

Federal Communications Commission

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

			-		
Facility	61003	Service: DTV	Call	WEBA-TV	Channel: 21 (UHF)
ID:			Sign:		
File 0000028326					
Number:					
FRN: 000	01861160	Date	03/12		
		Submitted:	/2018		

Applicant Name, Type, and Contact Information

Applicant Information

Applicant	Address	Phone	Email	Applicant Type
SOUTH CAROLINA	Mark Jahnke	+1	mjahnke@scetv.	Government
EDUCATIONAL TV	1041 GEORGE	(803)	org	Entity
COMMISSION	ROGERS	737-		
Doing Business As:	BOULEVARD	3486		
SOUTH CAROLINA	COLUMBIA,			
EDUCATIONAL TV	SC 29201			
COMMISSION	United States			

Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer Contact Name and Information Preparer Contact Applicant Address Phone Email Information **Robert Gehman** Robert Gehman +1 (352) bob@kesslerandgehman. ConsultingEngineer 507 NW 60 332-3157 com Kessler and Gehman Street Associates, Inc. Suite D Gainesville, FL 32607 **United States**

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.	Νο
	Briefly describe transition plan	Replace transmitter using existing antenna and line. See attached.

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	Diamond	
		Year	2008	
		Туре	Solid State	
		Solid State Cooling	Air Cooled	
		Solid State Power Capacity	5 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	Solid State		
		Solid State Cooling	Air Cooled		
		Solid State Power capacity	5.5 kW		
		Justification for New Transmitter	The manufacturer of the existing transmitter advises that the transmitter cannot be retuned to the assigned channel. See attachment.		

Primary	Other Transmitter Costs	sts			
Transmitter	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

Primary Transmitter	Other Transmitter Cost Not Listed		
	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?	No
		Is the existing antenna directional?	Yes
		Is antenna in operating condition? Is antenna located on or in close proximity to an antenna farm?	Yes
			No
	Existing Antenna	Class	Full Power
	Manufacturer and Type	Mounting	Top Mount
		Antenna position in stack	Not in Stack
		Polarization	Horizontal
		Туре	Broadband Panel
		Number of Stations Supported	1
		Number of Panels	48
		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)	427.0 kW
Manufacturer	Dielectric
Model	TUF-C4SP- 12/48-1-T
Year	2008

Primary Adjustment to Existing Antenna

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

Primary Other Antenna Costs

Antenna

Antenna	Section	Question	Response
	Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	No
		Туре	_
		Number of channels supported	N/A
		Frequencies of channels supported	N/A
		Frequency	_

Primary Other Antenna Cost Not Listed

Antenna Information not provided.

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

Existing Transmission Line Primary Existing Transmission

smissio	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
Existing Transmission Line Manufacturer and Type		Is the existing transmission line shared with another station or stations?	No
		Is Transmission Line in operating condition?	Yes
	-	Manufacturer	Dielectric
		Туре	Rigid
	Diameter	6 1/8 inches	
		Other Diameter	N/A
		Segment Length	Other
		Other Segment Length	19.417 feet
		Number of parallel runs	1
		Length	800 feet per run

Primary	Other Transmission Line Expenses Not Listed		
Transmissic	n Line	Description	
	Sweep Tests	Sweep tests to confirm transmission line for	

new channel

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

marv	Existing	Tower
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Primary Tower	Existing Tower			
	Section	Question	Response	
	Existing Tower Description	Type of change	Modify Existing	
		Tower Use	Primary (Main)	
		Description of Use	N/A	
		Ownership	Owned	
		Is this tower consider Complex?	No	
		Is this tower currently shared with any other stations?	No	
		One or more FM, AM or TV radio broadcaster(s)	N/A	
		Others Types of Users	N/A	
		Is tower documented for structural analysis?	No	
		Is tower compliant with Rev G?	No	
	Existing Tower Structure	Do you have a tower registration number?	No	
	Registration	ASR Number		
	Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	33° 11' 16.0" N-	
		Longitude (NAD83)	081° 23' 49.5" W-	
		Overall Structure Height	798.55 feet	
		Support Structure Height	747.69 feet	
		Ground Elevation Above Mean Sea Level (AMSL)	229.98 feet	

	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	South Carolina Education
	Date Constructed	05/26/2017

Primary Tower Section Costs

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	No study needed
Tower Reinforcements	Please select whether tower reinforcements are needed:	No reinforcements needed

Primary Tower Rigging Costs

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

Primary Other Tower Expenses Not Listed

Tower Information not provided.

Outside	Section	Question	Response
Professional	Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
		Number of Hours	102
		Explanation	It will be necessary to schedule and coordinate multiple vendors and complete progress reports. 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	Yes
		Quantity	1

	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	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	No
	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	10

It will be necessary to plan the installation, develop specifications for purchasing, and perform final inspections of this RF project. Station does not have	necessary to plan the installation, develop specification for purchasing, and perform final inspections of this RF project. Station does not have available personnel or
available personnel or personnel	trained in

Other Professional Services Expenses Not Listed Professional Services rCostsided.

