



(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: **0032111395** | Date **04/24**  
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@NORT COM

## Reimbursement Contact Information

### Reimbursement Contact Name and Information

Applicant	Address	Phone
[Confidential]		

## Preparer Contact Information

### Preparer Contact Name and Information

Applicant	A
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 retune to the new channel transmission line, while i
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**Transmitters**

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

**Primary  
Transmitter**

**Existing Transmitter Information**

Section	Question
Existing Transmitter Description	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?
Existing Transmitter Manufacturer and Type	Manufacturer
	Model
	Year
	Type
	IOT Power Type
	Power Capacity

Primary  
Transmitter

New Transmitter Costs

Section	Question
New Transmitter	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
Electrical Service	Service Entrance (3 phases 800A 208V)
	Switchgear (industrial 800 amp)
	Transformer (480V)
	Power
	Rigid Conduit and Wiring
	Size
	Length
	Other Electrical Service
	Description
HVAC Service	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 or 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
New Transmitter	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
Electrical Service	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 or 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
Existing Antenna Description	Type of change
	Antenna Use
	Description of Use
	Ownership
	Owner
	Site
	Is the existing antenna shared with another station or station
	Is the existing antenna directional?
	Is antenna in operating condition?
	Is antenna located on or in close proximity to an antenna farm
Existing Antenna Manufacturer and Type	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
New Antenna Description	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 antenn farm?
New Antenna Manufacturer and Types	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
Combiner for Shared Antenna	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?
Elbow Complex	Do you require the separate purchase of the Elbow Complex
	Broadband or Single Channel?
	Feed Line Size
Side Mount Brackets	Do you require the separate purchase of side mount bracket a high power antenna?
Pattern Scatter Analysis	Do you require separate purchase of pattern scatter analysis a side mount high or medium power antenna?
Sweep Test	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
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<b>Transmission Line 7-75 EIA</b>	T/L 7-75 EIA Length 15' existing line
<b>Beacon Kit</b>	Beacon Kit for support p
<b>Antnna Monitoring Kit</b>	RF Scout Assembly for :

Interim Antenna

New Antenna Costs

Section	Question
New Antenna Description	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 antenn farm?
New Antenna Manufacturer and Type	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
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**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 bracket an antenna?
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis 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
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<b>Transmission Line 6-50</b>	T/L various fixed lengths /L with the Inside RF sys
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**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**

Section	Question
New Transmission Line Costs	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**

Name	Description
Dehydrator	Pressurization Equipme

## 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
Existing Tower Description	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?
Existing Tower Structure Registration	Do you have a tower registration number?
	ASR Number
Coordinates (NAD83 (North American Datum of 1983))	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
Outside Project Management Services	Do you require outside project management services?
	Number of Hours
	Explanation
Outside RF consulting Engineering Services	Perform engineering study for new channel assignment and antenna development
	Prepare engineering section of Form FCC Construction Permit 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
Attorney and Other Outside Consulting Services	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 a 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 prepare systems engineering pla preparations, CP budge

## Cost Information

### Transmitters

Where no predetermined cost estimate is available, any estimate provided will also be (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>\$555,325.00</b>	
UHF inside RF system including switching	\$147,500.00	\$70,000.00	The Interim TX cc split with WNYS. attached quote: W Revised Interim TH 20 Sales- Quote_131652_201 005347UTC
Other -- Building Addition Size: 200.0	<i>\$10,000.00</i>	\$10,000.00	Estimate for poss costs of buildir modifications
2" Rigid Conduit and Wiring (Cost per foot)	\$3,900.00	\$1,875.00	The Interim TX cc split with WNY
Transformer 3 phase/480v - 150 KVA	\$25,550.00	\$12,450.00	The Interim TX cc split with WNYS. attached quote for I TX:WSYT Revised THU9evo-20 Sa Quote_131652_201 005347UTC
UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	\$947,000.00	\$461,000.00	The Interim TX cc split with WNYS. attached quote for I TX:WSYT Revised THU9evo-20 Sa Quote_131652_201 005347UTC
<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 poss costs of buildir 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
UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	\$1,473,000.00	\$1,400,000.00	See attached SS-T. notification:Syrac Repack WSYT-S: Upgrade-SEPT2 rev01,with:authoriz new CP-540K-Ja 2018,TPO-ERP C WSYT-TOP_Ant-I rev01,C-70579- THU9evo_bro_en_ 5860-12_v0100,V CH14 THU9evo-24 /30 AMPs quot
Transformer 3 phase/480v - 500 KVA	\$48,400.00	\$46,000.00	N/A
<b>Sub-total</b>	\$3,014,210.00	\$2,342,825.00	N/A
<b>Total for all systems</b>	\$5,337,566.00	\$4,347,162.25	N/A

