ASSEMBLY STANDING COMMITTEE ON CORPORATIONS, AUTHORITIES, AND COMMISSIONS

NOTICE OF PUBLIC HEARING

POSTPONED

SUBJECT: ConnectALL

PURPOSE: To receive an update on the status of the ConnectALL initiative

Friday
November 21, 2025
10AM
Assembly Hearing Room
250 Broadway, 19th Floor
New York, New York 10007

ORAL TESTIMONY WILL BE BY INVITATION ONLY

As part of the State Fiscal Year 2022-2023 Enacted Budget, $300 million was allocated to establish the ConnectALL initiative, with the goal of expanding high-speed and reliable broadband internet services to all corners of New York State. As a result, the ConnectALL Office was created within the Urban Development Corporation to oversee the utilization of public funds for this purpose.

The purpose of this hearing is to receive an update on the status of the ConnectALL initiative and the efforts to provide reliable and affordable broadband to all New Yorkers. The Committee encourages testimony from stakeholders that may provide further insight into the application process, as well as the efficacy of ConnectALL program, in order to better understand the initiative.

Persons invited to present pertinent testimony to the Committee at the above hearing should complete and return the enclosed reply form as soon as possible. It is important that the reply form be fully completed and returned so that persons may be notified in the event of emergency postponement or cancellation.

Oral testimony will be limited to ten (10) minutes. In preparing the order of witnesses, the Committee will attempt to accommodate individual requests to speak at particular times in view of special circumstances. These requests should be made on the attached reply form or communicated to the staff as early as possible.

Ten copies of any prepared testimony should be submitted at the hearing registration desk. The Committee would appreciate advance receipt of prepared statements.

Attendees and participants at any legislative public hearing should be aware that these proceedings are video recorded. Their likenesses may be included in any video coverage shown on television or the internet.

In order to further publicize these hearings, please inform interested parties and organizations of the Committee's interest in hearing testimony from all sources.

In order to meet the needs of those who may have a disability, the Senate and Assembly, in accordance with its policy of non-discrimination on the basis of disability, as well as the 1990 Americans with Disabilities Act (ADA), have made facilities and services available to all individuals with disabilities. For individuals with disabilities, accommodations will be provided, upon reasonable request, to afford such individuals access and admission to Assembly facilities and activities.

Edward C. Braunstein
Member of Assembly
Chair
Standing Committee on Corporations, Authorities, and Commissions

PUBLIC HEARING REPLY FORM

Persons invited to present testimony at this public hearing are requested to complete this reply form **no later than Wednesday November 19, 2025,** and email or fax it to:

Elizabeth Buono
Analyst
Assembly Committee on Corporations, Commissions, and Authorities
Email: buonoe@nyassembly.gov
Phone: 518-455-4857
Fax: 518-455-7250

☐ I plan to attend the following public hearing on ConnectALL to be conducted by the Assembly Standing Committee on Corporations, Authorities, and Commissions on November 21, 2025.

☐ I have been invited to make a public statement at the hearing. My statement will be limited to ten minutes, and I will answer any questions which may arise. I will provide 10 copies of my prepared statement.

☐ I will address my remarks to the following subjects:

_____

_____

☐ I do not plan to attend the above hearing.

☐ I would like to be added to the Committee mailing list for notices and reports.

☐ I would like to be removed from the Committee mailing list.

☐ I will require assistance and/or handicapped accessibility information. **Please specify the type of assistance required:** _____
_____

NAME: _____

TITLE: _____

ORGANIZATION: _____

ADDRESS: _____

E-MAIL: _____

TELEPHONE: _____

FAX TELEPHONE: _____