



(REFERENCE COPY - Not for submission)

FCC Form 399: Incentive Auction Relocation Reimbursement Fund System

File Number: **0000028194** | FRN: **0021167069** | Facility ID: **74464**
Repack Channel: **22 (UHF)** | Entity: **Broadcaster** | Filing Status: **Submitted**
Date Submitted: **12/19/2018**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
NRJ TV PHILLY LICENSE CO., LLC	Robert Andrews 722 S. DENTON TAP ROAD SUITE 130 COPPELL, TX 75019 United States	+1 (972) 947-3391	bob@nrjventures.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
----------	----------

<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>Replace non retuneable transmitter, replace antenna. Building new channel 22 facility at different tower, which avoids need for an interim facility.</p>

Transmitters

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

**Primary
Transmitter**

Existing Transmitter Information

Section	Question	Response
Existing Transmitter Description	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	
	Ownership	Owned
	Owner	
	Site	
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
Existing Transmitter Manufacturer and Type	Manufacturer	
	Model	TXUD400LD
	Year	2007
	Type	Solid state
	IOT Power Type	
	Description	
	Power capacity	
	Solid State Cooling	Air
	Solid State Power Capacity	.5 kw
	Other Transmitter Type	

**Primary
Transmitter**

New Transmitter Costs

Section	Question	Response
New Transmitter	Use	Primary (Main)
	Description of Use	
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Manufacturer	
	Model	UAXTE-4R37
	Transmitter Type	Solid state
	IOT Power Type	
	Other	
	Power capacity	
	Solid State Cooling	Air
	Solid State Power Capacity	2.4 kw
	Other Transmitter Type	
	Justification for New Transmitter	Elettronika is not capable of re-tuning existing transmitter due to missing documentation and software for original unit.

**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	
	Rigid Conduit and Wiring	Yes
	Size	1 inches
	Length	50.0 feet
	Other Electrical Service	Yes
	Description	Additional 208 Service for transmitter. Surge Suppressor
HVAC Service	Does the replacement transmitter require HVAC Service?	No
	Type	
	Size	
	Other Size	
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	
Channel 14 Costs	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.

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	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?	Yes
	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	Class A
	Mounting	Side-mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	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)	5.55 kW

Manufacturer	
Model	ATC- BCE66BP- 50
Year	2011

**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?	Yes
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	Yes
	New Antenna Manufacturer and Type	Class
Mounting		Top-mount single
Antenna position in stack		Not in Stack
Polarization		Circular
Type		Broadband Panel
Number of Stations Supported		1
Number of Panels/Bays		4
Lower Limit		470.00 MHz
Upper Limit		806.00 MHz
Design power capacity in use		100.0 %
Other Antenna Type		N/A
ERP: (Effective Radiated Power)		15.00 kW
Manufacturer		

Model	ATC-BPC4C2-U
Year	2018
Justification for New Antenna	Existing antenna is single frequency and will not work on new assigned channel 22.

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
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

Information not provided.

**Transmission
Line**

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

**Primary
Transmission
Line**

Existing Transmission Line

Section	Question	Response
Existing Transmission Line Description	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing transmission line shared with another station or stations?	No
	Is Transmission Line in operating condition?	Yes
Existing Transmission Line Manufacturer and Type	Manufacturer	
	Type	Flexible Air
	Diameter	1 5/8 inches
	Segment Length	N/A
	Other Segment Length	
	Number of parallel runs	1
	Length	135 feet per run

**Primary
Transmission
Line**

New Transmission Line

Section	Question	Response
New Transmission Line Costs	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Type	Rigid
	Diameter	6 1/8 inches
	Segment Length	20'
	Other Segment Length	
	Number of parallel runs	1
	Length	10 feet per run

Justification for New Transmission Line

Station is building channel 22 facility at a different tower site, avoiding need for interim facility. At new site using existing dormant trans line at no cost. Station only seeking reimb.for fine matcher, adapters, and elbows to tie in to existing line

Primary **Other Transmission Line Expenses Not Listed**
Transmission information not provided.
Line

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	Modify Existing
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	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?	Unknown
	Is tower compliant with Rev G?	Unknown
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1060096
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	40° 04' 24.0" N-
	Longitude (NAD83)	075° 11' 27.0" W-
	Overall Structure Height	289.69 feet
	Support Structure Height	289.69 feet
	Ground Elevation Above Mean Sea Level (AMSL)	350.06 feet

Structure Type	B - Building
Tower Owner	MORGAN TOWER, INC.
Date Constructed	01/01/1985

Primary Tower

Tower Modification 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

Tower Rigging Costs

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

Primary Tower

Other Tower Expenses Not Listed

Name	Description
Tower Crew Expenses	Lodging, Per Diem, Travel for tower and antenna crew

