



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **40758** | Service: **DTV** | Call **WSYT** | Channel: **14 (UHF)**  
ID: | Sign:  
File **0000028420**  
Number:  
FRN: **0022892913** | Date **03/04**  
Submitted: **/2019**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email
<b>BRISTLECONE BROADCASTING LLC</b>	Brian Brady 2111 UNIVERSITY PARK DRIVE SUITE 650 OKEMOS, MI 48864 United States	+1 (517) 347-4141	BRADY@NORTHW COM

## Reimbursement Contact Information

### Reimbursement Contact Name and Information

Applicant	Address	Phone
[Confidential]		

## Preparer Contact Information

### Preparer Contact Name and Information

Applicant	Address
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	Purchase of the transmitter line. Current transmitter ma retune to the new channel. transmission line, while ma
----------------------------------	---

**Transmitters**

Section	Question
<b>Transmitter Related Expenses</b>	Do you have transmitter related expenses?

**Primary  
Transmitter**

**Existing Transmitter Information**

Section	Question
<b>Existing Transmitter Description</b>	Type of change
	Use
	Description of Use
	Ownership
	Owner
	Site
	Is this transmitter currently shared with another station?
	Is this transmitter currently in operating condition?
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer
	Model
	Year
	Type
	IOT Power Type
	Power Capacity

**Primary  
Transmitter**

**New Transmitter Costs**

Section	Question
<b>New Transmitter</b>	Use
	Change Type
	Is this a request for upgraded equipment?
	Manufacturer
	Model
	Transmitter Type
	Solid State Cooling
	Solid State Power capacity
	Justification for New Transmitter

**Primary  
Transmitter**

**Other Transmitter Costs**

Section	Question
<b>Electrical Service</b>	Service Entrance (3 phases 800A 208V)
	Switchgear (industrial 800 amp)
	Transformer (480V)
	Power
	Rigid Conduit and Wiring
	Size
	Length
	Other Electrical Service
	Description

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

**Primary  
Transmitter**

**Other Transmitter Cost Not Listed**

Information not provided.

**Interim  
Transmitter**

**New Transmitter Costs**

Section	Question
<b>New Transmitter</b>	Use
	Description of Use
	Change Type
	Manufacturer
	Model
	Transmitter Type
	Solid State Cooling
	Solid State Power capacity
	Justification for New Transmitter

**Interim  
Transmitter**

**Other Transmitter Costs**

Section	Question
<b>Electrical Service</b>	Service Entrance (3 phases 800A 208V)
	Switchgear (industrial 800 amp)
	Transformer (480V)
	Power
	Rigid Conduit and Wiring
	Size
	Length
	Other Electrical Service

	Description
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?
	Type
	Size
	Other Size
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?
	Size
<b>Channel 14 Costs</b>	Is an RF Consulting Engineer needed?
	Is a channel 14 Mask Filer needed?
	Is additional field engineering time needed?
	Number of Days
<b>Inside RF System</b>	Is an additional interior RF system required to support this interim transmitter?

**Interim  
Transmitter**

**Other Transmitter Cost Not Listed**

Information not provided.

## Antennas

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



**Primary Antenna Existing Antenna Information**

Section	Question
<b>Existing Antenna Description</b>	Type of change
	Antenna Use
	Description of Use
	Ownership
	Owner
	Site
	Is the existing antenna shared with another station or stations
	Is the existing antenna directional?
	Is antenna in operating condition?
	Is antenna located on or in close proximity to an antenna farm
<b>Existing Antenna Manufacturer and Type</b>	Class
	Mounting
	Antenna position in stack
	Polarization
	Type
	Number of Stations Supported
	Number of Panels
	Design power capacity in use
	Lower Limit
	Upper Limit
	Other Antenna Type
	ERP: (Effective Radiated Power)
	Manufacturer
	Model
Year	



**Primary Antenna** **New Antenna Costs**

Section	Question
<b>New Antenna Description</b>	Use
	Description of Use
	Change Type
	Is this a request for upgraded equipment?
	Ownership
	Owner
	Is antenna shared?
	Is antenna directional?
	Will antenna be located on or in close proximity to an antenna farm?
<b>New Antenna Manufacturer and Types</b>	Class
	Mounting
	Antenna position in stack
	Polarization
	Type
	Number of Stations Supported
	Number of Panels/Bays
	Lower Limit
	Upper Limit
	Design power capacity in use
	Other Antenna Type
	ERP: (Effective Radiated Power) .....
	Manufacturer
	Model
Year	

Justification for New Antenna

**Primary Antenna**

**Other Antenna Costs**

Section	Question
<b>Combiner for Shared Antenna</b>	Do you need a Combiner for a Shared Antenna?
	Type
	Number of channels supported
	Frequencies of channels supported
	Frequency
	Do you need a combiner output splitter/switcher for dual feed lines?
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?
	Broadband or Single Channel?
	Feed Line Size
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power antenna?
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?

