



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **61504** | Service: **DTV** | Call **WXCW** | Channel: **32 (UHF)** |  
ID: | Sign:  
File **0000028559**  
Number:  
FRN: **0015050008** | Date **07/12**  
Submitted: **/2017**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>SUN BROADCASTING, INC.</b> Doing Business As: SUN BROADCASTING, INC.	James Schwartzel 2824 PALM BEACH BOULEVARD FORT MYERS, FL 33916 United States	+1 (239) 479-5524	Jim.Schwartzel@sbroadcast.com	Corporation

## Reimbursement Contact Information

### Reimbursement Contact Name and Information

Applicant	Address	Phone	Email
[Confidential]			

## Preparer Contact Information

### Preparer Contact Name and Information

Applicant	Address	Phone	Email
<b>Joseph Belisle</b> <i>Belisle Law Firm PA</i>	PO Box 970620 Miami, FL 33197 United States	+1 (305) 978-7675	joe@belislelaw.com

**Broadcaster Information and Transition Plan**

Question	Response
Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information.	Yes
Briefly describe transition plan	WXCW plans to relocate from current tower ASR: 1213076 to the WINK tower ASR: 1019724. The proposed antenna will side mount. Engineering studies have confirmed compliance with FCC coverage requirements. See attached.

**Transmitters**

Section	Question	Response
Transmitter Related Expenses	Do you have transmitter related expenses?	Yes

**Auxiliary Transmitter**

**Existing Transmitter Information**

Section	Question	Response
Existing Transmitter Description	Type of change	Retune Existing
	Use	Auxiliary (Backup)
	Ownership	Leased
	Owner	Ft Myers Broadcasting Co.
	Is this transmitter currently shared with another station?	Yes
	Is this transmitter currently in operating condition?	Yes
Existing Transmitter	Manufacturer	Comark

<b>Manufacturer and Type</b>	Model	LPTV-8000
	Year	2015
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	0.5 kW

**Facility ID's and Call Signs of all stations with whom the transmitter is shared.**

Facility ID	Call Sign
22093	WINK-TV

**Auxiliary Transmitter**

**Retuning Transmitter Costs**

Section	Question	Response
<b>New IOT Tubes</b>	Number of Tubes (including accessories) needed	N/A
<b>New Mask Filter</b>	Power	1.5 kW
	Other Power	N/A
<b>New Exciter</b>	Is a new exciter needed?	No

**Auxiliary Transmitter**

**Other Transmitter Costs**

Section	Question	Response
<b>Electrical Service</b>	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No
	Power	N/A
	Rigid Conduit and Wiring	No
	Size	N/A
	Length	N/A

	Other Electrical Service	No
	Description	N/A
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	No
	Type	N/A
	Size	N/A
	Other Size	N/A
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
<b>Channel 14 Costs</b>	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

**Auxiliary Transmitter** **Other Transmitter Cost Not Listed**  
Information not provided.

**Primary  
Transmitter**

**Existing Transmitter Information**

<b>Section</b>	<b>Question</b>	<b>Response</b>
<b>Existing Transmitter Description</b>	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	DCX Millennium
	Year	2002
	Type	Inductive Output Tube
	IOT Power Type	Single
	Power Capacity	30 kW

**Primary  
Transmitter**

**New Transmitter Costs**

Section	Question	Response
<b>New Transmitter</b>	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Manufacturer	
	Model	HPTV-PRLX-U16
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	27.5 kW
	Justification for New Transmitter	Manufacturer will not retune existing transmitter. (See attached)

**Primary  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
<b>Electrical Service</b>	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	Yes
	Transformer (480V)	Yes
	Power	150 kVA
	Rigid Conduit and Wiring	Yes
	Size	3 inches
	Length	50.0 feet
	Other Electrical Service	No

	Description	N/A
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	Yes
	Type	Cooling Only
	Size	5 tons
	Other Size	N/A
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	Yes
	Size	375.0 square feet
<b>Channel 14 Costs</b>	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

**Primary Transmitter**

**Other Transmitter Cost Not Listed**

Name	Description
<b>Removal</b>	Removal and disposal of old transmitter.
<b>Relocate Generator</b>	Move Generator to new location.
<b>Relocate UPS</b>	Move UPS to new location.

