

Federal Communications Commission

#### (REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility <b>55049</b> ID:	Service: DTV	Call Sign:	KASY-TV	Channel: 36 (UHF)
File <b>000002</b> Number:	8309			
FRN: 0004284899	Date Submitted:	07/12 /2017		

#### Applicant Name, Type, and Contact Information

#### Applicant Information

Applicant	Address	Phone	Email	Applicant Type
KASY-TV LICENSEE LLC Doing Business As: KASY- TV LICENSEE LLC	John S. Viall, Jr. 6 LILLIAN DRIVE N. READING, MA 01864 United States	+1 (978) 664-0443	JVIALL@AOL. COM	Limited Liability Company

#### Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer	Preparer Contact Name and Information			
Contact Information	Applicant	Address	Phone	Email
	<b>Jessica Nyman , Esq .</b> FCC Counsel Pillsbury Winthrop Shaw Pittman LLP	Jessica Nyman 1200 Seventeenth Street, NW Washington, DC 20036 United States	+1 (202) 663-8810	jessica. nyman@pillsburylaw. com

Broadcaster	Question	Response
Information and Transition Plan	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	Replace transmitter using existing antenna and line. See attachment.

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

Primary	Existing Transmitter Information				
Transmitter	Section	Question	Response		
	Existing Transmitter Description	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		
	Existing Transmitter	Manufacturer			
	Manufacturer and Type	Model	CTT-U- DCX-1H		
		Year	2002		
		Туре	Inductive Output Tube		
		IOT Power Type	Single		
		Power Capacity	20 kW		

#### **Existing Transmitter Information**

Primary	New Transmitter Costs				
Transmitter	Section	Question	Response		
	New Transmitter	Use	Primary (Main)		
		Change Type	Purchase New		
		Is this a request for upgraded equipment?	No		
		Manufacturer			
		Model	TBD		
		Transmitter Type	Inductive Output Tube		
		IOT Power Type	Single		
		Power capacity	25 kW		
		Justification for New Transmitter	The manufacturer of the existing IOT transmitter advises that the transmitter cannot be re- tuned to the assigned channel. A new Comark Paragon MSDC IOT transmitter is the basis for a replacement as suggested by the FCC. See attachment.		

Other Transmitter Costs				
Section	Question	Response		
Electrical Service	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	100.0 feet		
	Other Electrical Service	No		
	Description	N/A		
HVAC Service	Does the replacement transmitter require HVAC Service?	No		
	Туре	N/A		
	Size	N/A		
	Other Size	N/A		
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leashold improvement?	No		
	Size	N/A		
Channel 14 Costs	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		
	Section Electrical Service	SectionQuestionElectrical ServiceService Entrance (3 phases 800A 208V)Switchgear (industrial 800 amp)Transformer (480V)PowerRigid Conduit and WiringSizeLengthOther Electrical ServiceDescriptionHVAC ServiceTypeSizeSizeCother SizeOther SizeTypeSize		

Primary	Other Transmitter Cost Not Listed		
Transmitter	Name	Description	
	Additional Interior RF System	Interior RF System Existing Transmitter to Interim Transmission line	

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

### Existing Antenna Information

Primary

Antenna	Section	Question	Response
	Existing Antenna Description	Type of change	Retune Existing
		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?	Yes
		Is the existing antenna directional?	Yes
		Is antenna in operating condition?	Yes
		Is antenna located on or in close proximity to an antenna farm?	No
	Existing Antenna	Class	Full Power
	Manufacturer and Type	Mounting	Top Mount
		Antenna position in stack	Тор
		Polarization	Horizontal
		Туре	Broadband Panel
		Number of Stations Supported	2
		Number of Panels	40
		Design power capacity in use	100.0 %
		Lower Limit	470.00 MHz

Upper Limit	692.00 MHz
Other Antenna Type	N/A
ERP: (Effective Radiated Power)	245.0 kW
Manufacturer	Dielectric
Model	TUD-05-8 /40H-T
Year	2007

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

Facility ID	Call Sign
55528	KNME-TV

## Primary Adjustment to Existing Antenna

Antenna	Section	Question	Response
	Sweep Test of Existing Antenna	Do you need a sweep test of existing antenna?	Yes

# Primary Other Antenna Costs

Antenna Section Question Response **Combiner for Shared** Do you need a Combiner for a Shared Yes Antenna Antenna? New Туре 2 Number of channels supported Frequencies of channels supported RF channel Frequency N/A

Enter a list of RF channel numbers.

