Approved by OMB (Office of Management and Budget) 3060-1178

Federal Communications Commission

(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility ID: **74167** | Service: **DTV** | Call Sign: **WVEC** | Channel: **11 (High VHF)** | File Number: **0000028089** | FRN: **0004336020** | Date Submitted: **10/16/2018**

## Applicant Information

### Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|---|---|---|---|---|
| **WVEC TELEVISION, INC.**<br>Doing Business As: WVEC TELEVISION, INC. | Law Department<br>TEGNA Inc.<br>7950 Jones Branch Drive<br>McLean, VA 22107<br>United States | +1 (703) 873-6600 | LAWDEPT@TEGNA.com | Corporation |

## 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 |
|---|---|---|---|
| **Jeffrey Johnson , Johnson .**<br>*Vice President Projects*<br>*TEGNA* | Jeffrey Johnson<br>7950 Jones Branch Drive<br>McLean, VA 22102<br>United States | +1 (703) 873-6736 | jsjohnson@tegna.com |

## 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. | No |
| Briefly describe transition plan | WVEC will be transitioning from channel 13 to channel 11 which requires a new primary antenna, transmitter and transmission line as well as an interim antenna and line. |

## Transmitters

| Section | Question | Response |
|---|---|---|
| **Transmitter Related Expenses** | Do you have transmitter related expenses? | Yes |

## Auxiliary Transmitter

### Add Transmitter Information

| Section | Question | Response |
|---|---|---|
| **Existing Transmitter Description** | Type of change | Purchase New |
| | Use | Auxiliary (Backup) |
| | Description of Use | Backup full power transmitter |
| | 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 | PTCD20P2I |
| | Year | 1994 |
| | Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power Capacity | 8 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-12 |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power capacity | 8.6 kW |
| | Justification for New Transmitter | Old transmitter cannot be re-tuned per manufacturers notification. |

## 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 | Yes |
| | Size | 3 inches |
| | Length | 100.0 feet |
| | Other Electrical Service | Yes |

| | | |
|---|---|---|
| | Description | Additional electrical services required for transmitter installation. |
| **HVAC Service** | Does the replacement transmitter require HVAC Service? | Yes |
| | Type | Heating and Cooling |
| | Size | 5 tons |
| | 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 |

## 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 | PTCD20P2I |
| | Year | 1994 |
| | Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power Capacity | 8 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-12 |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power capacity | 9.6 kW |
| | Justification for New Transmitter | Old transmitters not re-tuneble per manufacturer's notification. |

## 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 | Yes |
| | Size | 3 inches |
| | Length | 100.0 feet |
| | Other Electrical Service | Yes |

| | | |
|---|---|---|
| | Description | Additional electrical services required for transmitter installation. |
| **HVAC Service** | Does the replacement transmitter require HVAC Service? | Yes |
| | Type | Heating and Cooling |
| | Size | 5 tons |
| | Other Size | N/A |
| **Transmitter Building Addition/Modification or Leasehold Improvement** | Does the Transmitter Building require an addition, modification, other leashold improvement? | No |
| | Size | N/A |
| **Channel 14 Costs** | Is an RF Consulting Engineer needed? | N/A |
| | Is a channel 14 Mask Filer needed? | N/A |
| | Is additional field engineering time needed? | N/A |
| | Number of Days | N/A |

## Primary Transmitter

### Other Transmitter Cost Not Listed

Information not provided.

## Antennas

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

## Auxiliary Antenna

### Add Antenna Information

| Section | Question | Response |
|---|---|---|
| **Existing Antenna Description** | Type of change | Purchase New |
| | Antenna Use | Auxiliary (Backup) |
| | Description of Use | Full Power Backup Antenna |
| | Ownership | Owned |
| | Owner | N/A |
| | Site | N/A |
| | Is this antenna currently shared with any other stations? | No |
| | Is this antenna directional? | No |
| | Is antenna in operating condition? | Yes |
| | Is antenna located on or in close proximity to an antenna farm? | No |
| **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) | 35.0 kW |
| Manufacturer | |
| Model | TSL-VBB |
| Year | 2017 |

## Auxiliary Antenna

### New Antenna Costs

| Section | Question | Response |
|---|---|---|
| **New Antenna Description** | Use | Auxiliary (Backup) |
| | Description of Use | Full Power backup antenna |
| | 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? | No |
| **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) | 35.0 kW |
| | Manufacturer | |

| | |
|---|---|
| Model | TSL-VBB |
| Year | 2019 |
| Justification for New Antenna | Old antenna cannot be re-tuned |

## 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? | Yes |
| **Sweep Test** | Do you require the sweep testing of transmission line and antenna? | Yes |

