

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility 71357 Service: DTV Call WDSU Channel: 19 (UHF)

Sign:

File **0000026830**

Number:

ID:

FRN: **0001769256** Date **04/23**

Submitted: /2018

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
NEW ORLEANS HEARST TELEVISION INC. Doing Business As: NEW ORLEANS HEARST TELEVISION INC.	P.O. BOX 1800 RALEIGH, NC 27602 United States	+1 (919) 839- 0300	mprak@brookspierce. com	Corporation

Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email	
[Confidential]				

Preparer Contact Information

Preparer Contact Name and Information

Applicant	Address	Phone	Email
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The Preparer is same as the reimbursement contact.

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	see attached transition plan document

Transmitters

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

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	Sigma CD3260P2
	Year	2008
	Туре	Inductive Output Tube
	IOT Power Type	Two
	Power Capacity	60 kW

New Transmitter Costs

Section	Question	Response
New Transmitter	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Manufacturer	
	Model	ULXTE-40
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	25.3 kW
	Justification for New Transmitter	Existing IOT transmitter cannot be converted to post-transition channel, see GatesAir EOL and HTV IOT to Solid-State Justification statements. An IOT replacement is more expensive than proposed SS transmitter. See attached Comark IOT Transmitter quote.

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	Yes
	Description	see attached quote for transmitter electrical service
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

Other Transmitter Cost Not Listed

Name	Description
Sales Tax	transmitter sales tax
combiner installation	cost to install new antenna combiner for the three stations sharing both main and backup antennas
Electrical Accessories	Manufacturer required surge protection & voltage conversion
RF Accessories	Additional RF components required for transmitter operation
Shipping	transmitter shipping
Remote Control upgrade	Transmitter Remote Control equipment for repack transmitter

Antennas

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

Primary Antenna

Existing Antenna Information

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	Not in Stac
	Polarization	Horizontal
	Туре	Broadband Panel
	Number of Stations Supported	3
	Number of Panels	23
	Design power capacity in use	66.0 %
	Lower Limit	470.00 MH

Upper Limit	698.00 MHz
Other Antenna Type	N/A
ERP: (Effective Radiated Power)	1000.0 kW
Manufacturer	Dielectric
Model	TUF-C4SP- 10/32U
Year	2008

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

Facility ID	Call Sign
54280	WNOL-TV
72119	WGNO

Primary Antenna

Adjustment to Existing Antenna

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

Primary Antenna

Other Antenna Costs

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	Yes
	Туре	New
	Number of channels supported	3
	Frequencies of channels supported	RF channel
	Frequency	N/A

Enter a list of RF channel numbers.

RF Channel Number		
26		
15		
19		

Primary Antenna

Other Antenna Cost Not Listed

Information not provided.

Auxiliary Antenna

Existing Antenna Information

Section	Question	Response
Existing Antenna Description	Type of change	Retune Existing
	Antenna Use	Auxiliary (Backup)
	Description of Use	backup to main antenna
	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	Side Mount
	Antenna position in stack	Not in Stack

Polarization	Horizontal
Туре	Other
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	broadband slot cavity
ERP: (Effective Radiated Power)	780.0 kW
Manufacturer	RFS
Model	RD32A-HP
Year	2008

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

Facility ID	Call Sign
54280	WNOL-TV
72119	WGNO

Auxiliary Antenna

Adjustment to Existing Antenna

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

Auxiliary Antenna

Other Antenna Costs

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		

Auxiliary Antenna

Other Antenna Cost Not Listed

Information not provided.

Transmission Seffien	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?	No

Outside Professional

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	200
	Explanation	Need outside RF experience to assist with transition planning and execution.
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	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	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	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	No

Number of Days	N/A
Justification	N/A

Outside Professional

Other Professional Services Expenses Not Listed

Services Costs	Description
Transmitter Site Survey	Transmitter planning survey & transmitter building drawings

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	Yes
	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 Not Listed

Expenses 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 ULXTE-40	\$1,298,060.16	\$1,133,354.34		\$322,915.21	
Remote Control upgrade	\$2,354.39	\$2,354.39	Remote control changes required for repack transmitter	\$2,354.39	N/A
combiner installation	\$5,853.90	\$5,853.90	cost to install antenna combiner per attached GatesAir transmitter quote	N/A	N/A
Other Electrical Service: see attached quote for transmitter electrical service	\$55,579.00	\$55,579.00	Electrical service to install replacement transmitter. Quote attached.	N/A	N/A
Sales Tax	\$104,853.00	\$104,853.00	transmitter sales tax per attached GatesAir quote	N/A	N/A
RF Accessories	\$163,607.38	\$163,607.38	RF components required for transmitter and connection	N/A	N/A

			/switching to combiner and antenna systems		
Electrical Accessories	\$7,812.49	\$7,812.49	Required transmitter electrical components. See GatesAir quote.	N/A	N/A
Shipping	\$11,000.00	\$11,000.00	See GatesAir quote	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	\$947,000.00	\$782,294.18	GatesAir quote sections A, B & E. This is the transmitter, mask filter, installation and proof per the FCC "transmitter" definition.	\$320,560.82	N/A
Sub-total	\$1,298,060.16	\$1,133,354.34	N/A	\$322,915.21	N/A
Total for all systems	\$1,504,020.16	\$1,321,555.34	N/A	\$351,452.85	N/A