35
36

Primary Antenna	Other Antenna Cost Not Listed		
	Name	Description	
	Rigging	Rigging for sweep tests and possible elbow complex replacement	

Transmissior	n Seffien	Question	Response
	Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

# Existing Transmission Line Primary Existing Transmission

sior	Section	Question	Response
	Existing Transmission Line Description	Type of change	Utilize Existing
		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	
	Existing Transmission Line Manufacturer and	Manufacturer	Dielectric
Type	Туре	Rigid	
	Diameter	7 3/16 inches	
	Other Diameter	N/A	
		Segment Length	20 inches
		Other Segment Length	N/A
		Number of parallel runs	1
		Length	290 feet per run

Primary Other Transmission Line Expenses Not Listed		
Transmissio	n Line	Description
	Sweep Tests	Sweep tests for tra

weep Tests	Sweep tests for transmission line
------------	-----------------------------------

Tower	Section	Question	Response
Equipment And Rigging Costs	Tower Equipment or Rigging Costs Changes	Do you have tower equipment or rigging costs changes?	No

Outside	Section	Question	Response
Professional	Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
		Number of Hours	173
	Outside RF consulting	Explanation	It will be necessary to schedule and coordinate multiple vendors, complete progress reports, and update Schedule 399. Station does not have available personnel or personnel trained in project management for such complex projects.
	Outside RF consulting Engineering Services	Perform engineering study for new channel assignment and antenna development	Yes
		Prepare engineering section of Form FCC Construction Permit Application	Yes
		For Auxiliary Facility	No
		For Main Facility	Yes
		Prepare engineering section of Form FCC License to Cover Application	Yes

	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	No
	Quantity	N/A
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
Attorney and Other Outside Consulting	Prepare and file Form FCC Construction Permit Application	Yes
Services	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	No
	Quantity	N/A
	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

RF Field Engineering Services	Comprehensive coverage verification via field study	No
	RF exposure measurements	No
	Additional Field Engineering Service	Yes
	Number of Days	9
	Justification	It will be necessary to survey the site, plan the equipment, develop specifications for purchasing, and oversee multiple vendor RF projects. Station does not have available personnel or personnel trained in such services.

Outside	Other Professional Services Expenses Not Listed				
Professional	Services Costs	Description			
	American Tower Services	Engineering and management fees from American Tower. KASY share only.			

Other	Section	Question	Response
Expenses	AM Pattern Disturbance	Is an Impact Study needed?	No
		Is Remediation needed?	No
	Facility Expenses	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
	Permit and Filing Costs	Local Zoning	No
		Non-zoning permits	Yes
		BLM or NFS Coordination	No
		FCC Construction Permit Minor Change	No
		FCC License to Cover Application	No
		FCC Special Temporary Authority Application	No
	Other Miscellaneous Expenses	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?	Yes
		Does this relocation require Equipment Storage?	Yes
		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			
	Name	Description		
	Sales Tax	Sales tax on goods and service		

#### Transmitters

#### Cost Information

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Transmitter TBD	\$786,950.00	\$1,071,051.00		\$0.00	
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 Conduit and Wiring (Cost per foot)	\$5,200.00	\$4,900.00	N/A	N/A	N/A
Additional Interior RF System	\$140,000.00	\$140,000.00	N/A	N/A	N/A
Single IOT system (25 kW)	\$578,000.00	\$865,551.00	The purchase price of the new transmitter is based on a Proposal from Comark for a 25 kW MSDC IOT as suggested by the FCC. See attachment.	N/A	N/A
Sub-total	\$786,950.00	\$1,071,051.00	N/A	\$0.00	N/A
Total for all systems	\$1,701,680.00	\$1,434,077.00	N/A	\$0.00	N/A