**Antennas**

Section	Question	Response
Antenna Related Expenses	Do you have antenna related expenses?	Yes

**Auxiliary  
Antenna****Existing Antenna Information**

Section	Question	Response
<b>Existing Antenna Description</b>	Type of change	Retune Existing
	Antenna Use	Auxiliary (Backup)
	Description of Use	Emergency Backup
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	Yes
	Is the existing antenna directional?	Yes
	Is antenna in operating condition?	Yes
<b>Existing Antenna Manufacturer and Type</b>	Is antenna located on or in close proximity to an antenna farm?	No
	Class	Class A
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Broadband Panel
	Number of Stations Supported	2
	Number of Panels	2
Design power capacity in use	100.0 %	



Lower Limit	470.00 MHz
Upper Limit	860.00 MHz
Other Antenna Type	N/A
ERP: (Effective Radiated Power) *****	1.6 kW
Manufacturer	Dielectric
Model	TUA-C2-01 /02M-T
Year	2015

**Facility ID's and Call Signs of all stations with whom the antenna is shared.**

Facility ID	Call Sign
22093	WINK-TV

**Auxiliary Antenna**

**Adjustment to Existing Antenna**

Section	Question	Response
<b>Sweep Test of Existing Antenna</b>	Do you need a sweep test of existing antenna?	No

**Auxiliary Antenna**

**Other Antenna Costs**

Section	Question	Response
<b>Combiner for Shared Antenna</b>	Do you need a Combiner for a Shared Antenna?	No
	Type	
	Number of channels supported	N/A
	Frequencies of channels supported	N/A
	Frequency	

**Auxiliary  
Antenna**

**Other Antenna Cost Not Listed**

Information not provided.

**Primary  
Antenna**

**Existing Antenna Information**

Section	Question	Response
<b>Existing Antenna Description</b>	Type of change	Purchase New
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	No
	Is the existing antenna directional?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	Yes
<b>Existing Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels	N/A
	Design power capacity in use	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	1000.0 kW

Manufacturer	
Model	TFU-30 DSC- R3P320BNT
Year	2002

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**Primary  
Antenna**

**New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	Yes
<b>New Antenna Manufacturer and Types</b>	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	Type	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels/Bays	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Design power capacity in use	N/A
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	900.0 kW
Manufacturer		

Model	TFU-30 DSC- R3P320BNT
Year	2002
Justification for New Antenna	WXCW plans to relocate to the WINK tower. This will avoid the need for interim facilities for WXCW. (See attached)

**Primary Antenna**

**Other Antenna Costs**

Section	Question	Response
<b>Combiner for Shared Antenna</b>	Do you need a Combiner for a Shared Antenna?	No
	Type	
	Number of channels supported	N/A
	Frequencies of channels supported	N/A
	Frequency	N/A
	Do you need a combiner output splitter /switcher for dual feed lines?	N/A
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	No
	Broadband or Single Channel?	N/A
	Feed Line Size	N/A
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power antenna?	No

<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	Yes
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes

**Primary  
Antenna**

**Other Antenna Cost Not Listed**

Information not provided.

<b>Transmission Line</b>	<b>Section</b>	<b>Question</b>	<b>Response</b>
		<b>Transmission Line Related Expenses</b>	Do you have transmission line related expenses?

**Auxiliary Transmission Line**  
**Existing Transmission Line**

<b>Section</b>	<b>Question</b>	<b>Response</b>
<b>Existing Transmission Line Description</b>	Type of change	Utilize Existing
	Use	Auxiliary (Backup)
	Description of Use	Emergency Backup
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing transmission line shared with another station or stations?	Yes
	Is Transmission Line in operating condition?	Yes
<b>Existing Transmission Line Manufacturer and Type</b>	Manufacturer	Dielectric
	Type	Flexible Foam
	Diameter	1 5/8 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	200 feet per run



