



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **63153** | Service: **DTV** | Call **WCAU** | Channel: **34 (UHF)** |  
ID: | Sign:  
File **0000028212**  
Number:  
FRN: **0019509470** | Date **05/03**  
Submitted: **/2019**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>NBC TELEMUNDO LICENSE LLC</b>	Margaret L. Tobey 300 NEW JERSEY AVENUE, NW SUITE 700 WASHINGTON, DC 20001 United States	+1 (202) 524- 6401	MARGARET. TOBEY@NBCUNI. 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
<b>Margaret L Tobey</b> <i>NBCUniversal, LLC</i>	300 New Jersey Ave. NW Suite 700 Washington, DC 20001 United States	+1 (202) 524- 6401	Margaret.Tobey@nbcuni. 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.	Yes
Briefly describe transition plan	Use existing main transmitter on existing aux antenna. Remove main antenna,. Install new antenna, replace IOT aux with new solid state on new channel for use as main on new antenna. Replace IOT main with solid state as aux and replace aux antenna.

## Transmitters

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

## Primary Transmitter

### Existing Transmitter Information

Section	Question	Response
Existing Transmitter Description	Type of change	Retune Existing
	Use	Primary (Main)
	Ownership	Owned
	Owner	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	Comark

Model	DCXP-2
Year	2009
Type	Inductive Output Tube
IOT Power Type	Two
Power capacity	55 kW

**Primary Transmitter**

**Retuning Transmitter Costs**

Section	Question	Response
New IOT Tubes	Number of Tubes (including accessories) needed	2
New Mask Filter	Power	60 kW
	Other Power	N/A
New Exciter	Is a new exciter needed?	Yes
	Exciter Type	Dual exciter with changeover

**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	No
	Size	N/A
	Length	N/A
	Other Electrical Service	No

	Description	N/A
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	No
	Type	N/A
	Size	N/A
	Other Size	N/A
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
<b>Channel 14 Costs</b>	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.

**Auxiliary  
Transmitter****Existing Transmitter Information**

Section	Question	Response
<b>Existing Transmitter Description</b>	Type of change	Purchase New
	Use	Auxiliary (Backup)
	Description of Use	To maintain coverage when main transmitter or antenna are unavailable
	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
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	DCX Millenium
	Year	1998
	Type	Inductive Output Tube
	IOT Power Type	Two
	Power Capacity	40 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?	Yes
	Manufacturer	
	Model	THU9-36
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	55 kW
	Justification for New Transmitter	New Solid State transmitter is requested as existing IOT is EOL. A Solid State transmitter is less expensive then a replacement IOT.

**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	No
	Size	N/A
	Length	N/A
	Other Electrical Service	Yes
	Description	Contractor estimate on electrical disconnect and reconnect.
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	No
	Type	N/A
	Size	N/A
	Other Size	N/A
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
<b>Channel 14 Costs</b>	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

Name	Description
<b>Transmission Facility Design</b>	Design of floor plan and electrical plans for transmitter room
<b>RF System</b>	RF System for new transmitter: Filter and Output Switching

**Antennas**

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



**Auxiliary  
Antenna****Existing Antenna Information**

Section	Question	Response
<b>Existing Antenna Description</b>	Type of change	Purchase New
	Antenna Use	Auxiliary (Backup)
	Description of Use	To maintain coverage when primary antenna is unavailable
	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?	Yes
<b>Existing Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Top 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) .....	739.0 kW
Manufacturer	
Model	TFU-24JTH /VP-R O6
Year	2011

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**Auxiliary  
Antenna****New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	Use	Auxiliary (Backup)
	Description of Use	Used to maintain coverage when main antenna is unavailable
	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?	Yes
<b>New Antenna Manufacturer and Types</b>	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	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) .....	618.0 kW
Manufacturer	
Model	TFU-22JTH /VP-R O6
Year	2019
Justification for New Antenna	New antenna required because existing auxiliary is single channel and will not work on new channel (Ch 28)

## Auxiliary Antenna

### Other Antenna Costs

Section	Question	Response
<b>Combiner for Shared Antenna</b>	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
<b>Elbow Complex</b>	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

<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power antenna?	No
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes

## Auxiliary Antenna

### Other Antenna Cost Not Listed

Information not provided.