#### Antennas

#### Cost Information

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Antenna TUD- 05-8/40H-T	\$713,830.00	\$165,500.00		\$0.00	
Rigging	\$68,300.00	\$68,300.00	KASY share of costs to install new combiner based on quote from American Tower.	N/A	N/A
UHF - High Power Top Mount (200- 1000 kW), Two Station broadband panel antenna, horizontally polarized	\$547,000.00	\$0.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
New combiner, cost per channel (without antenna)	\$84,200.00	\$83,400.00	Quote from American Tower for KASY's share of new combiner expenses.	N/A	N/A

Elbow complex, single channel, at antenna input, per 3 1/8. feedline (if needed)	\$7,600.00	\$7,400.00	N/A	N/A	N/A
Sub-total	\$713,830.00	\$165,500.00	N/A	\$0.00	N/A
Total for all systems	\$1,701,680.00	\$1,434,077.00	N/A	\$0.00	N/A

#### **Transmission Line**

#### Cost Information

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
Primary Transmission Line	\$6,400.00	\$6,400.00		\$0.00	
Sweep Tests	\$6,400.00	\$6,400.00	N/A	N/A	N/A
Sub-total	\$6,400.00	\$6,400.00	N/A	\$0.00	N/A
Total for all systems	\$1,701,680.00	\$1,434,077.00	N/A	\$0.00	N/A

#### Components

# Cost Tower Equipment and Rigging Costs

**Information** Information not provided.

#### **Outside Professional Services**

#### Cost Information

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Outside Professional Services	\$98,450.00	\$95,626.00		\$0.00	
Project management of the transition	\$27,334.00	\$25,950.00	N/A	N/A	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	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), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	N/A	N/A

Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	N/A	N/A
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
Additional Field Engineering Service, 9 Days	\$18,000.00	\$18,000.00	N/A	N/A	N/A
American Tower Services	\$23,926.00	\$23,926.00	KASY share of costs for American Tower services: engineering, permitting, project management. Based on American Tower Quote.	N/A	N/A

Sub-total	\$98,450.00	\$95,626.00	N/A	\$0.00	N/A
Total for all systems	\$1,701,680.00	\$1,434,077.00	N/A	\$0.00	N/A

#### **Other Expenses**

#### Cost Information

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Other Expenses	\$96,050.00	\$95,500.00		\$0.00	
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	N/A	N/A
Non-zoning permits	\$0.00	\$0.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$5,000.00	\$5,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	\$5,000.00	\$5,000.00	N/A	N/A	N/A
Equipment Storage	\$5,000.00	\$5,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	\$3,500.00	\$3,500.00	Costs to produce spots and crawls for viewer notification.	N/A	N/A
MVPD Notification of Channel Change	\$2,000.00	\$2,000.00	N/A	N/A	N/A
Sales Tax	\$64,000.00	\$64,000.00	Sales tax for goods and services based on NM tax rates.	N/A	N/A

Sub-total	\$96,050.00	\$95,500.00	N/A	\$0.00	N/A
Total for all systems	\$1,701,680.00	\$1,434,077.00	N/A	\$0.00	N/A

Cost Information	Grand Total				
	Predetermined Cost Estimate Estimated Cost Ac		Actual Cost		
	Total for all systems	\$1,701,680.00	\$1,434,077.00	\$0.00	

Reimbursem	entestiatus	Response
	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
	Submission of Estimated Expenses Statements	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.	
		<ol> <li>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>The above-named</li> </ol>	
		entity acknowledges that all certifications and attached documentation are considered material representations.	
		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.	

- 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 signal of a broadcaster that changes channels (MVPD).
- 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.	John S. Viall <i>Manager</i> 07/12/2017

#### Attachments