



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **8617** | Service: **DTV** | Call **WTVD** | Channel: **9 (High VHF)**
ID: | Sign:
File **0000026327**
Number:
FRN: **0013597448** | Date **01/05**
Submitted: **/2018**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
WTVD TELEVISION, LLC Doing Business As: WTVD TELEVISION, LLC	77 WEST 66TH STREET, 16TH FLR ATTN: JOHN W. ZUCKER, ESQ. NEW YORK, NY 10023 United States	+1 (212) 456-7777	john.w.zucker@abc.com	Limited Liability Company

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
The Preparer is same as the reimbursement contact.			

Broadcaster Information and Transition Plan

Question	Response
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<p>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.</p>	<p>No</p>
<p>Briefly describe transition plan</p>	<p>Please see attachment for WTVD facilities and transition plan details.</p>

Transmitters	Section	Question	Response
		<p>Transmitter Related Expenses</p>	<p>Do you have transmitter related expenses?</p>

**Auxiliary
Transmitter****Existing Transmitter Information**

Section	Question	Response
Existing Transmitter Description	Type of change	Purchase New
	Use	Auxiliary (Backup)
	Description of Use	Auxiliary (Backup)
	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 and Type	Manufacturer	
	Model	PTCD40P4i
	Year	2010
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	16 kW

**Auxiliary
Transmitter**

New Transmitter Costs

Section	Question	Response
New Transmitter	Use	Auxiliary (Backup)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Manufacturer	
	Model	VAXTE-24R44
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	19.2 kW
	Justification for New Transmitter	The current channel 11 Auxiliary (Backup) transmitter cannot be re-channelled to meet new assignment on channel 9.

**Auxiliary
Transmitter**

Other Transmitter Costs

Section	Question	Response
Electrical Service	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
HVAC Service	Does the replacement transmitter require HVAC Service?	No
	Type	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 leasehold 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

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

**Primary
Transmitter**

Existing Transmitter Information

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 and Type	Manufacturer	
	Model	PTCD40P4i
	Year	2010
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	16 kW

Primary Transmitter

New Transmitter Costs

Section	Question	Response
New Transmitter	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Manufacturer	
	Model	VAXTE-24R44
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	19.2 kW
	Justification for New Transmitter	The current channel 11 Primary (Main) transmitter cannot be re-channelled to meet new assignment on channel 9

Primary Transmitter

Other Transmitter Costs

Section	Question	Response
Electrical Service	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
HVAC Service	Does the replacement transmitter require HVAC Service?	No
	Type	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 leasehold 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**
Information not provided.

Antennas

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

**Auxiliary
Antenna**

Existing Antenna Information

Section	Question	Response
Existing Antenna Description	Type of change	Purchase New
	Antenna Use	Auxiliary (Backup)
	Description of Use	Auxiliary (Backup)
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	No
	Is the existing antenna directional?	No
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	Yes
Existing Antenna Manufacturer and Type	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Circular
	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)	45.0 kW

Manufacturer	
Model	TLS-V8/VP-R S180
Year	2010

**Auxiliary
Antenna**

New Antenna Costs

Section	Question	Response
New Antenna Description	Use	Auxiliary (Backup)
	Description of Use	Auxiliary (Backup)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	No
	Will antenna be located on or in close proximity to an antenna farm?	Yes
New Antenna Manufacturer and Types	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Circular
	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)	45.0 kW
	Manufacturer	

Model	TLS-V8 /VPR S180
Year	2018
Justification for New Antenna	The current channel 11 Auxiliary (Backup) antenna cannot be re-channelled to meet new assignment on channel 9.

Auxiliary Antenna

Other Antenna Costs

Section	Question	Response
Combiner for Shared Antenna	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
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Single Channel
	Feed Line Size	4 1/16 inches inches
Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	Yes

Pattern Scatter Analysis	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
Sweep Test	Do you require the sweep testing of transmission line and antenna?	Yes

**Auxiliary
Antenna**

Other Antenna Cost Not Listed

Information not provided.

**Primary
Antenna**

Existing Antenna Information

Section	Question	Response
Existing Antenna Description	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?	No
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	Yes
Existing Antenna Manufacturer and Type	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Circular
	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)	45.0 kW

Manufacturer	
Model	THV-9A11 /CP-R O4
Year	2010

**Primary
Antenna**

New Antenna Costs

Section	Question	Response
New Antenna Description	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	No
	Will antenna be located on or in close proximity to an antenna farm?	Yes
New Antenna Manufacturer and Types	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Circular
	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)	45.0 kW
Manufacturer		

Model	THV-9A9 /CP-R O4
Year	2018
Justification for New Antenna	The current channel 11 Primary (Main) antenna cannot be re-channelled to meet new assignment on channel 9

Primary Antenna

Other Antenna Costs

Section	Question	Response
Combiner for Shared Antenna	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
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Single Channel
	Feed Line Size	6 1/8 inches inches
Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	No

Pattern Scatter Analysis	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
Sweep Test	Do you require the sweep testing of transmission line and antenna?	Yes

**Primary
Antenna**

Other Antenna Cost Not Listed

Name	Description
Mounting pole	New channel 9 Primary (Main) antenna requires a shorter mounting pole to maintain current antenna aperture and HAAT.