**Enter a list of RF channel numbers.**

RF Channel Number
15
14

**Primary Antenna**

**Other Antenna Cost Not Listed**

Name	Description
------	-------------

<b>Antnna Monitoring Kit</b>	RF Scout Assembly for ant
<b>Beacon Kit</b>	Beacon Kit for support pole
<b>Transmission Line 7-75 EIA</b>	T/L 7-75 EIA Length 15'-20 existing line

**Interim Antenna**      **New Antenna Costs**

Section	Question
<b>New Antenna Description</b>	Use
	Description of Use
	Change Type
	Ownership
	Owner
	Is antenna shared?
	Is antenna directional?
	Will antenna be located on or in close proximity to an antenna farm?
<b>New Antenna Manufacturer and Type</b>	Class
	Mounting
	Antenna position in stack
	Polarization
	Type
	Number of Stations Supported
	Number of Panels/Bays
	Lower Limit
	Upper Limit
	Design power capacity in use
	Other Antenna Type
	ERP: (Effective Radiated Power)
	Manufacturer
	Model
Year	

Justification for New Antenna

**Interim Antenna** **Other Antenna Costs**

Section	Question
<b>Combiner for Shared Antenna</b>	Do you need a Combiner for a Shared Antenna?
	Type
	Number of channels supported
	Frequencies of channels supported
	Frequency
	Do you need a combiner output splitter/switcher for dual feed lines?
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?
	Broadband or Single Channel?
	Feed Line Size
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for an antenna?
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?

**Interim Antenna** **Other Antenna Cost Not Listed**

Name	Description
------	-------------

---

**Transmission Line 6-50**

T/L various fixed lengths (1  
Tower T/L with the Inside F

---



**Transmission Line**

Section	Question
Transmission Line Related Expenses	Do you have transmission line related expenses?

**Primary Transmission Line**

**Add Transmission Line**

Section	Question
Existing Transmission Line Description	Type of change
	Use
	Description of Use
	Ownership
	Owner
	Site
	Is this transmission currently shared with any other stations?
	Is Transmission Line in operating condition?
Existing Transmission Line Manufacturer and Type	Manufacturer
	Type
	Diameter
	Other Diameter
	Segment Length
	Other Segment Length
	Number of parallel runs
	Length

**Primary Transmission Line**

**Other Transmission Line Expenses Not Listed**

Name	Description
Dehydrator	Pressurization EQ.

**Interim  
Transmission  
Line**

**New Transmission Line**

<b>Section</b>	<b>Question</b>
<b>New Transmission Line Costs</b>	Use
	Description of Use
	Change Type
	Type
	Diameter
	Segment Length
	Other Segment Length
	Number of parallel runs
	Length
	Justification for New Transmission Line

**Interim  
Transmission  
Line**

**Other Transmission Line Expenses Not Listed**

<b>Name</b>	<b>Description</b>
Dehydrator	Pressurization Equipment

**Tower  
Equipment And  
Rigging Costs**

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

**Primary Tower**

**Existing Tower**

Section	Question
<b>Existing Tower Description</b>	Type of change
	Tower Use
	Description of Use
	Ownership
	Is this tower consider Complex?
	Is this tower currently shared with any other stations?
	One or more FM, AM or TV radio broadcaster(s)
	Others Types of Users
	Is tower documented for structural analysis?
	Is tower compliant with Rev G?
<b>Existing Tower Structure Registration</b>	Do you have a tower registration number?
	ASR Number
<b>Coordinates (NAD83 ( North American Datum of 1983))</b>	Latitude (NAD83)
	Longitude (NAD83)
	Overall Structure Height
	Support Structure Height
	Ground Elevation Above Mean Sea Level (AMSL)
	Structure Type
	Tower Owner
	Date Constructed

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

Facility ID	Call Sign	Service
58725	WNYS-TV	DTV

**Primary Tower**

**Tower Modification Costs**

Section	Question
Engineering Study	Please what type of engineering study is required, if any:
Tower Reinforcements	Please select whether tower reinforcements are needed:

**Primary Tower**

**Tower Rigging Costs**

Section	Question
Tower Rigging Costs	Complex Tower
Helicopter Services Required	Are helicopter services required?