Outside Professional Services Costs

Section	Question	Response
Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	60
	Explanation	Project co-ordination of logistics, and vendors to support installation and test of system. 60 hrs at \$100 hr
Outside RF consulting Engineering Services	Perform engineering study for new channel assignment and antenna development	Yes
	Prepare engineering section of Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	No
	Quantity	N/A
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
Attorney and Other Outside Consulting Services	Prepare and file Form FCC Construction Permit Application	Yes
	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	Yes
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
RF Field Engineering Services	Comprehensive coverage verification via field study	No
	RF exposure measurements	Yes
	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
Project Management expenses	Travel, Per Diem, Lodging for project management

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	Yes
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?	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 UAXTE-4R37	\$127,800.00	\$77,605.62		\$31,622.97	
1" Rigid Conduit and Wiring	<i>\$800.00</i>	\$800.00	N/A	N/A	N/A
Other Electrical Service: Additional 208 Service for transmitter. Surge Suppressor	<i>\$4,000.00</i>	\$4,000.00	N/A	N/A	N/A
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	\$123,000.00	\$72,805.62	N/A	\$31,622.97	N/A
Sub-total	\$127,800.00	\$77,605.62	N/A	\$31,622.97	N/A
Total for all systems	\$342,393.00	\$198,203.62	N/A	\$38,897.37	N/A

Components

Actual Information	
Description	File Name
1" Rigid Conduit and Wiring	Information not provided.
Other Electrical Service: Additional 208 Service for transmitter. Surge Suppressor	Information not provided.

UHF - Air Cooled Solid
State Transmitter 1 - 2.5 kW

Component Description:

Reimbursable
portion of 1st
invoice (50%
downpayment) of
new primary
transmitter

Amount:

\$31,622.97

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 ATC-BPC4C2-U	\$45,150.00	\$35,850.00		\$1,364.00	
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	\$12,000.00	\$3,000.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,550.00	\$6,250.00	N/A	\$1,364.00	N/A
UHF - Lower Power, Top Mount, Class A, broadband panel, 4 bay,, 15 kW input, directional,, elliptically or circularly polarized	<i>\$26,600.00</i>	\$26,600.00	See actual quote from Alive Telecom included with invoice 2004-A. Estimate includes \$21,000 base price plus 8% tax plus freight at \$3,920.	\$0.00	N/A
Sub-total	\$45,150.00	\$35,850.00	N/A	\$1,364.00	N/A
Total for all systems	\$342,393.00	\$198,203.62	N/A	\$38,897.37	N/A

Components

Actual Information	
Description	File Name
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	Information not provided.
Sweep test of existing antenna	<p>Component Description: Line Sweep</p> <p>Amount: \$1,364.00</p>
UHF - Lower Power, Top Mount, Class A, broadband panel, 4 bay,, 15 kW input, directional,, elliptically or circularly polarized	Information not provided.

**Cost
Information**

Transmission Line

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	\$1,970.00	\$1,970.00		\$0.00	
Rigid Transmission Line - copper, 6 1/8"	\$1,970.00	\$1,970.00	N/A	N/A	N/A
Sub-total	\$1,970.00	\$1,970.00	N/A	\$0.00	N/A
Total for all systems	\$342,393.00	\$198,203.62	N/A	\$38,897.37	N/A

Components

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 B	\$87,125.00	\$25,225.00		\$0.00	
Short Tower (less than 500')	\$81,900.00	\$20,000.00	N/A	N/A	N/A
Tower Crew Expenses	<i>\$5,225.00</i>	\$5,225.00	On site expenses for tower and antenna installation crews.	N/A	N/A
Sub-total	\$87,125.00	\$25,225.00	N/A	\$0.00	N/A
Total for all systems	\$342,393.00	\$198,203.62	N/A	\$38,897.37	N/A

Components

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	\$64,220.00	\$44,230.00		\$5,720.40	
Project Management expenses	<i>\$2,480.00</i>	\$2,480.00	On site expenses for project management.	\$0.00	N/A
RF Exposure Measurements	\$20,500.00	\$4,500.00	N/A	N/A	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,585.00	\$500.00	N/A	\$69.00	N/A
Project management of the transition	\$9,240.00	\$9,000.00	N/A	\$3,126.40	N/A
Attorney Fees - Negotiation of lease and other matters for shared locations	\$4,095.00	\$4,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,305.00	\$2,250.00	N/A	N/A	N/A

Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,120.00	\$5,000.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,535.00	\$1,500.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,070.00	\$3,000.00	N/A	\$1,750.00	N/A
Perform engineering study for new channel assignment and antenna development	\$7,170.00	\$7,000.00	N/A	\$650.00	N/A
Address transition timing and coordination issues w/ other stations and wireless	\$2,560.00	\$2,500.00	N/A	N/A	N/A
Prepare and or review reimbursement form	\$2,560.00	\$2,500.00	N/A	\$125.00	N/A
Sub-total	\$64,220.00	\$44,230.00	N/A	\$5,720.40	N/A
Total for all systems	\$342,393.00	\$198,203.62	N/A	\$38,897.37	N/A