## Components

Actual Information Description	File Name
UHF inside RF system including switching	<p><b>Component Description:</b> Ne rec Re 20' rep (50 <b>Amount:</b> \$1:</p>
Other -- Building Addition Size: 200.0	<p><b>Component Description:</b> Se <b>Amount:</b> \$2,</p>

2" Rigid Conduit and Wiring (Cost per foot)	Information not provided.
Transformer 3 phase/480v - 150 KVA	<div> <div>Component Description:</div> <div>Ne rec Re 20' 95' 30' spl \$97</div> </div> <div> <div>Amount:</div> <div></div> </div>
UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	<div> <div>Component Description:</div> <div>Ne req Re 20' 95' 30' spl \$97</div> </div> <div> <div>Amount:</div> <div></div> </div>
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.
UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	Information not provided.
Transformer 3 phase/480v - 500 KVA	Information not provided.

Cost Information

Antennas

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Justification
Interim Antenna TFU-18DSC-R T140	\$119,019.00	\$97,797.75	
UHF - High Power, Side Mount, basic slot antenna, 540 kW input, directional,, elliptically or circularly polarized	\$67,050.00	\$67,050.00	The interim Antenna cost split with W Dielectric cost attached: V D14 D1 interim_A Order. See attached transition Syracuse Repack W Transition sketch SEPT20 rev02
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$8,212.50	The Interim Antenna cost split with W Dielectric cost attached: V D14 D1 interim_A Order. See attached transition Syracuse Repack W Transition sketch SEPT20 rev02
Transmission Line 6-50	\$4,529.00	\$4,529.00	N/A
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 Inter Antenna c split with V Dielectric c attached: V D14 D1 interim_Al Order. See attache transition Syracuse Repack W Transition sketch SEPT20 rev02
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
<b>Primary Antenna TFU-20DSC-R T140 DC</b>	<b>\$440,762.00</b>	<b>\$289,559.50</b>	
UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized	\$289,500.00	\$145,087.50	The cost fo Master_1 Mount Ant is split w WNYS. S attache 169689 Confirmatic WSYT-WI Primary_A sum of lter Item#4 a Item#6 : Master_1 Antenna Sy compone descriptior split equally WNYS
Antnna Monitoring Kit	<b>\$6,400.00</b>	\$6,400.00	N/A
Beacon Kit	<b>\$4,500.00</b>	\$4,500.00	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	\$22,000.00	Dielectric c attached: V D14-WNYS Primary_A Order
Elbow complex, broadband, at antenna input, per 7 3/16. feedline (if needed)	\$16,850.00	\$16,000.00	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
Transmission Line 7-75 EIA	<b>\$4,172.00</b>	\$4,172.00	N/A
<b>Sub-total</b>	\$559,781.00	\$387,357.25	N/A
<b>Total for all systems</b>	\$5,337,566.00	\$4,347,162.25	N/A