**Primary Tower**

**Other Tower Expenses Not Listed**

Information not provided.

**Outside Professional Services Costs**

Section	Question
<b>Outside Project Management Services</b>	Do you require outside project management services?
	Number of Hours
	Explanation
<b>Outside RF consulting Engineering Services</b>	Perform engineering study for new channel assignment and antenna development
	Prepare engineering section of Form FCC Construction Perm Application
	For Auxiliary Facility
	For Main Facility
	Prepare engineering section of Form FCC License to Cover Application
	For Auxiliary Facility
	For Main Facility
	Prepare request for Special Temporary Authority
	Quantity
	Do you have Distributed Transmission System engineering services?
	Critical Facility
	Terrain-Shielded Facility
<b>Attorney and Other Outside Consulting Services</b>	Prepare and file Form FCC Construction Permit Application
	For Auxiliary Facility
	For Main Facility
	Prepare and file Form FCC License to Cover Application
	For Auxiliary Facility
	For Main Facility
	Prepare request for Special Temporary Authority
	Quantity
	NEPA Section 106 environmental review

	Environmental Assessment
	ASR Modification
	FAA Consultation (including preparation of FAA Form 7460)
	Negotiation of Lease and other Matter for Shared Locations
	Prepare or Review FCC Form 399 for Reimbursement
	Address transition timing and coordination issues w/ other stations and wireless providers
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study
	RF exposure measurements
	Additional Field Engineering Service
	Number of Days
	Justification

**Outside Professional Services Costs**

**Other Professional Services Expenses Not Listed**

Information not provided.

**Other Expenses**

Section	Question
<b>AM Pattern Disturbance</b>	Is an Impact Study needed?
	Is Remediation needed?
<b>Facility Expenses</b>	Name
	Other Distributed Transmission System Expenses Not listed
	Name
	Is Notification of a Medical Facility required as a result of DT\ broadcasting?
<b>Permit and Filing Costs</b>	Local Zoning
	Non-zoning permits
	BLM or NFS Coordination
	FCC Construction Permit Minor Change
	FCC License to Cover Application
	FCC Special Temporary Authority Application
<b>Other Miscellaneous Expenses</b>	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?
	Does this relocation require Equipment Storage?
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?
	Does this relocation require MVPD Notification of a Channel Change?

**Other Expenses**

**Other Expenses Not Listed**

Name	Description
<b>Internal Project Management of Transition</b>	120 h for repack preparatio systems engineering plann preparations, CP budgeting

## Cost Information Transmitters

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification
<b>Interim Transmitter THU9-EVO</b>	<b>\$1,133,950.00</b>	<b>\$544,325.00</b>	
UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	\$947,000.00	\$450,000.00	The Interim TX cost is split with WNYS. See attached quote for Inter TX:WSYT Revised Inter THU9evo-20 Sales-Quote_131652_201809005347UTC
UHF inside RF system including switching	\$147,500.00	\$70,000.00	The Interim TX cost is split with WNYS. See attached quote: WSYT Revised Interim THU9e 20 Sales-Quote_131652_201809005347UTC
Transformer 3 phase /480v - 150 KVA	\$25,550.00	\$12,450.00	The Interim TX cost is split with WNYS. See attached quote for Inter TX:WSYT Revised Inter THU9evo-20 Sales-Quote_131652_201809005347UTC
Other -- Building Addition Size: 200.0	<i>\$10,000.00</i>	\$10,000.00	Estimate for possible costs of building modifications.
2" Rigid Conduit and Wiring (Cost per foot)	\$3,900.00	\$1,875.00	The Interim TX cost is split with WNYS
<b>Primary Transmitter THU9-EVO</b>	<b>\$1,880,260.00</b>	<b>\$1,787,500.00</b>	
Additional field engineering time, 10-30 days	\$63,100.00	\$60,000.00	N/A
Channel 14 Mask Filter	\$189,500.00	\$180,000.00	N/A