**Primary  
Antenna**

**Existing Antenna Information**

Section	Question	Response
<b>Existing Antenna Description</b>	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?	Yes
<b>Existing Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Top
	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) .....	700.0 kW

Manufacturer	
Model	TFU-24ETT /VP-R O6
Year	2009

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?	Yes
New Antenna Manufacturer and Types	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Top
	Polarization	Elliptical
	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) .....	618.0 kW
	Manufacturer	



Model	TFU-22JTH /VP-R O6
Year	2019
Justification for New Antenna	Existing antenna will not work on new channel (ch 28)

## Primary Antenna

### Other Antenna Costs

Section	Question	Response
<b>Combiner for Shared Antenna</b>	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
<b>Elbow Complex</b>	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
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power antenna?	No
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	No

**Primary  
Antenna**

**Other Antenna Cost Not Listed**

Name	Description
Transmission Line accessories	transitions and connectors for installation

**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	Utilize Existing
	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	Dielectric
	Type	Rigid
	Diameter	7 3/16 inches
	Other Diameter	N/A
	Segment Length	19 3/4 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1375 feet per run

Primary Transmission Line	Other Transmission Line Expenses Not Listed
Information not provided.	

**Auxiliary**  
**Transmission Line**

**Existing Transmission Line**

Section	Question	Response
<b>Existing Transmission Line Description</b>	Type of change	Purchase New
	Use	Auxiliary (Backup)
	Description of Use	used to maintain coverage when primary antenna is unavailable
	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
<b>Existing Transmission Line Manufacturer and Type</b>	Manufacturer	
	Type	Rigid
	Diameter	7 3/16 inches
	Other Diameter	N/A
	Segment Length	19 3/4 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1375 feet per run

**Auxiliary**      **New Transmission Line**  
**Transmission Line**      **Section**

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Auxiliary (Backup)
	Description of Use	used to maintain coverage when primary antenna is unavailable
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	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	670 feet per run
	Justification for New Transmission Line	Existing line (19 3/4") will not work on new channel (ch 28)

**Auxiliary**      **Other Transmission Line Expenses Not Listed**  
**Transmission Line**      **Information not provided.**

**Tower  
Equipment  
And  
Rigging  
Costs**

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

**Auxiliary  
Tower**

**Existing Tower**

Section	Question	Response
Existing Tower Description	Type of change	Modify Existing
	Tower Use	Auxiliary (Backup)
	Description of Use	used to maintain coverage when main antenna is unavailable
	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	1025386
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	40° 02' 31.2" N-
	Longitude (NAD83)	075° 14' 10.4" W-
	Overall Structure Height	582.01 feet

Support Structure Height	507.87 feet
Ground Elevation Above Mean Sea Level (AMSL)	284.12 feet
Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	NBC Telemundo License LLC
Date Constructed	07/29/2005

### Auxiliary Tower

#### Tower Modification Costs

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

### Auxiliary Tower

#### Tower Rigging Costs

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

### Auxiliary Tower

#### Other Tower Expenses Not Listed

Information not provided.



## 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?	Candelabra
	Is this tower currently shared with any other stations?	Yes
	One or more FM, AM or TV radio broadcaster(s)	Yes
	Others Types of Users	No
	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	1231524
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	40° 02' 30.1" N-
	Longitude (NAD83)	075° 14' 10.1" W-
	Overall Structure Height	1254.91 feet
	Support Structure Height	1124.00 feet
	Ground Elevation Above Mean Sea Level (AMSL)	292.98 feet
	Structure Type	GTOWER - Guyed Structure Used for Communication Purposes

	Tower Owner	Global Tower, LLC. through American Towers, LLC
	Date Constructed	11/02/2011