Components

Actual Information Description	File Name												
Project Management expenses	Information not provided.												
RF Exposure Measurements	Information not provided.												
Attorney Fees - Prepare and File request for Special Temporary Authorization	<table border="0"> <tr> <td data-bbox="695 618 1134 651">Component Description:</td> <td data-bbox="1134 618 1428 730">Prepare Special Temporary Authorization</td> </tr> <tr> <td data-bbox="695 736 1134 770">Amount:</td> <td data-bbox="1134 736 1428 770">\$69.00</td> </tr> </table>	Component Description:	Prepare Special Temporary Authorization	Amount:	\$69.00								
Component Description:	Prepare Special Temporary Authorization												
Amount:	\$69.00												
Project management of the transition	<table border="0"> <tr> <td data-bbox="695 913 1134 947">Component Description:</td> <td data-bbox="1134 913 1428 987">Project Management</td> </tr> <tr> <td data-bbox="695 994 1134 1028">Amount:</td> <td data-bbox="1134 994 1428 1028">\$2,648.90</td> </tr> <tr> <td data-bbox="695 1133 1134 1167">Component Description:</td> <td data-bbox="1134 1133 1428 1207">Project Management</td> </tr> <tr> <td data-bbox="695 1214 1134 1247">Amount:</td> <td data-bbox="1134 1214 1428 1247">\$125.00</td> </tr> <tr> <td data-bbox="695 1352 1134 1386">Component Description:</td> <td data-bbox="1134 1352 1428 1426">Project Management</td> </tr> <tr> <td data-bbox="695 1433 1134 1467">Amount:</td> <td data-bbox="1134 1433 1428 1467">\$352.50</td> </tr> </table>	Component Description:	Project Management	Amount:	\$2,648.90	Component Description:	Project Management	Amount:	\$125.00	Component Description:	Project Management	Amount:	\$352.50
Component Description:	Project Management												
Amount:	\$2,648.90												
Component Description:	Project Management												
Amount:	\$125.00												
Component Description:	Project Management												
Amount:	\$352.50												
Attorney Fees - Negotiation of lease and other matters for shared locations	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.												

<p>Prepare engineering section of FCC Form 2100 (main), License to Cover Application</p>	<p>Information not provided.</p>	
<p>Prepare engineering section of FCC Form 2100 (main), Construction Permit Application</p>	<p>Component Description:</p> <p>Amount:</p>	<p>Prep of engineering portion of initial FCC App for Construction Permit \$1,750.00</p>
<p>Perform engineering study for new channel assignment and antenna development</p>	<p>Component Description:</p> <p>Amount:</p>	<p>Interference Study of Repack Channel 22 \$650.00</p>
<p>Address transition timing and coordination issues w/ other stations and wireless</p>	<p>Information not provided.</p>	
<p>Prepare and or review reimbursement form</p>	<p>Component Description:</p> <p>Amount:</p>	<p>Prepare and/or Review Reimbursement Form \$125.00</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	\$16,128.00	\$13,323.00		\$190.00	
MVPD Notification of Channel Change	<i>\$2,400.00</i>	\$2,400.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$450.00</i>	\$450.00	Contractor to produce announcement	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$1,500.00</i>	\$1,500.00	Disposal of old transmitter and antenna	N/A	N/A
DTV Medical Facility Notification	\$11,250.00	\$8,458.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 license to cover application	\$333.00	\$325.00	N/A	N/A	N/A
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A	\$190.00	N/A
Sub-total	\$16,128.00	\$13,323.00	N/A	\$190.00	N/A
Total for all systems	\$342,393.00	\$198,203.62	N/A	\$38,897.37	N/A

Components

Actual Information	
Description	File Name
MVPD Notification of Channel Change	Information not provided.
Develop and air announcement of upcoming channel change	Information not provided.
Disposal Costs (for equipment and other waste, net of any salvage value)	Information not provided.
DTV Medical Facility Notification	Information not provided.
FCC Filing Fees - Form 2100 license to cover application	Information not provided.
FCC Filing Fees - Special Temporary Authorization request	<p>Component Description: FCC Filing Fee - Special Temporary Authorization</p> <p>Amount: \$190.00</p>

Cost Information	Grand Total		
	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$342,393.00	\$198,203.62	\$38,897.37

Construction Status	Question	Response
	Is construction complete?	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.

**Jeff
Hazelrigg**
CFO

12/19/2018

Certification	Section	Question	Response
	<p>Submission of Actual Cost Documentation 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 and represents 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. 2. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount. 	

- 3.** 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).
- 4.** 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.
- 5.** The above-named entity certifies that the cost information /documents submitted reflect costs actually incurred.
- 6.** The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.
- 7.** 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.

**Jeff
Hazelrigg**
CFO

12/19/2018

Attachments