RF Consulting Engineer	\$5,260.00	\$5,000.00	N/A
Other -- Building Addition Size: 800.0	<b>\$10,000.00</b>	\$10,000.00	Estimate for possible costs of building modifications.
15 Ton system	\$88,400.00	\$84,000.00	N/A
2" Rigid Conduit and Wiring (Cost per foot)	\$2,600.00	\$2,500.00	N/A
Transformer 3 phase /480v - 500 KVA	\$48,400.00	\$46,000.00	N/A
UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	\$1,473,000.00	\$1,400,000.00	See attached SS-TX TF notification:Syracuse Repack WSYT-SS-TX Upgrade-SEPT2017- rev01,with:authorizatio new CP-540K-Jan 22 2018,TPO-ERP CALC WSYT-TOP_Ant-H-po rev01,C-70579-4, THU9evo_bro_en_360 5860-12_v0100,WSYT CH14 THU9evo-24 AM /30 AMPs quotes.
<b>Sub-total</b>	\$3,014,210.00	\$2,331,825.00	N/A
<b>Total for all systems</b>	\$5,337,566.00	\$4,336,162.25	N/A

## Components

Actual Information Description	File Name
UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	<p><b>Component Description:</b> Item amou for W</p> <p><b>Amount:</b> \$91,1</p>
UHF inside RF system including switching	<p><b>Component Description:</b> Item amou for W</p> <p><b>Amount:</b> \$13,4</p>

Transformer 3 phase/480v - 150 KVA	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Item amou for W \$974.</p>
Other -- Building Addition Size: 200.0	Information not provided.	
2" Rigid Conduit and Wiring (Cost per foot)	Information not provided.	
Additional field engineering time, 10-30 days	Information not provided.	
Channel 14 Mask Filter	Information not provided.	
RF Consulting Engineer	Information not provided.	
Other -- Building Addition Size: 800.0	Information not provided.	
15 Ton system	Information not provided.	
2" Rigid Conduit and Wiring (Cost per foot)	Information not provided.	
Transformer 3 phase/480v - 500 KVA	Information not provided.	
UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	Information not provided.	

**Cost Information** **Antennas**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification
<b>Interim Antenna TFU-18DSC-R T140</b>	<b>\$119,019.00</b>	<b>\$97,797.75</b>	
Transmission Line 6-50	<i>\$4,529.00</i>	\$4,529.00	N/A
Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)	\$5,260.00	\$5,000.00	N/A
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$8,212.50	The Interim Antenna cost is split with WNY: Dielectric quote attached: WSYT D14 D1 interim_ANT_ Order. See the attached transition plan Syracuse Repack WSYT TransitionPlan sketch- SEPT2017- rev02.

UHF - High Power, Side Mount, basic slot antenna, 540 kW input, directional,, elliptically or circularly polarized	<b><i>\$67,050.00</i></b>	\$67,050.00	The interim Antenna cost is split with WNYS. Dielectric quote attached: WSYT D14 D1 interim_ANT_Order. See attached transition plan Syracuse Repack WSYT TransitionPlan sketch- SEPT2017- rev02.
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	\$12,300.00	\$6,606.25	The Interim Antenna cost is split with WNY: Dielectric quote attached: WSYT D14 D1 interim_ANT_Order. See the attached transition plan Syracuse Repack WSYT TransitionPlan sketch- SEPT2017- rev02.
<b>Primary Antenna TFU-20DSC-R T140 DC</b>	<b>\$440,762.00</b>	<b>\$289,559.50</b>	
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$22,000.00	Dielectric quote attached: WSYT D14- WNYS D15 Primary_ANT_Order
Transmission Line 7-75 EIA	<b><i>\$4,172.00</i></b>	\$4,172.00	N/A
Beacon Kit	<b><i>\$4,500.00</i></b>	\$4,500.00	N/A

Antnna Monitoring Kit	<i>\$6,400.00</i>	\$6,400.00	N/A
Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)	\$5,260.00	\$5,000.00	N/A
New combiner, cost per channel (without antenna)	\$84,200.00	\$80,000.00	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A
Elbow complex, broadband, at antenna input, per 7 3/16. feedline (if needed)	\$16,850.00	\$16,000.00	N/A
UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized	\$289,500.00	\$145,087.50	The cost for the Master_Top Mount Antenna is split with WNYS. See attached 1696895 Confirmation R5-WSYT-WNYS-Primary_ANT, sum of Item#1 Item#4 and Item#6 as Master_Top Antenna System components description and split equally with WNYS.
<b>Sub-total</b>	\$559,781.00	\$387,357.25	N/A
<b>Total for all systems</b>	\$5,337,566.00	\$4,336,162.25	N/A