## Components

Actual Information Description	File Name
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<p>UHF - High Power, Side Mount, basic slot antenna, 540 kW input, directional,, elliptically or circularly polarized</p>	<table><tr><td data-bbox="1007 96 1422 448"><b>Component Description:</b></td><td data-bbox="1422 96 1501 448">Att Syl Inv Co to s MA WN</td></tr><tr><td data-bbox="1007 448 1422 560"><b>Amount:</b></td><td data-bbox="1422 448 1501 560">\$30</td></tr><tr><td data-bbox="1007 560 1422 851"><b>Component Description:</b></td><td data-bbox="1422 560 1501 851">Ne rec Re MA rep MA WN</td></tr><tr><td data-bbox="1007 851 1422 965"><b>Amount:</b></td><td data-bbox="1422 851 1501 965">\$30</td></tr></table>	<b>Component Description:</b>	Att Syl Inv Co to s MA WN	<b>Amount:</b>	\$30	<b>Component Description:</b>	Ne rec Re MA rep MA WN	<b>Amount:</b>	\$30
<b>Component Description:</b>	Att Syl Inv Co to s MA WN								
<b>Amount:</b>	\$30								
<b>Component Description:</b>	Ne rec Re MA rep MA WN								
<b>Amount:</b>	\$30								
<p>Side mount brackets for high power antennas (if not included in antenna base cost)</p>	<table><tr><td data-bbox="1007 965 1422 1276"><b>Component Description:</b></td><td data-bbox="1422 965 1501 1276">Ne rec Re MA inc am</td></tr><tr><td data-bbox="1007 1276 1422 1388"><b>Amount:</b></td><td data-bbox="1422 1276 1501 1388">\$3,</td></tr><tr><td data-bbox="1007 1388 1422 1657"><b>Component Description:</b></td><td data-bbox="1422 1388 1501 1657">Att Syl Inv Co scæ eqi</td></tr><tr><td data-bbox="1007 1657 1422 1758"><b>Amount:</b></td><td data-bbox="1422 1657 1501 1758">\$3,</td></tr></table>	<b>Component Description:</b>	Ne rec Re MA inc am	<b>Amount:</b>	\$3,	<b>Component Description:</b>	Att Syl Inv Co scæ eqi	<b>Amount:</b>	\$3,
<b>Component Description:</b>	Ne rec Re MA inc am								
<b>Amount:</b>	\$3,								
<b>Component Description:</b>	Att Syl Inv Co scæ eqi								
<b>Amount:</b>	\$3,								

Transmission Line 6-50	<div> <div> Component Description: Ne req Re MA 45' MA </div> <div> Amount: \$2, </div> </div> <div> <div> Component Description: Att Syl Inv Co dov </div> <div> Amount: \$2, </div> </div>
Sweep test of existing antenna	<div> <div> Component Description: Ne req Re MA inv dov </div> <div> Amount: \$2, </div> </div> <div> <div> Component Description: Att Syl Inv Co MA shi </div> <div> Amount: \$2, </div> </div>

<p>Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)</p>	<table><tr><td data-bbox="1007 96 1326 409"><b>Component Description:</b></td><td data-bbox="1326 96 1501 409">Ne req Re MA Inv pay \$2,</td></tr><tr><td data-bbox="1007 409 1326 499"><b>Amount:</b></td><td data-bbox="1326 409 1501 499"></td></tr><tr><td data-bbox="1007 499 1326 813"><b>Component Description:</b></td><td data-bbox="1326 499 1501 813">Att Syl Inv Co MA pay sta \$2,</td></tr><tr><td data-bbox="1007 813 1326 925"><b>Amount:</b></td><td data-bbox="1326 813 1501 925"></td></tr></table>	<b>Component Description:</b>	Ne req Re MA Inv pay \$2,	<b>Amount:</b>		<b>Component Description:</b>	Att Syl Inv Co MA pay sta \$2,	<b>Amount:</b>	
<b>Component Description:</b>	Ne req Re MA Inv pay \$2,								
<b>Amount:</b>									
<b>Component Description:</b>	Att Syl Inv Co MA pay sta \$2,								
<b>Amount:</b>									
<p>Pattern scatter analysis for side mount high /med power antennas (if not included in antenna base cost)</p>	<table><tr><td data-bbox="1007 925 1326 1066"><b>Component Description:</b></td><td data-bbox="1326 925 1501 1066">The in I N//</td></tr><tr><td data-bbox="1007 1066 1326 1178"><b>Amount:</b></td><td data-bbox="1326 1066 1501 1178"></td></tr></table>	<b>Component Description:</b>	The in I N//	<b>Amount:</b>					
<b>Component Description:</b>	The in I N//								
<b>Amount:</b>									
<p>UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized</p>	<table><tr><td data-bbox="1007 1178 1326 1581"><b>Component Description:</b></td><td data-bbox="1326 1178 1501 1581">Att Syl Inv Co sur MA pay Syl \$6!</td></tr><tr><td data-bbox="1007 1581 1326 1671"><b>Amount:</b></td><td data-bbox="1326 1581 1501 1671"></td></tr><tr><td data-bbox="1007 1671 1326 1984"><b>Component Description:</b></td><td data-bbox="1326 1671 1501 1984">Ne req Re AP rep lter cor \$6!</td></tr><tr><td data-bbox="1007 1984 1326 2089"><b>Amount:</b></td><td data-bbox="1326 1984 1501 2089"></td></tr></table>	<b>Component Description:</b>	Att Syl Inv Co sur MA pay Syl \$6!	<b>Amount:</b>		<b>Component Description:</b>	Ne req Re AP rep lter cor \$6!	<b>Amount:</b>	
<b>Component Description:</b>	Att Syl Inv Co sur MA pay Syl \$6!								
<b>Amount:</b>									
<b>Component Description:</b>	Ne req Re AP rep lter cor \$6!								
<b>Amount:</b>									