## Auxiliary Antenna

### Other Antenna Cost Not Listed

| Name | Description |
| --- | --- |
| **Shipping** | $5,400 |

## 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? | No |
| **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) | 35.0 kW |
| | | |

| | |
|---|---|
| Manufacturer | |
| Model | TCL-12A13 |
| Year | 1999 |

## 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? | No |
| **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) | 35.0 kW |
| | Manufacturer | |

| | | |
|---|---|---|
| | Model | THV-12A11 /VP-R 04 |
| | Year | 2019 |
| | Justification for New Antenna | Station's licensed circularly polarized, top-mount, main antenna cannot be re-tuned and must be replaced for new channel assignment. |

**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 |
|---|---|
| **New Top Plate** | Existing top-plate and/or bolt pattern may not work for new top-mount antenna |
| **Shipping** | $6,800 |

## Transmission Line

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

## Primary Transmission Line

### Add Transmission Line

| Section | Question | Response |
|---|---|---|
| **Existing Transmission Line Description** | Type of change | Utilize Existing |
| | Use | Primary (Main) |
| | Description of Use | N/A |
| | Ownership | Owned |
| | Owner | N/A |
| | Site | N/A |
| | Is this transmission currently shared with any other stations? | No |
| | Is Transmission Line in operating condition? | Yes |
| **Existing Transmission Line Manufacturer and Type** | Manufacturer | Dielectric |
| | Type | Rigid |
| | Diameter | 4 1/16 inches |
| | Other Diameter | N/A |
| | Segment Length | 20 inches |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 1300 feet per run |

## Primary Transmission Line

### Other Transmission Line Expenses Not Listed

| Name | Description |
|---|---|
| **TX Line Sweep** | Sweep required to verify post-transition channel measures well on existing line. |

## Auxiliary Transmission Line

### Add Transmission Line

| Section | Question | Response |
|---|---|---|
| **Existing Transmission Line Description** | Type of change | Utilize Existing |
| | Use | Auxiliary (Backup) |
| | Description of Use | Used for maintenane a and primary facility repair |
| | Ownership | Owned |
| | Owner | N/A |
| | Site | N/A |
| | Is this transmission currently shared with any other stations? | No |
| | Is Transmission Line in operating condition? | Yes |
| **Existing Transmission Line Manufacturer and Type** | Manufacturer | Dielectric |
| | Type | Rigid |
| | Diameter | 6 1/8 inches |
| | Other Diameter | N/A |
| | Segment Length | 20 inches |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 1250 feet per run |

## Auxiliary Transmission Line

### Other Transmission Line Expenses Not Listed

| Name | Description |
| --- | --- |
| **TX Line Sweep** | Sweep required to verify post-transition channel measures well on existing 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 | Owned |
| | Is this tower consider Complex? | No |
| | Is this tower currently shared with any other stations? | No |
| | One or more FM, AM or TV radio broadcaster(s) | N/A |
| | Others Types of Users | N/A |
| | Is tower documented for structural analysis? | No |
| | Is tower compliant with Rev G? | No |
| **Existing Tower Structure Registration** | Do you have a tower registration number? | Yes |
| | ASR Number | 1043102 |
| **Coordinates (NAD83 ( North American Datum of 1983))** | Latitude (NAD83) | 36° 49' 00.0" N- |
| | Longitude (NAD83) | 076° 28' 05.0" W- |
| | Overall Structure Height | 1225.05 feet |
| | Support Structure Height | 1095.79 feet |
| | Ground Elevation Above Mean Sea Level (AMSL) | 23.95 feet |

| | |
|---|---|
| Structure Type | TOWER - Free Standing or Guyed Structure |
| Tower Owner | WVEC TELEVISION INC |
| Date Constructed | 06/24/1999 |

**Primary Tower**

### Tower Modification Costs

| Section | Question | Response |
|---|---|---|
| **Engineering Study** | Please what type of engineering study is required, if any: | Study needed for undocumented /poorly documented tower |
| **Tower Reinforcements** | Please select whether tower reinforcements are needed: | Major 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

Information not provided.