## Components

Actual Information Description	File Name
--------------------------------	-----------

Transmission Line 6-50	<p><b>Component Description:</b> Item#</p> <p><b>Amount:</b> MANI \$2,03</p>
Pattern scatter analysis for side mount high /med power antennas (if not included in antenna base cost)	<p><b>Component Description:</b> The c includ MANI</p> <p><b>Amount:</b> N/A</p>
Side mount brackets for high power antennas (if not included in antenna base cost)	<p><b>Component Description:</b> Item# and tl WNY</p> <p><b>Amount:</b> \$3,69</p>
UHF - High Power, Side Mount, basic slot antenna, 540 kW input, directional,, elliptically or circularly polarized	<p><b>Component Description:</b> Item# of inv equal</p> <p><b>Amount:</b> \$30,1</p>
Sweep test of existing antenna	<p><b>Component Description:</b> Item# repre</p> <p><b>Amount:</b> \$2,88</p>
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	<p><b>Component Description:</b> Item# down WNY</p> <p><b>Amount:</b> \$2,97</p>
Side mount brackets for high power antennas (if not included in antenna base cost)	<p><b>Component Description:</b> Item# scatte</p> <p><b>Amount:</b> \$7,39</p>

Transmission Line 7-75 EIA	<p><b>Component Description:</b> T/L d the e: inside not b</p> <p><b>Amount:</b> \$1,87</p>
Beacon Kit	<p><b>Component Description:</b> Repr invoic</p> <p><b>Amount:</b> \$2,02</p>
Antnna Monitoring Kit	<p><b>Component Description:</b> Monit Maste down</p> <p><b>Amount:</b> \$2,09</p>
Pattern scatter analysis for side mount high /med power antennas (if not included in antenna base cost)	<p><b>Component Description:</b> The c includ MANI</p> <p><b>Amount:</b> N/A</p>
New combiner, cost per channel (without antenna)	Information not provided.
Sweep test of existing antenna	<p><b>Component Description:</b> Repr MANI</p> <p><b>Amount:</b> \$2,88</p>
Elbow complex, broadband, at antenna input, per 7 3/16. feedline (if needed)	<p><b>Component Description:</b> Item# MANI</p> <p><b>Amount:</b> \$6,43</p>

UHF - High Power Top Mount (200-1000 kW),  
One station antenna , elliptically or circularly  
polarized

**Component Description:**

The a  
Item#  
MAN#  
comp  
split e  
WNY

**Amount:**

\$65,2



## Cost Information Transmission Line

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification
<b>Interim Transmission Line</b>	<b>\$222,180.00</b>	<b>\$109,365.00</b>	
Rigid Transmission Line - copper, 6 1/8"	\$220,180.00	\$107,365.00	The cost for the Interim TL is split with WNYS.
Dehydrator	<i>\$2,000.00</i>	\$2,000.00	See the attached quote for the dehydrator: 08302017 Order_Quotatio M14025 WSYT (002). The cost is split with WNYS.
<b>Primary Transmission Line</b>	<b>\$4,000.00</b>	<b>\$4,000.00</b>	
Dehydrator	<i>\$4,000.00</i>	\$4,000.00	See the attached quote for the dehydrator: 08302017 Order_Quotatio M14026 WSYT The cost is split with WNYS.
<b>Sub-total</b>	<b>\$226,180.00</b>	<b>\$113,365.00</b>	N/A
<b>Total for all systems</b>	<b>\$5,337,566.00</b>	<b>\$4,336,162.25</b>	N/A

## Components

Actual Information Description	File Name
--------------------------------	-----------

Rigid Transmission Line - copper, 6 1/8"	<p><b>Component Description:</b> Item# down split €</p> <p><b>Amount:</b> \$39,0</p>
Dehydrator	<p><b>Component Description:</b> The c Rigid with \</p> <p><b>Amount:</b> N/A</p>
Dehydrator	Information not provided.