Antenna Monitoring Kit	<b>Component Description:</b>	Att Syl Inv Co uni lter pay
	<b>Amount:</b>	\$2,
	<b>Component Description:</b>	Ne rec Re AP pro Sys inv
	<b>Amount:</b>	\$2,
Beacon Kit	<b>Component Description:</b>	Att Syl Inv Co shi MA
	<b>Amount:</b>	\$2,
	<b>Component Description:</b>	Ne rec Re AP a d MA
	<b>Amount:</b>	\$2,
Pattern scatter analysis for side mount high /med power antennas (if not included in antenna base cost)	<b>Component Description:</b>	Th wit
	<b>Amount:</b>	N/

Side mount brackets for high power antennas (if not included in antenna base cost)	<div> <div> Component Description: Att: Syl Inv Co inc </div> <div> Amount: \$7, </div> </div> <div> <div> Component Description: Ne req Re AP Pri too </div> <div> Amount: \$7, </div> </div>
Elbow complex, broadband, at antenna input, per 7 3/16. feedline (if needed)	<div> <div> Component Description: Att: Syl Inv Co dov </div> <div> Amount: \$6, </div> </div> <div> <div> Component Description: Ne req Re AP dov </div> <div> Amount: \$6, </div> </div>
New combiner, cost per channel (without antenna)	Information not provided.

Sweep test of existing antenna	<b>Component Description:</b>	Att Syl Inv Co shi lter
	<b>Amount:</b>	\$2,
	<b>Component Description:</b>	Ne req Re AP 45' lter
	<b>Amount:</b>	\$2,
Transmission Line 7-75 EIA	<b>Component Description:</b>	Att Syl Inv Co to c wit
	<b>Amount:</b>	\$1,
	<b>Component Description:</b>	Ne req Re AP len on
	<b>Amount:</b>	\$1,

Cost Information

Transmission Line

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Justification
Interim Transmission Line	\$222,180.00	\$109,365.00	
Dehydrator	\$2,000.00	\$2,000.00	See the attached quote for the dehydrator 083020- Order_Quote M14025 W (002). The cost is split with WNYS
Rigid Transmission Line - copper, 6 1/8"	\$220,180.00	\$107,365.00	The cost for Interim Transmission Line is split with WNYS
Primary Transmission Line	\$4,000.00	\$4,000.00	
Dehydrator	\$4,000.00	\$4,000.00	See the attached quote for the dehydrator 083020- Order_Quote M14026 W The cost is split with WNYS
Sub-total	\$226,180.00	\$113,365.00	N/A
Total for all systems	\$5,337,566.00	\$4,347,162.25	N/A

Components

Actual Information Description	File Name
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Dehydrator	<p><b>Component Description:</b> The Rigid Transmission Line with 6 1/8" copper, 100' long</p> <p><b>Amount:</b> N/A</p>
Rigid Transmission Line - copper, 6 1/8"	<p><b>Component Description:</b> Attended by Synco, Inc. Co. The amount was \$3,000.00</p> <p><b>Amount:</b> \$3,000.00</p> <p><b>Component Description:</b> Needed for the Reclamation MA Inv pay with</p> <p><b>Amount:</b> \$3,000.00</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 (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification
Primary Tower TOWER	\$1,275,100.00	\$1,241,300.00	
Tall Tower (greater than 500')	\$210,500.00	\$205,000.00	See the attached acceptance ord Stainless_Modification_WSYT_WNYS_\$ and Stainless_Service_WSYT_WNYS_\$
Serious tower reinforcement /modifications	\$1,052,000.00	\$1,024,000.00	See the attached acceptance ord Stainless_Modification_WSYT_WNYS_\$ and Stainless_Service_WSYT_WNYS_\$
Structural engineering tower load study for well documented tower	\$12,600.00	\$12,300.00	N/A
Sub-total	\$1,275,100.00	\$1,241,300.00	N/A
Total for all systems	\$5,337,566.00	\$4,347,162.25	N/A