**Facility ID's and Call Signs of  
all stations with whom the  
transmission line is shared.**

Facility ID	Call Sign
22093	WINK-TV

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**Auxiliary**      **Other Transmission Line Expenses Not Listed**  
**Transmission**      information not provided.  
**Line**

**Primary  
Transmission  
Line**

**Existing Transmission Line**

Section	Question	Response
<b>Existing Transmission Line Description</b>	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing transmission line shared with another station or stations?	No
	Is Transmission Line in operating condition?	Yes
<b>Existing Transmission Line Manufacturer and Type</b>	Manufacturer	
	Type	Rigid
	Diameter	8 3/16 inches
	Other Diameter	N/A
	Segment Length	19 3/4 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1550 feet per run

**Primary  
Transmission  
Line**      **New Transmission Line**

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Rigid
	Diameter	6 1/8 inches
	Other Diameter	N/A
	Segment Length	20 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1400 feet per run
	Justification for New Transmission Line	Existing stick length not compatible with new channel assignment.

**Primary  
Transmission  
Line**      **Other Transmission Line Expenses Not Listed**

Information not provided.

**Tower Equipment And Rigging Costs**

Section	Question	Response
Tower Equipment or Rigging Costs Changes	Do you have tower equipment or rigging costs changes?	Yes

**Primary Tower**

**Add Tower**

Section	Question	Response
<b>Existing Tower Description</b>	Type of change	Move Equipment
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	Is this tower consider Complex?	No
	Is this tower currently shared with any other stations?	Yes
	One or more FM, AM or TV radio broadcaster(s)	Yes
	Others Types of Users	No
	Is tower documented for structural analysis?	Yes
	Is tower compliant with Rev G?	Unknown
<b>Existing Tower Structure Registration</b>	Do you have a tower registration number?	Yes
	ASR Number	1213076
<b>Coordinates (NAD83 (North American Datum of 1983))</b>	Latitude (NAD83)	26° 47' 08.7" N-
	Longitude (NAD83)	081° 47' 45.9" W-
	Overall Structure Height	1515.07 feet
	Support Structure Height	1455.03 feet
	Ground Elevation Above Mean Sea Level (AMSL)	28.87 feet
	Structure Type	GTOWER - Guyed

	Structure Used for Communication Purposes
Tower Owner	American Towers, LLC
Date Constructed	02/15/2002

**FM, AM or TV radio  
broadcasters. Facility ID's,  
Call Signs and Services of  
other broadcast stations with  
whom the tower is shared**

Facility ID	Call Sign	Service
71580	WRXY-TV	DTV
174244	WMYE	FM

**Primary  
Tower**

**Tower Rigging Costs**

Section	Question	Response
Tower Rigging Costs	Complex Tower	N/A
Helicopter Services Required	Are helicopter services required?	No

**Primary  
Tower**

**Other Tower Expenses Not Listed**

Name	Description
Minor Modifications	Structural modifications upon removal of antenna/line
Equipment removal	Removal of pre-transition antenna and line

**Auxiliary Tower**

**Add Tower**

Section	Question	Response
<b>Existing Tower Description</b>	Type of change	Move Equipment
	Tower Use	Auxiliary (Backup)
	Description of Use	Emergency Backup
	Ownership	Leased
	Is this tower consider Complex?	No
	Is this tower currently shared with any other stations?	Yes
	One or more FM, AM or TV radio broadcaster(s)	Yes
	Others Types of Users	No
	Is tower documented for structural analysis?	Yes
	Is tower compliant with Rev G?	Unknown
<b>Existing Tower Structure Registration</b>	Do you have a tower registration number?	No
	ASR Number	
<b>Coordinates (NAD83 ( North American Datum of 1983))</b>	Latitude (NAD83)	26° 39' 05.3" N-
	Longitude (NAD83)	081° 51' 18.3" W-
	Overall Structure Height	201.00 feet
	Support Structure Height	201.00 feet
	Ground Elevation Above Mean Sea Level (AMSL)	5.90 feet
	Structure Type	UTOWER - Unguyed - Free Standing Tower
	Tower Owner	Ft. Myers

	Broadcasting Co.
Date Constructed	03/23/1954

**FM, AM or TV radio  
broadcasters. Facility ID's,  
Call Signs and Services of  
other broadcast stations with  
whom the tower is shared**

Facility ID	Call Sign	Service
22093	WINK-TV	DTV

**Auxiliary  
Tower**

**Tower Rigging Costs**

Section	Question	Response
Tower Rigging Costs	Complex Tower	N/A
Helicopter Services Required	Are helicopter services required?	No

**Auxiliary  
Tower**

**Other Tower Expenses Not Listed**

Information not provided.

