**NTIA Broadband Availability Data**

**Online Data Collection Form and Upload Tool**

**1. Overview**

This document describes the online form and upload tool that NTIA will use to collect broadband availability data. Once you have filled out all the corresponding fields, please save this document and upload.

**2. Online Form and Upload Tool**

Question 1: Please submit the following general information about your organization. All fields are required.

**Organization Name** Click here to enter text.

**Organization Type** Click here to choose an item.

**For “Other,” please specify** Click here to enter text.

Question 2: Please provide contact information for an individual that can answer questions about your organization’s response. All fields are required.

**First Name** Click here to enter text.

**Last Name** Click here to enter text.

**Title**  Click here to enter text.

**Phone Number** Click here to enter text.

**Email Address** Click here to enter text.

Question 3: Please provide some general information about the broadband availability data you are submitting.

**Technology Type** *(check all that apply)*

Wireline

Wireless (Fixed)

Wireless (Mobile)

Wireless (Satellite)

**Geospatial Type** *(check all that apply)*

Coordinate (latitude/longitude)

Address

Address Range

Road Segment

Land Parcel

Shapefile

County

Census Block

Other, please specify: Click here to enter text.

Question 4: Please select the option that best aligns with the geographic scope of the data you are submitting.

**Geographic Scope** Click here to choose an item.

**For “Other,” please specify** Click here to enter text.

Question 5: Please briefly summarize the data you are submitting.

**Data Summary** Click here to enter text.

Question 6: Please briefly describe the fields or metadata associated with the broadband availability data that your organization is submitting. If you prefer, this can be attached to your submission using the file upload tool.

**Data Dictionary or Schema** Click here to enter text.

Question 7: Please provide any additional feedback or comments that you will believe will help NTIA understand and process your organization’s submission.

**Additional Comments** Click here to enter text.

Question 8: Please upload the file(s) containing your data submission.

| **Form Field** | **Field Type and Options** |
| --- | --- |
| Files | File Upload Dialog |

If you have any questions, please contact [nbam@ntia.gov](mailto:nbam@ntia.gov)

**Agency Disclosure Notice**: *This information collection is authorized by OMB control # 0660-0043. Public reporting burden for this collection of information is estimated to average 53 hours or 3,180 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to U.S. Department of Commerce, National Telecommunications and Information Administration, 1401 Constitution Ave. NW, Room 4626, Washington, DC 20230. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.*