## Outside Professional Services Costs

| Section | Question | Response |
|---|---|---|
| **Outside Project Management Services** | Do you require outside project management services? | Yes |
| | Number of Hours | 1000 |
| | Explanation | It will be necessary to schedule and coordinate multiple vendors, complete progress reports, and update Schedule 399s. Station does not have available personnel or personnel trained in project management for such complex projects. |
| **Outside RF consulting Engineering Services** | Perform engineering study for new channel assignment and antenna development | Yes |
| | Prepare engineering section of Form FCC Construction Permit Application | Yes |
| | For Auxiliary Facility | No |
| | For Main Facility | Yes |
| | Prepare engineering section of Form FCC License to Cover Application | Yes |
| | For Auxiliary Facility | No |
| | For Main Facility | Yes |
| | Prepare request for Special Temporary Authority | Yes |

| | | |
|---|---|---|
| | Quantity | 2 |
| | 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 | 2 |
| | NEPA Section 106 environmental review | No |
| | Environmental Assessment | No |
| | ASR Modification | Yes |
| | FAA Consultation (including preparation of FAA Form 7460) | Yes |
| | 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 | Yes |
| | RF exposure measurements | Yes |
| | Additional Field Engineering Service | Yes |

| | |
|---|---|
| Number of Days | 20 |
| Justification | $2,500 per site visit including expenses x 20 days. It is necessary to survey the site, plan the equipment, develop specifications for purchasing, & oversee multiple vendor RF projects. Station does not have available personnel trained in such services. |

## Outside Professional Services Costs

### Other Professional Services Expenses Not Listed

| Name | Description |
|---|---|
| **Pre filing site review** | Outside engineering firm to review all sites before filling. |

## Other Expenses

| Section | Question | Response |
|---|---|---|
| **AM Pattern Disturbance** | Is an Impact Study needed? | Yes |
| | Is Remediation needed? | Yes |
| **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 | Yes |
| | Non-zoning permits | Yes |
| | BLM or NFS Coordination | No |
| | FCC Construction Permit Minor Change | Yes |
| | 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? | Yes |
| | Does this relocation require Equipment Storage? | Yes |
| | 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

| Name | Description |
| --- | --- |
| **Internal labor** | Local and Corporate labor Costs |

## 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-12** | **$386,700.00** | **$406,381.40** | | **$0.00** | |
| Other -- HVAC Service Type: H Size: 5 (Other) | ***$25,000.00*** | $25,000.00 | Additional HVAC is required for operation of new air-cooled solid-state transmitter while still operating with main air-cooled transmitter during testing period. | N/A | N/A |
| High VHF - Air Cooled Solid State Transmitter 6.5 . 12.5 kW | $331,500.00 | $351,481.40 | Per Gates AIR Quote. Includes TAX | N/A | N/A |
| 3" Rigid Conduit and Wiring (Cost per foot) | $5,200.00 | $4,900.00 | N/A | N/A | N/A |
| Other Electrical Service: Additional electrical services required for transmitter installation. | ***$25,000.00*** | $25,000.00 | Additional electrical services required for transmitter installation. | N/A | N/A |

| | | | | | |
|---|---|---|---|---|---|
| **Auxiliary Transmitter VAXTE-12** | **$386,700.00** | **$406,381.40** | | **$0.00** | |
| Other -- HVAC Service Type: H Size: 5 (Other) | ***$25,000.00*** | $25,000.00 | Additional HVAC is required for operation of new air-cooled solid-state transmitter while still operating with main air-cooled transmitter during testing period. | N/A | N/A |
| Other Electrical Service: Additional electrical services required for transmitter installation. | ***$25,000.00*** | $25,000.00 | Additional electrical services required for transmitter installation. | N/A | N/A |
| 3" Rigid Conduit and Wiring (Cost per foot) | $5,200.00 | $4,900.00 | N/A | N/A | N/A |
| High VHF - Air Cooled Solid State Transmitter 6.5 . 12.5 kW | $331,500.00 | $351,481.40 | Per Gates Air quote. Includes TAX | N/A | N/A |
| **Sub-total** | $773,400.00 | $812,762.80 | N/A | $0.00 | N/A |
| **Total for all systems** | $2,508,583.00 | $2,492,732.80 | N/A | $4,545.00 | 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-12A11/VP-R 04** | **$424,830.00** | **$423,900.00** | | **$0.00** | |
| Elbow complex, single channel, at antenna input, per 6 1 /8. feedline (if needed) | $12,300.00 | $11,700.00 | N/A | N/A | N/A |
| New Top Plate | ***$25,000.00*** | $25,000.00 | Existing top-plate and/or bolt pattern may not work for new top-mount antenna | N/A | N/A |
| High VHF - High Power Top Mount One Station elliptically or circularly polarized | ***$374,000.00*** | $374,000.00 | Per Widelity Estimate | N/A | N/A |
| Sweep test of existing antenna | $6,730.00 | $6,400.00 | N/A | N/A | N/A |
| Shipping | ***$6,800.00*** | $6,800.00 | N/A | N/A | N/A |
| **Auxiliary Antenna TSL-VBB** | **$95,035.00** | **$91,957.00** | | **$0.00** | |