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	No
		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?	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 Not Listed

Expenses Information not provided.

Transmitters

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 Transmitter TBD	\$445,450.00	\$430,500.00		\$0.00	
UHF - Air Cooled Solid State Transmitter 4 - 6 kW	\$236,500.00	\$225,000.00	N/A	\$0.00	N/A
Additional Interior RF System	\$140,000.00	\$140,000.00	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
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
Sub-total	\$445,450.00	\$430,500.00	N/A	\$0.00	N/A
Total for all systems	\$1,038,756.00	\$582,050.00	N/A	\$9,361.49	N/A

Components

Actual Information	
Description	File Name

Transmitter 4 - 6 kW	Component Description: Amount:	Transmitter 50% Down Payment \$105,509.86
Additional Interior RF System	Information not provided.	
3" Rigid Conduit and Wiring (Cost per foot)	Information not provided.	
Switchgear - industrial 800 amp	Information not provided.	
Transformer 3 phase/480v - 150 KVA	Information not provided.	

Antennas

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 Antenna TUF- C4SP-12/48-1-T	\$266,030.00	\$18,100.00		\$0.00	
Elbow complex, single channel, at antenna input, per 6 1 /8. feedline (if needed)	\$12,300.00	\$11,700.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
UHF - High Power Top Mount (200- 1000 kW), One station antenna, horizontally polarized	\$247,000.00	\$0.00	N/A	N/A	N/A
Sub-total	\$266,030.00	\$18,100.00	N/A	\$0.00	N/A
Total for all systems	\$1,038,756.00	\$582,050.00	N/A	\$9,361.49	N/A

Components

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	\$1,038,756.00	\$582,050.00	N/A	\$9,361.49	N/A

Components

Tower Equipment and Rigging Costs

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 Tower TOWER	\$210,500.00	\$20,000.00		\$0.00	
Tall Tower (greater than 500')	\$210,500.00	\$20,000.00	Rigging to replace elbow complex and/or tune elbow complex	N/A	N/A
Sub-total	\$210,500.00	\$20,000.00	N/A	\$0.00	N/A
Total for all systems	\$1,038,756.00	\$582,050.00	N/A	\$9,361.49	N/A

Components

Outside Professional Services

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
Outside Professional Services	\$66,826.00	\$64,050.00		\$9,361.49	
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$2,500.00	N/A
Additional Field Engineering Service, 10 Days	\$20,000.00	\$20,000.00	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
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 - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	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
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$3,250.00	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
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Project management of the transition	\$16,116.00	\$15,300.00	N/A	\$3,611.49	N/A
Prepare request for Special Temporary Authorization	\$2,050.00	\$1,500.00	N/A	N/A	N/A
Sub-total	\$66,826.00	\$64,050.00	N/A	\$9,361.49	N/A
Total for all	\$1,038,756.00	\$582,050.00	N/A	\$9,361.49	N/A

Components

Actual Information	
Description	File Name

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Component Description: Amount:	WEBA - Prepare CP Application \$2,500.00
Additional Field Engineering Service, 10 Days	Information not provided.	
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.	
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.	
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Information not provided.	
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.	
Perform engineering study for new channel assignment and antenna development	Component Description: Amount:	WEBA - Engineering study for new channel and antenna development \$3,250.00
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.	
Prepare and or review reimbursement form	Information not provided.	

Component Description:	WEBA Project
	Management Jul-
	Dec 2017
Amount:	\$1,804.06
Component Description:	Project Management Feb - Jun 2017
Amount:	\$1,807.43
Information not provided.	φ1,001.10
	Amount: Component Description: Amount:

Other Expenses

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
Other Expenses	\$43,550.00	\$43,000.00		\$0.00	
Develop and air announcement of upcoming channel change	\$0.00	\$0.00	N/A	N/A	N/A
MVPD Notification of Channel Change	\$2,000.00	\$2,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$10,000.00	\$10,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	\$20,000.00	\$20,000.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	N/A	N/A
Sub-total	\$43,550.00	\$43,000.00	N/A	\$0.00	N/A
Total for all systems	\$1,038,756.00	\$582,050.00	N/A	\$9,361.49	N/A

Components

Cost	Grand Total				
Information		Predetermined Cost Estimate	Estimated Cost	Actual Cost	
	Total for all systems	\$1,038,756.00	\$582,050.00	\$9,361.49	

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.	
		 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. The above-named 	
		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.	Leslie W Griffin , Jr . Project Manager 03/12/2018

Certification	Section	Question	Response
	Submission of Actual Cost Documentation Statements	WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISIONMENT (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).	
		 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. 	
		2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.	
		3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.	

- 4. The above-named entity acknowledges the submission of the information herein 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).
- 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.

	The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission. 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.	
an au name	are, under penalty of perjury, that I am thorized representative of the above- d applicant for the Authorization(s) ied above.	Leslie W Griffin , Jr . Project Manager
		03/12/2018

Attachments