**Outside Professional Services Costs**

Section	Question	Response
<b>Outside Project Management Services</b>	Do you require outside project management services?	Yes
	Number of Hours	80
	Explanation	Oversight of antenna and line removal at pre-transition transmitter facility.
<b>Outside RF consulting Engineering Services</b>	Perform engineering study for new channel assignment and antenna development	Yes
	Prepare engineering section of Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	1
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
<b>Attorney and Other Outside Consulting Services</b>	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes



	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	1
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	No
	Negotiation of Lease and other Matter for Shared Locations	Yes
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	No
	RF exposure measurements	No
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

**Outside  
Professional  
Services  
Costs**

**Other Professional Services Expenses Not Listed**

Information not provided.

**Other Expenses**

Section	Question	Response
<b>AM Pattern Disturbance</b>	Is an Impact Study needed?	No
	Is Remediation needed?	No
<b>Facility Expenses</b>	Name	N/A
	Other Distributed Transmission System Expenses Not listed	N/A
	Name	N/A
	Is Notification of a Medical Facility required as a result of DTV broadcasting?	Yes
<b>Permit and Filing Costs</b>	Local Zoning	No
	Non-zoning permits	Yes
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	Yes
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	Yes
<b>Other Miscellaneous Expenses</b>	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	Yes
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	No
	Does this relocation require Equipment Storage?	No
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	Yes
	Does this relocation require MVPD Notification of a Channel Change?	Yes

**Other  
Expenses**

**Other Expenses Not Listed**

<b>Name</b>	<b>Description</b>
<b>Tower Space Rental</b>	To facilitate operation during tower work
<b>Project Oversight</b>	Employee costs for planning, coordination and supervision.

**Cost Information**

**Transmitters**

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Primary Transmitter HPTV-PRLX-U16</b>	<b>\$1,150,600.00</b>	<b>\$1,050,578.00</b>		<b>\$0.00</b>	
Relocate UPS	<i>\$25,000.00</i>	\$25,000.00	Electrical connections: 20,000. Moving expense, 5,000. Estimates.	N/A	N/A
5 Ton system	\$20,250.00	\$19,250.00	N/A	N/A	N/A
Other -- Building Addition Size: 375.0	<i>\$30,000.00</i>	\$30,000.00	\$80 per sq. foot estimate.	N/A	N/A
Relocate Generator	<i>\$42,000.00</i>	\$42,000.00	Estimated installation cost of \$37,000 and moving cost of \$5,000.	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	\$947,000.00	\$851,278.00	N/A	\$0.00	N/A
Switchgear - industrial 800 amp	\$38,200.00	\$36,300.00	N/A	N/A	N/A
Transformer 3 phase/480v - 150 KVA	\$25,550.00	\$24,300.00	N/A	N/A	N/A
3" Rigid	\$2,600.00	\$2,450.00	N/A	N/A	N/A

Conduit and  
Wiring (Cost  
per foot)

Removal	<i>\$20,000.00</i>	\$20,000.00	Removal and disposal of existing transmitter	N/A	N/A
<b>Auxiliary Transmitter LPTV-8000</b>	<b>\$108,230.00</b>	<b>\$21,205.00</b>		<b>\$0.00</b>	
UHF and VHF - minor banding issues	\$105,200.00	\$21,205.00	N/A	N/A	N/A
1.5 kW mask filter	\$3,030.00	\$0.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$1,258,830.00</b>	<b>\$1,071,783.00</b>	N/A	<b>\$0.00</b>	N/A
<b>Total for all systems</b>	<b>\$2,460,975.00</b>	<b>\$2,069,592.00</b>	N/A	<b>\$0.00</b>	N/A

## Components

Information not provided.