Components

Actual Information Description	File Name	
Remote Control upgrade	Component Description: Amount:	Repack transmitter remote control equipment \$2,354.39
combiner installation	Information not provided.	
Other Electrical Service: see	Information not provided.	

attached quote for transmitter electrical service		
Sales Tax	Information not provided.	
RF Accessories	Information not provided.	
Electrical Accessories	Information not provided.	
Shipping	Information not provided.	
UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	Component Description: Amount:	Transmitter 2nd deposit \$215,264.19
	Component Description: Amount:	Transmitter 1st deposit \$105,296.63

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 TUF-C4SP- 10/32U	\$90,930.00	\$85,556.00		\$0.00	
New combiner, cost per channel (without antenna)	\$84,200.00	\$79,156.00	Combiner and installation from GatesAir quote. This is the total cost of the 3 channel combiner, not the per channel cost. I don't see a provision in this form to multiply this figure by the number of channels.	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 Three Station broadband panel antenna horizontally polarized	\$0.00	\$0.00	No cost	N/A	N/A

Auxiliary Antenna RD32A-HP	\$6,730.00	\$6,400.00		\$0.00	
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
UHF - High Power, Side Mount, basic slot antenna, 780 kW input, directional,, horizontally polarized	\$0.00	\$0.00	No cost	N/A	N/A
Sub-total	\$97,660.00	\$91,956.00	N/A	\$0.00	N/A
Total for all systems	\$1,504,020.16	\$1,321,555.34	N/A	\$351,452.85	N/A

Components

Information not provided.

Cost Transmission Line

Information Information not provided.

Cost Tower Equipment and Rigging Costs

Information 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
Outside Professional Services	\$90,805.00	\$79,350.00		\$28,537.64	
Project management of the transition	\$31,600.00	\$22,500.00	N/A	\$4,912.64	N/A
Transmitter Site Survey	\$20,600.00	\$20,600.00	Transmitter planning survey & transmitter building drawings. Quote attached	\$20,600.00	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 - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	\$4,210.00	\$4,000.00	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 request for Special Temporary Authorization	\$2,050.00	\$1,500.00	N/A	N/A	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	\$2,105.00	\$2,000.00	N/A	N/A	N/A

Form 2100, Construction Permit Application					
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$1,875.00	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$1,150.00	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
Sub-total	\$90,805.00	\$79,350.00	N/A	\$28,537.64	N/A
Total for all systems	\$1,504,020.16	\$1,321,555.34	N/A	\$351,452.85	N/A

Components

Actual Information Description	File Name	
Project management of the transition	Component Description:	WDSU Marsand project consulting
	Amount:	\$1,894.76

WDSU TI Digital **Component Description:** project management \$210.00 Amount: **Component Description:** WDSU TI Digital project management inv 4 Amount: \$150.00 **Component Description:** WDSU TI Digital project management **Amount:** \$298.50 **Component Description:** WDSU invoice for project management. Invoice total less unsupported travel expenses. **Amount:** \$2,359.38 Transmitter Site Survey **Component Description:** WDSU Field Service GatesAir, 6-30-2016, \$20,600 Amount: \$20,600.00 Attorney Fees - Prepare Information not provided. and File request for Special **Temporary Authorization** Attorney Fees -Prepare and Information not provided. File FCC Form 2100 (main), License to Cover Application Attorney Fees - Aux Information not provided. Antenna, prepare and File Form 2100 Construction Permit or License Application

Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Information not provided.	
Prepare request for Special Temporary Authorization	Information not provided.	
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application	Information not provided.	
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.	
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit 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, Construction Permit Application \$1,875.00
Perform engineering study for new channel assignment and antenna development	Component Description: Amount:	WDSU engineering study for new channel assignment \$1,150.00
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.	
Prepare and or review reimbursement form	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
Other Expenses	\$17,495.00	\$16,895.00		\$0.00	
MVPD Notification of Channel Change	\$2,500.00	\$2,500.00	Legal council assistance in MVPD notification	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	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
Develop and air announcement of upcoming channel change	\$2,000.00	\$2,000.00	Attorney fees to ensure compliance with FCC requirement	N/A	N/A
Sub-total	\$17,495.00	\$16,895.00	N/A	\$0.00	N/A
Total for all systems	\$1,504,020.16	\$1,321,555.34	N/A	\$351,452.85	N/A

Components

Information not provided.

Cost Information

Grand Total

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$1,504,020.16	\$1,321,555.34	\$351,452.85

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

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.

- 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.
- 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 abovenamed applicant for the Authorization(s) specified above. John Drain Hearst Television SVP Chief Financial Officer 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).

- 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.
- 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 abovenamed applicant for the Authorization(s) specified above. Douglas
Durkee
Hearst
Television
Manager of
Spectrum
Repack

04/23/2018

Attachments