Transmission Line	Section	Question	Response
	Transmission Line Related Expenses	Do you have transmission line related expenses?	No

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	Existing Tower		
	Section	Question	Response
Existing Tower Description	Type of change	Move Equipment	
	Tower Use	Primary (Main)	
	Description of Use	N/A	
	Ownership	Owned	
	Is this tower consider Complex?		
	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?	Yes	
	Is tower compliant with Rev G?	No	
Existing Tower Structure Registration	Do you have a tower registration number?	Yes	
	ASR Number	1010348	
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	35° 40' 06.0" N-	
	Longitude (NAD83)	078° 31' 58.0" W-	

Overall Structure Height	1994.07 feet
Support Structure Height	1885.80 feet
Ground Elevation Above Mean Sea Level (AMSL)	318.89 feet
Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	WTVD Television, LLC
Date Constructed	01/01/1978

Primary Tower

Tower Rigging Costs

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

Primary Tower

Other Tower Expenses Not Listed

Name	Description
Tower reinforcements	Reinforcements necessary to comply with ANSI/TIA-222-G standard

Outside Professional Services Costs

Section	Question	Response
Outside Project Management Services	Do you require outside project management services?	No
	Number of Hours	N/A
	Explanation	N/A
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	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	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 Services	Prepare and file Form FCC Construction Permit Application
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	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	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	Yes
	RF exposure measurements	No
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Other Professional Services Expenses Not Listed

Outside Professional Services Costs

Name	Description
Structural Analysis	Structural analysis to comply with TIA/EIA-222-G and design of required reinforcement.
Structural project management	Structural Engineering services to manage tower reinforcements, antenna replacements and rigging plans.
Legal Advice re Reimbursement Process	Outside counsel advice re reimbursement and repacking procedures.

Other Expenses

Section	Question	Response
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	Yes
	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)?	No
	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

Information not provided.

**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
Primary Transmitter VAXTE-24R44	\$526,000.00	\$523,707.10		\$0.00	
High VHF - Air Cooled Solid State Transmitter 16.6 . 20.7 kW	\$526,000.00	\$523,707.10	See attached quote from GatesAir, which includes costs of power transformer, mask filter, shipping, and installation.	N/A	N/A
Auxiliary Transmitter VAXTE-24R44	\$526,000.00	\$523,707.10		\$0.00	
High VHF - Air Cooled Solid State Transmitter 16.6 . 20.7 kW	\$526,000.00	\$523,707.10	See attached quote from GatesAir, which includes costs of power transformer, mask filter, shipping, and installation	N/A	N/A
Sub-total	\$1,052,000.00	\$1,047,414.20	N/A	\$0.00	N/A
Total for all systems	\$2,313,651.57	\$2,126,010.77	N/A	\$92,399.71	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
Primary Antenna THV-9A9 /CP-R 04	\$450,529.00	\$444,923.00		\$0.00	
Mounting pole	<i>\$125,722.00</i>	\$125,722.00	A shorter mounting pole for the new channel 9 Primary antenna is required to maintain current antenna aperture and HAAT. The cost for this mounting pole is included in the attached Dielectric Primary (Main) antenna quote.	N/A	N/A
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	\$12,300.00	\$7,024.00	This cost is included in the attached Dielectric Main antenna quote.	N/A	N/A

High VHF - High Power Top Mount One Station elliptically or circularly polarized	<i>\$305,777.00</i>	\$305,777.00	See attached quote from Dielectric. This Primary (Main) top-mount channel 9 antenna is a direct replacement for our current channel 11 Primary (Main) antenna.	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	This cost is included in the attached Dielectric Main antenna quote.	N/A	N/A
Auxiliary Antenna TLS-V8 /VPR S180	\$144,768.00	\$129,742.00		\$0.00	
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$11,000.00	This cost is included in the attached Dielectric Auxiliary (Backup) antenna quote.	N/A	N/A

High VHF - High Power Side Mount One Station elliptically or circularly polarized	<i>\$105,318.00</i>	\$105,318.00	See attached quote from Dielectric. This Auxiliary (Backup) side-mount channel 9 antenna is a direct replacement for our current channel 11 Auxiliary (Backup) antenna.	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	This cost is included in the attached Dielectric Auxiliary (Backup) antenna quote.	N/A	N/A
Elbow complex, single channel, at antenna input, per 4 1/16. feedline (if needed)	\$9,570.00	\$7,024.00	This cost is included in the attached Dielectric Auxiliary (Backup) antenna quote.	N/A	N/A
Sub-total	\$595,297.00	\$574,665.00	N/A	\$0.00	N/A
Total for all systems	\$2,313,651.57	\$2,126,010.77	N/A	\$92,399.71	N/A

Components

Information not provided.