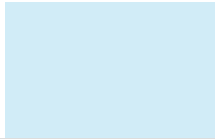
**Cost Information**

**Antennas**

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Primary Antenna TFU-30 DSC-R3P320BNT</b>	<b>\$249,380.00</b>	<b>\$248,790.00</b>		<b>\$0.00</b>	
UHF - High Power, Side Mount, basic slot antenna, 900 kW input, directional,, elliptically or circularly polarized	<i>\$237,390.00</i>	\$237,390.00	Per proposal. See attached.	N/A	N/A
Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)	\$5,260.00	\$5,000.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
<b>Auxiliary Antenna TUA- C2-01/02M-T</b>	<b>\$2,520.00</b>	<b>\$0.00</b>		<b>\$0.00</b>	
UHF - Lower Power Side Mount, Class A broadband panel (cost per panel)	\$2,520.00	\$0.00	N/A	N/A	N/A
UHF – Broadband Panel, Side Mount Auxiliary	<i>\$0.00</i>	\$0.00	N/A	N/A	N/A

/Interim, 2  
horizontally  
polarized



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<b>Sub-total</b>	\$251,900.00	\$248,790.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$2,460,975.00	\$2,069,592.00	N/A	\$0.00	N/A

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### Components

Information not provided.

**Cost  
Information**

**Transmission Line**

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Primary Transmission Line</b>	<b>\$282,800.00</b>	<b>\$214,264.00</b>		<b>\$0.00</b>	
Rigid Transmission Line - copper, 6 1/8"	\$282,800.00	\$214,264.00	N/A	N/A	N/A
<b>Auxiliary Transmission Line</b>	<b>\$0.00</b>	<b>\$0.00</b>		<b>\$0.00</b>	
<b>Sub-total</b>	<b>\$282,800.00</b>	<b>\$214,264.00</b>	N/A	<b>\$0.00</b>	N/A
<b>Total for all systems</b>	<b>\$2,460,975.00</b>	<b>\$2,069,592.00</b>	N/A	<b>\$0.00</b>	N/A

**Components**

Information not provided.



**Cost Information**

**Tower Equipment and Rigging Costs**

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Auxiliary Tower UTOWER</b>	<b>\$84,200.00</b>	<b>\$0.00</b>		<b>\$0.00</b>	
Short Tower (less than 500')	\$84,200.00	\$0.00	N/A	N/A	N/A
<b>Primary Tower GTOWER</b>	<b>\$435,500.00</b>	<b>\$389,450.00</b>		<b>\$0.00</b>	
Tall Tower (greater than 500')	\$210,500.00	\$164,450.00	As per proposal from tower erector company.	N/A	N/A
Equipment removal	<i>\$75,000.00</i>	\$75,000.00	Estimate to remove pre-transition antenna and line upon advice from tower company.	N/A	N/A
Minor Modifications	<i>\$150,000.00</i>	\$150,000.00	Tower company advised we make this allowance as modifications expected to be needed upon removal of antenna and line.	N/A	N/A
<b>Sub-total</b>	<b>\$519,700.00</b>	<b>\$389,450.00</b>	N/A	<b>\$0.00</b>	N/A
<b>Total for all systems</b>	<b>\$2,460,975.00</b>	<b>\$2,069,592.00</b>	N/A	<b>\$0.00</b>	N/A

## **Components**

Information not provided.

**Cost Information**

**Outside Professional Services**

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Outside Professional Services</b>	<b>\$55,455.00</b>	<b>\$53,620.00</b>		<b>\$0.00</b>	
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Project management of the transition	\$12,640.00	\$13,370.00	Estimated cost based on time needed to decommission the pre-transition transmitter site.	N/A	N/A
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main),	\$3,155.00	\$3,000.00	N/A	N/A	N/A