| | | | | | |
|---|---|---|---|---|---|
| Shipping | ***$5,400.00*** | $5,400.00 | N/A | N/A | 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 | N/A | N/A |
| Side mount brackets for high power antennas (if not included in antenna base cost) | $23,150.00 | $22,000.00 | N/A | N/A | N/A |
| Elbow complex, single channel, at antenna input, per 4 1 /16. feedline (if needed) | $9,570.00 | $8,232.00 | N/A | N/A | N/A |
| Sweep test of existing antenna | $6,730.00 | $6,400.00 | N/A | N/A | N/A |
| High VHF - High Power Side Mount One Station elliptically or circularly polarized | ***$44,925.00*** | $44,925.00 | per Widelity estimate | N/A | N/A |
| **Sub-total** | $519,865.00 | $515,857.00 | N/A | $0.00 | N/A |
| **Total for all systems** | $2,508,583.00 | $2,492,732.80 | N/A | $4,545.00 | N/A |

### Components

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** | **$6,400.00** | **$6,400.00** | | **$0.00** | |
| TX Line Sweep | ***$6,400.00*** | $6,400.00 | Sweep required to verify post-transition channel measures well on existing line. | N/A | N/A |
| **Auxiliary Transmission Line** | **$6,400.00** | **$6,400.00** | | **$0.00** | |
| TX Line Sweep | ***$6,400.00*** | $6,400.00 | Sweep required to verify post-transition channel measures well on existing line. | N/A | N/A |
| **Sub-total** | $12,800.00 | $12,800.00 | N/A | $0.00 | N/A |
| **Total for all systems** | $2,508,583.00 | $2,492,732.80 | N/A | $4,545.00 | 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 TOWER** | **$657,800.00** | **$625,000.00** | | **$0.00** | |
| Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study | $26,300.00 | $25,000.00 | N/A | N/A | N/A |
| Major tower reinforcement /modifications | $421,000.00 | $400,000.00 | N/A | N/A | N/A |
| Tall Tower (greater than 500') | $210,500.00 | $200,000.00 | N/A | N/A | N/A |
| **Sub-total** | $657,800.00 | $625,000.00 | N/A | $0.00 | N/A |
| **Total for all systems** | $2,508,583.00 | $2,492,732.80 | N/A | $4,545.00 | 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** | **$377,610.00** | **$361,250.00** | | **$1,275.00** | |
| Pre filing site review | ***$19,500.00*** | $19,500.00 | N/A | N/A | N/A |
| Additional Field Engineering Service, 20 Days | ***$50,000.00*** | $50,000.00 | $2,500 per site visit including expenses x 20 days. It is necessary to survey the site, plan the equipment, develop specifications for purchasing, & oversee multiple vendor RF projects. Station does not have available personnel trained in such services. | N/A | N/A |
| RF Exposure Measurements | $21,050.00 | $20,000.00 | N/A | N/A | N/A |
| Comprehensive coverage verification via field study, if needed | $84,200.00 | $80,000.00 | Per Widelity estimate | N/A | N/A |

| | | | | | |
|---|---|---|---|---|---|
| FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase | $2,105.00 | $2,000.00 | N/A | N/A | N/A |
| Attorney Fees - Prepare and File request for Special Temporary Authorization | $7,360.00 | $7,000.00 | N/A | N/A | N/A |
| Attorney Fees - Negotiation of lease and other matters for shared locations | $4,210.00 | $4,000.00 | N/A | N/A | N/A |
| Project management of the transition | $158,000.00 | $150,000.00 | It will be necessary to schedule and coordinate multiple vendors, complete progress reports, and update Schedule 399s. Station does not have available personnel or personnel trained in project management for such complex projects. | $1,275.00 | 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 |
| Prepare request for Special Temporary Authorization | $4,100.00 | $3,000.00 | 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 |
| 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 |
| ASR modification (prepare FCC Form 854) | $2,105.00 | $2,000.00 | 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 | N/A | N/A |
| Perform engineering study for new channel assignment and antenna development | $7,360.00 | $7,000.00 | N/A | N/A | 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** | $377,610.00 | $361,250.00 | N/A | $1,275.00 | N/A |
| **Total for all systems** | $2,508,583.00 | $2,492,732.80 | N/A | $4,545.00 | N/A |