Cost Information **Transmission Line**
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
Primary Tower TOWER	\$480,650.00	\$332,364.00		\$65,000.00	
Tower reinforcements	<i>\$59,650.00</i>	\$59,650.00	Tower reinforcements are necessary to comply with TIA/EIA-222-G standards with the new antenna loads.	N/A	N/A
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	\$421,000.00	\$272,714.00	See attached quotes from Coast to Coast Tower Service which includes replacements of Primary and Auxiliary (Backup) antennas.	\$65,000.00	N/A
Sub-total	\$480,650.00	\$332,364.00	N/A	\$65,000.00	N/A
Total for all systems	\$2,313,651.57	\$2,126,010.77	N/A	\$92,399.71	N/A

Components

Actual Information	
Description	File Name
Tower reinforcements	Information not provided.

Complex Tower (includes, for example, those with candelabras and/or stacked antennas)

Component Description:

Deposit for tower modifications and antenna replacements

Amount:

\$65,000.00

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
Outside Professional Services	\$169,819.57	\$161,949.57		\$27,399.71	
Legal Advice re Reimbursement Process	<i>\$14,194.57</i>	\$14,194.57	Legal services relating to research and advice regarding reimbursable legal expenses and required backup support. See two attached quotes from Akin Gump.	\$10,954.55	N/A
Structural project management	<i>\$28,550.00</i>	\$28,550.00	See attached quote from Turriss Engineering to provide rigging plan and engineering services for antenna replacements and structural modifications.	N/A	N/A

Structural Analysis	<i>\$10,000.00</i>	\$10,000.00	Structural analysis required to comply with current tower standards. See attached quote from Turris Engineering.	\$6,700.00	N/A
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$79,955.00	Attached quote includes services for field strength study to verify antenna and coverage performance.	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
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$2,317.50	N/A
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A	\$525.00	N/A

Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$4,048.91	N/A
Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	\$4,210.00	\$4,000.00	N/A	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$5,000.00	N/A	\$2,853.75	N/A
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
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A

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
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Sub-total	\$169,819.57	\$161,949.57	N/A	\$27,399.71	N/A
Total for all systems	\$2,313,651.57	\$2,126,010.77	N/A	\$92,399.71	N/A

Components

Actual Information

Description	File Name
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<p>Legal Advice re Reimbursement Process</p>	<p>Component Description: Legal Advice re: Reimbursement process</p> <p>Amount: \$1,122.23</p> <p>Component Description: Legal Advice re: Reimbursement process</p> <p>Amount: \$1,797.83</p> <p>Component Description: Legal Advice re: Reimbursement process</p> <p>Amount: \$663.76</p> <p>Component Description: Legal Advice re: Reimbursement process</p> <p>Amount: \$314.73</p> <p>Component Description: Legal Advice re: Reimbursement process</p> <p>Amount: \$1,513.87</p> <p>Component Description: Legal Advice re: Reimbursement process</p> <p>Amount: \$5,542.13</p>
<p>Structural project management</p>	<p>Information not provided.</p>
<p>Structural Analysis</p>	<p>Component Description: Structural analysis and report for WTVD 2000' transmission tower</p> <p>Amount: \$6,700.00</p>

Comprehensive coverage verification via field study, if needed	Information not provided.	
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.	
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Component Description: Amount:	Prepare engineering section of FCC form 2100 CP application \$2,317.50
Address transition timing and coordination issues w/ other stations and wireless	Component Description: Amount:	Engineering study re: transition plan and interim facilities \$525.00
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Component Description: Amount: Component Description: Amount:	Attorney fees re: Form 2100 application for CP \$491.44 Attorney fees re: Form 2100 application for CP \$3,557.47
Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	Information not provided.	

<p>Perform engineering study for new channel assignment and antenna development</p>	<p>Component Description: Perform engineering studies for new channel assignment and antenna development</p> <p>Amount: \$2,853.75</p>
<p>RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application</p>	<p>Information not provided.</p>
<p>Prepare engineering section of FCC Form 2100 (main), License to Cover Application</p>	<p>Information not provided.</p>
<p>RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit Application</p>	<p>Information not provided.</p>
<p>Prepare and or review reimbursement form</p>	<p>Information not provided.</p>

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
Other Expenses	\$15,885.00	\$9,618.00		\$0.00	
MVPD Notification of Channel Change	<i>\$0.00</i>	\$0.00	Do not anticipate seeking reimbursement for this expense at this time.	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$4,000.00</i>	\$4,000.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$750.00	WTVD will be required to file license applications for both the Primary and Auxiliary facilities.	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$4,868.00	N/A	N/A	N/A
Sub-total	\$15,885.00	\$9,618.00	N/A	\$0.00	N/A
Total for all systems	\$2,313,651.57	\$2,126,010.77	N/A	\$92,399.71	N/A

Components

Information not provided.

Cost Information **Grand Total**

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$2,313,651.57	\$2,126,010.77	\$92,399.71

Reimbursement Status

Question	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
	<p>Submission of Estimated Expenses Statements</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"> 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. 2. 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).
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.

John W. Zucker
Assistant Secretary

01/05/2018

Certification	Section	Question	Response
	<p>Submission of Actual Cost Documentation Statements</p>	<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"> 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. 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) .
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 must be promptly refunded to the Commission.

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.

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

John W. Zucker
Assistant Secretary

01/05/2018

Attachments