Construction  
Permit  
Application

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RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit Application	\$2,105.00	\$2,000.00	N/A	N/A	N/A
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Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
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RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
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Prepare request for Special Temporary Authorization	\$2,050.00	\$1,500.00	N/A	N/A	N/A
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Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	N/A	N/A
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Attorney Fees	\$4,210.00	\$4,000.00	N/A	N/A	N/A
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- Aux Antenna,  
prepare and  
File Form  
2100  
Construction  
Permit or  
License  
Application

Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,250.00	N/A	N/A	N/A
Attorney Fees - Negotiation of lease and other matters for shared locations	\$4,210.00	\$4,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,500.00	N/A	N/A	N/A
<b>Sub-total</b>	\$55,455.00	\$53,620.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$2,460,975.00	\$2,069,592.00	N/A	\$0.00	N/A

### Components

Information not provided.

**Cost Information**

**Other Expenses**

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Other Expenses</b>	<b>\$92,290.00</b>	<b>\$91,685.00</b>		<b>\$0.00</b>	
Tower Space Rental	<i>\$50,000.00</i>	\$50,000.00	Two month rental of tower space during transition, comparable to rent on existing tower.	N/A	N/A
MVPD Notification of Channel Change	<i>\$1,500.00</i>	\$1,500.00	N/A	N/A	N/A
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A	N/A	N/A
Non-zoning permits	<i>\$12,000.00</i>	\$12,000.00	Space preparation, electrical, tower work.	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$5,000.00</i>	\$5,000.00	Excess cost above salvage for antenna, line and misc. hardware disposal.	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$1,000.00</i>	\$1,000.00	N/A	N/A	N/A

Project Oversight	<b><i>\$9,600.00</i></b>	\$9,600.00	Employee cost to cover planning, coordination and oversight.	N/A	N/A
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,070.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	N/A	N/A
<b>Sub-total</b>	\$92,290.00	\$91,685.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$2,460,975.00	\$2,069,592.00	N/A	\$0.00	N/A

## Components

Information not provided.

**Cost Information** **Grand Total**

	<b>Predetermined Cost Estimate</b>	<b>Estimated Cost</b>	<b>Actual Cost</b>
<b>Total for all systems</b>	\$2,460,975.00	\$2,069,592.00	\$0.00

**Reimbursement Status**

<b>Question</b>	<b>Response</b>
The facility has ceased operating on its pre-auction channel.	No
Construction of final facilities or all necessary modifications are complete.	No
All receipts for reimbursement have been submitted no further costs are expected to be incurred. Note this will lock the Form 399 from further editing and begin close-out procedures with the Fund Administrator.	No



Certification	Section	Question	Response
	<p><b>Submission of Estimated Expenses Statements</b></p>	<p>WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.</p>	
		<ol style="list-style-type: none"> <li>1. The Authorized Person signing below certifies that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity.</li> <li>2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li>3. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.</li> <li>4. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (broadcasters) or to continue to carry the</li> </ol>	

signal of a broadcaster that changes channels (MVPD).

5. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
6. The above-named entity certifies that it will maintain and provide to the Commission detailed records, including receipts, of all costs eligible for reimbursement actually incurred.
7. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.
8. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.

I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.

**James W. Schwartzel**  
*President*

07/12/2017

Certification	Section	Question	Response
	<b>Submission of Actual Cost Documentation Statements</b>	<p>WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).</p>	
		<ol style="list-style-type: none"> <li>1. The Authorized Person signing below certifies and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity.</li> <li>2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.</li> <li>3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li>4. The above-named entity acknowledges the submission of the information herein</li> </ol>	

creates no obligation on the part of the government to pay any amount.

5. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (full power and Class A stations) and/or otherwise modify a television station's facility as a result of the spectrum repack (LPTV/TV Translator stations); or to minimize service disruption resulting from a repacked television station (FM stations); or to continue to carry the signal of a broadcaster that changes channels (MVPD) .
6. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
7. The above-named entity certifies that the cost information /documents submitted reflect costs actually incurred.
8. The above-named entity acknowledges that overpayments or payments in error

<p>must be promptly refunded to the Commission.</p> <p>9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested.</p>	
<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p><b>James W. Schwartzel</b> <i>President</i></p> <p>07/12/2017</p>

**Attachments**