## Components

| Actual Information Description | File Name |
|---|---|
| Pre filing site review | Information not provided. |
| Additional Field Engineering Service, 20 Days | Information not provided. |
| RF Exposure Measurements | Information not provided. |
| Comprehensive coverage verification via field study, if needed | Information not provided. |
| FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase | Information not provided. |
| Attorney Fees - Prepare and File request for Special Temporary Authorization | Information not provided. |
| Attorney Fees - Negotiation of lease and other matters for shared locations | Information not provided. |

| | | |
|---|---|---|
| Project management of the transition | **Component Description:**<br><br>**Amount:** | Inv 29210 WVEC Proj Mgt 180428-180525 UL20180706jg v1<br>$1,275.00 |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | Information not provided. | |
| Prepare request for Special Temporary Authorization | Information not provided. | |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | Information not provided. | |
| Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application | Information not provided. | |
| ASR modification (prepare FCC Form 854) | Information not provided. | |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | Information not provided. | |
| Perform engineering study for new channel assignment and antenna development | Information not provided. | |
| 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** | **$167,108.00** | **$165,063.00** | | **$3,270.00** | |
| Internal labor | ***$22,228.00*** | $22,228.00 | N/A | N/A | N/A |
| MVPD Notification of Channel Change | ***$6,000.00*** | $6,000.00 | promotional campaign for MVPD notification | N/A | N/A |
| Develop and air announcement of upcoming channel change | ***$6,000.00*** | $6,000.00 | 40 hours at $150 per hour to shoot,write, produce and edit local informational spot. | $3,270.00 | N/A |
| Equipment Storage | ***$15,000.00*** | $15,000.00 | 2 flat bed trailer storage for 6 months per Dielectric. | N/A | N/A |
| Equipment Delivery and Handling Charges | ***$25,000.00*** | $25,000.00 | N/A | N/A | N/A |
| Disposal Costs (for equipment and other waste, net of any salvage value) | ***$25,000.00*** | $25,000.00 | N/A | N/A | N/A |
| Non-zoning permits | ***$25,000.00*** | $25,000.00 | N/A | N/A | N/A |

| | | | | | |
|---|---|---|---|---|---|
| Local Zoning | ***$750.00*** | $750.00 | 3 cents per hundred on construction for permit. | N/A | N/A |
| FCC Filing Fees - Special Temporary Authorization request | $195.00 | $190.00 | 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 |
| FCC Filing Fees - Form 2100 minor change CP application | $1,110.00 | $1,070.00 | N/A | N/A | N/A |
| DTV Medical Facility Notification | $11,550.00 | $11,000.00 | N/A | N/A | N/A |
| AM Pattern Disturbance -- Remedy | $21,050.00 | $20,000.00 | N/A | N/A | N/A |
| AM Pattern Disturbance -- Impact study | $7,890.00 | $7,500.00 | N/A | N/A | N/A |
| **Sub-total** | $167,108.00 | $165,063.00 | N/A | $3,270.00 | N/A |
| **Total for all systems** | $2,508,583.00 | $2,492,732.80 | N/A | $4,545.00 | N/A |

## Components

| Actual Information Description | File Name |
|---|---|
| Internal labor | Information not provided. |
| MVPD Notification of Channel Change | Information not provided. |

| | | |
|---|---|---|
| Develop and air announcement of upcoming channel change | **Component Description:**<br><br><br><br><br>**Amount:** | 2C Media inv #203806 Creation of channel change announcement UL20181016jgv1<br>$3,270.00 |
| Equipment Storage | Information not provided. | |
| Equipment Delivery and Handling Charges | Information not provided. | |
| Disposal Costs (for equipment and other waste, net of any salvage value) | Information not provided. | |
| Non-zoning permits | Information not provided. | |
| Local Zoning | Information not provided. | |
| FCC Filing Fees - Special Temporary Authorization request | Information not provided. | |
| FCC Filing Fees - Form 2100 license to cover application | Information not provided. | |
| FCC Filing Fees - Form 2100 minor change CP application | Information not provided. | |
| DTV Medical Facility Notification | Information not provided. | |
| AM Pattern Disturbance -- Remedy | Information not provided. | |
| AM Pattern Disturbance -- Impact study | Information not provided. | |

## Cost Information

### Grand Total

| | Predetermined Cost Estimate | Estimated Cost | Actual Cost |
|---|---|---|---|
| **Total for all systems** | $2,508,583.00 | $2,492,732.80 | $4,545.00 |

## 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 |
| --- | --- | --- |
| **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.<br>2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.<br>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. | **Jeffrey C Gehman**<br>*Engineering Associate*<br><br>10/16/2018 |

## Certification

| Section | Question | Response |
| --- | --- | --- |
| **Submission of Actual Cost Documentation Statements** | WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISIONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733). | |
| | 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.<br>2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.<br>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.<br>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. | **Jeffrey C Gehman**<br>*Engineering Associate*<br><br>10/16/2018 |

## Attachments