## Cost Information Tower Equipment and Rigging Costs

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification
<b>Primary Tower TOWER</b>	<b>\$1,275,100.00</b>	<b>\$1,241,300.00</b>	
Serious tower reinforcement /modifications	\$1,052,000.00	\$1,024,000.00	See the attached acceptance order Stainless_Modification_WSYT_WNYS_S and Stainless_Service_WSYT_WNYS_S
Tall Tower (greater than 500')	\$210,500.00	\$205,000.00	See the attached acceptance order Stainless_Modification_WSYT_WNYS_S and Stainless_Service_WSYT_WNYS_S
Structural engineering tower load study for well documented tower	\$12,600.00	\$12,300.00	N/A
<b>Sub-total</b>	<b>\$1,275,100.00</b>	<b>\$1,241,300.00</b>	N/A
<b>Total for all systems</b>	<b>\$5,337,566.00</b>	<b>\$4,336,162.25</b>	N/A

### Components

Information not provided.

## Cost Information Outside Professional Services

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification
<b>Outside Professional Services</b>	<b>\$154,375.00</b>	<b>\$155,000.00</b>	
RF Exposure Measurements	\$21,050.00	\$20,000.00	N/A
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	N/A
NEPA Section 106 environmental review, if needed	\$6,310.00	\$6,000.00	N/A
Attorney Fees - Negotiation of lease and other matters for shared locations	\$4,210.00	\$4,000.00	N/A
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$5,500.00	Attorney Fee Estimates attached: Northwest Repac Cost Estimate Letter to R. Sweatte I (00113549xC33F)
Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	\$4,210.00	\$6,000.00	Attorney Fee Estimates attached: Northwest Repac Cost Estimate Letter to R. Sweatte I (00113549xC33F)
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A
Prepare request for Special Temporary Authorization	\$2,050.00	\$1,500.00	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$7,000.00	Attorney Fee Estimates

Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	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
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	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
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A
<b>Sub-total</b>	\$154,375.00	\$155,000.00	N/A
<b>Total for all systems</b>	\$5,337,566.00	\$4,336,162.25	N/A

## Components

Information not provided.

**Cost Information**

**Other Expenses**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification
<b>Other Expenses</b>	<b>\$107,920.00</b>	<b>\$107,315.00</b>	
Internal Project Management of Transition	<i>\$18,000.00</i>	\$18,000.00	120h @ \$150/h estimate.
MVPD Notification of Channel Change	<i>\$10,000.00</i>	\$10,000.00	See attached FCC Catalog of Potential Expenses and Estimated Costs
Develop and air announcement of upcoming channel change	<i>\$230.00</i>	\$230.00	See attached: Development On_Air_Announcement cost-2017
Equipment Storage	<i>\$39,500.00</i>	\$39,500.00	See the attached storage fee calculation for 8 months (32 weeks): Syracuse Repack WSYT-Storage calculation-SEPT2017 along with the Dielectric Storage Fees: "Storage Instructions and Rate Dielectric".
Equipment Delivery and Handling Charges	<i>\$25,000.00</i>	\$25,000.00	See attached FCC Catalog of Potential Expenses and Estimated Costs
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$2,000.00</i>	\$2,000.00	See attached: WSYT EWASTE-quote-Sept2017
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	N/A

DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,070.00	N/A
<b>Sub-total</b>	\$107,920.00	\$107,315.00	N/A
<b>Total for all systems</b>	\$5,337,566.00	\$4,336,162.25	N/A

### Components

Information not provided.

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

	<b>Predetermined Cost Estimate</b>	<b>Estimated Cost</b>
<b>Total for all systems</b>	\$5,337,566.00	\$4,336,162.25

**Reimbursement  
Status**

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



## Certification

Section	Question
<b>Submission of Estimated Expenses Statements</b>	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 ENTIT' 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.
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.

---

## Certification

Section	Question
<b>Submission of Actual Cost Documentation Statements</b>	<p data-bbox="794 230 1503 616">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 data-bbox="837 701 1260 2101" style="list-style-type: none"><li data-bbox="837 701 1260 943">1. The Authorized Person signing below certifies and represents that he/she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity.</li><li data-bbox="837 972 1260 1106">2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.</li><li data-bbox="837 1135 1260 1308">3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li><li data-bbox="837 1337 1260 1509">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.</li><li data-bbox="837 1538 1260 2101">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) .</li></ol>

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.

---

## Attachments