Components

Actual Information Description	File Name
Tall Tower (greater than 500')	<div>Component Description: Re cor</div> <div>Amount: \$21</div>
Serious tower reinforcement/modifications	<div>Component Description: Re cor</div> <div>Amount: \$31</div>

Structural engineering tower load study for well documented tower		
	<b>Component Description:</b>	Fel
	<b>Amount:</b>	\$1:

## Cost Information

### Outside Professional Services

Where no predetermined cost estimate is available, any estimate provided will also be (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 - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$7,000.00	Attorney Fee Estimate
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 Estimate attached Northwest Regional Cost Estimate Letter to the Sweatte (00113549xC
Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	\$4,210.00	\$6,000.00	Attorney Fee Estimate attached Northwest Regional Cost Estimate Letter to the Sweatte (00113549xC
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	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
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A
Prepare request for Special Temporary Authorization	\$2,050.00	\$1,500.00	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
<b>Sub-total</b>	\$154,375.00	\$155,000.00	N/A
<b>Total for all systems</b>	\$5,337,566.00	\$4,347,162.25	N/A

## Components

Information not provided.

## Cost Information

### Other Expenses

Where no predetermined cost estimate is available, any estimate provided will also be (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 Filing Catalog of Potential Expenses and Estimated Costs
Develop and air announcement of upcoming channel change	<i>\$230.00</i>	\$230.00	See attached: Draft On_Air_Announcement cost-2017
Equipment Storage	<i>\$39,500.00</i>	\$39,500.00	See the attached storage fee calculation for 8 months (20 weeks): Syracuse Repack WSYT-S calculation-SEP-2017 along with the Dielectric Storage Fees: "Storage Instructions and Dielectric"
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
Equipment Delivery and Handling Charges	<i>\$25,000.00</i>	\$25,000.00	See attached Filing Catalog of Potential Expenses and Estimated Costs
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	N/A
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A

Disposal Costs (for equipment and other waste, net of any salvage value)	<b>\$2,000.00</b>	\$2,000.00	See attached: V EWASTE-quo Sept2017
<b>Sub-total</b>	\$107,920.00	\$107,315.00	N/A
<b>Total for all systems</b>	\$5,337,566.00	\$4,347,162.25	N/A

### Components

Actual Information Description	File Name
Internal Project Management of Transition	Information not provided.
MVPD Notification of Channel Change	Information not provided.
Develop and air announcement of upcoming channel change	Information not provided.
Equipment Storage	Information not provided.
DTV Medical Facility Notification	Information not provided.
FCC Filing Fees - Form 2100 minor change CP application	Information not provided.
Equipment Delivery and Handling Charges	<b>Component Description:</b> Ha bo <b>Amount:</b> \$1,
FCC Filing Fees - Form 2100 license to cover application	Information not provided.
FCC Filing Fees - Special Temporary Authorization request	Information not provided.

<p>Disposal Costs (for equipment and other waste, net of any salvage value)</p>	<div> <div>Component Description:</div> <div>Inv</div> <div>dis</div> <div>TX</div> <div>Amount:</div> <div>\$5,</div> </div>
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<b>Cost Information</b>	<b>Grand Total</b>	
	<b>Predetermined Cost Estimate</b>	<b>Estimated Cost</b>
	<b>Total for all systems</b>	\$5,337,566.00
		\$4,347,162.25

<b>Reimbursement Status</b>	<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
Submission of Estimated Expenses Statements	<p>WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION ANY STATION LICENSE OR CONSTRUCTION PERMIT (U CODE, TITLE 47, SECTION 312(a)(1), AND/OR FORFEITU (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABIL UNDER THE FALSE CLAIMS ACT.</p>

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.

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## Certification

Section	Question
<b>Submission of Actual Cost Documentation Statements</b>	<p>WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).</p> <hr/> <ol style="list-style-type: none"><li>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>2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.</li><li>3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li><li>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>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