥
You have successfully filed FCC Form 473 #SPAC202100318         Click here to return to the Service Provider record         Certifier Information         Image: Service Provider record         Image: Service Provider reco	Certification	Confirmation				
You have successfully filed FCC Form 473 #SPAC202100318         Cilick here to return to the Service Provider record         Certifier Information         Sname       John Durn         Infance       Suite 250         Lengton       Durl 1/2022 11:33 AM EDT         Penployer       New Horizon Communications Corp.         New Horizon Communications Corp.       781-290-4615 x         Image: Imployer       John Rumber         Total Employer       781-290-4615 x         Image: Image						
Certifier Information  Aname John Dunn John Dunn Address Address Address Suite 250 Suite 250 Langton New Horizon Communications Corp. New Horizon Communications Corp. Langton	You have successfully	y filed FCC Form 473 #SPAC202100318				
Shame       John Dunn       Image: State						
Shame     John Dunn     Image: Address     420 Bedford Street Suite 250     Image: Certified Date     10/17/2022 11:33 AM EDT       Title     Finance     Lexingtion Address     2/20-1508     Image: Certified Date     10/17/2022 11:33 AM EDT       Image: Employer     New Horizon Communications Corp.     New Horizon Communications Corp.     781-290-4615 x     Image: Certified Date     10/17/2022 11:33 AM EDT       Image: Employer     New Horizon Communications Corp.     Tail-290-4615 x     Image: Certified Date     10/17/2022 11:33 AM EDT	Certifier Informa	ation				
I Title     Finance     Lexington       Marce     Marce     Marce       Employer     New Horizon Communications Corp.     02420-1508       Version     781-290-4615 x       Email     jdunn@nhcgrp.com	& Name	John Dunn	Address	420 Bedford Street Suite 250	Certified Date	10/17/2022 11:33 AM EDT
Employer New Horizon Communications Corp. New Horizon Communications Corp. C Phone Number 781-290-4615 x S Email Jdunn@nhcgrp.com	i Title	Finance		Lexington MA		
Email jdunn@nhcgrp.com	Employer	New Horizon Communications Corp.	C. Phone Number	781-290-4615 x		
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