**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
51434	WTDY-FM	FM
9622	WOGL	FM
7623	WGTW-TV	DTV
51984	WPPX-TV	DTV
55305	WTVE	DTV
72278	WPHA-CD	DTV
30572	WPHI-FM	FM
28628	WIP-FM	FM
28480	WYBE	DTV
74213	WXTU	FM
12499	WPSG	DTV
65190	WRTI	FM
12211	WPPZ-FM	FM
60560	WUVP-DT	DTV
1283	KJWP	DTV
74216	WFPA-CD	DTV

**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:	Minor Reinforcements needed

**Primary  
Tower**

**Tower Rigging Costs**

Section	Question	Response
Tower Rigging Costs	Complex Tower	Candelabra
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
<b>Outside Project Management Services</b>	Do you require outside project management services?	Yes
	Number of Hours	1040
	Explanation	Project oversight of transmitter install, electrical connectivity, tower work, and antenna installation. Additional time will be spent tracking financial and legal process and coordinating with other broadcasters.
<b>Outside RF consulting Engineering Services</b>	Perform engineering study for new channel assignment and antenna development	No
	Prepare engineering section of Form FCC Construction Permit Application	No
	For Auxiliary Facility	N/A
	For Main Facility	N/A
	Prepare engineering section of Form FCC License to Cover Application	No
	For Auxiliary Facility	N/A
	For Main Facility	N/A
	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
<b>Attorney and Other Outside Consulting Services</b>	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	No
	Quantity	N/A
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	No
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	Yes
	RF exposure measurements	Yes
	Additional Field Engineering Service	Yes
	Number of Days	40
	Justification	Ground level RF design

Outside Other Professional Services Expenses Not Listed  
Professional Services Costs  
Services not provided.

## Other Expenses

Section	Question	Response
<b>AM Pattern Disturbance</b>	Is an Impact Study needed?	No
	Is Remediation needed?	No
<b>Facility Expenses</b>	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
<b>Permit and Filing Costs</b>	Local Zoning	Yes
	Non-zoning permits	Yes
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	No
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	Yes
<b>Other Miscellaneous Expenses</b>	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

<b>Other Expenses</b>	<b>Other Expenses Not Listed</b>
	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
<b>Primary Transmitter DCXP-2</b>	<b>\$748,250.00</b>	<b>\$807,000.00</b>		<b>\$0.00</b>	
2 IOT Tubes	\$255,000.00	\$242,000.00	N/A	N/A	N/A
Two IOT system (55 kW)	\$356,500.00	\$435,000.00	see attached proposal from comark	N/A	N/A
60 kW mask filter	\$89,400.00	\$85,000.00	N/A	N/A	N/A
Dual exciter system with change over	\$47,350.00	\$45,000.00	N/A	N/A	N/A
<b>Auxiliary Transmitter THU9-36</b>	<b>\$2,105,634.30</b>	<b>\$1,609,875.35</b>		<b>\$85,904.02</b>	
UHF - Liquid Cooled Solid State Transmitter 52 - 61 kW	\$1,788,000.00	\$1,292,241.05	N/A	N/A	N/A
Other Electrical Service: Contractor estimate on electrical disconnect and reconnect.	<i>\$15,000.00</i>	\$15,000.00	N/A	N/A	N/A
Transmission Facility Design	<i>\$214,534.30</i>	\$214,534.30	N/A	\$85,904.02	N/A

RF System	<b>\$88,100.00</b>	\$88,100.00	see attached transmitter proposal	N/A	N/A
<b>Sub-total</b>	\$2,853,884.30	\$2,416,875.35	N/A	\$85,904.02	N/A
<b>Total for all systems</b>	\$5,856,761.30	\$4,518,964.15	N/A	\$416,721.05	N/A

## Components

Actual Information Description	File Name
2 IOT Tubes	Information not provided.
Two IOT system (55 kW)	Information not provided.
60 kW mask filter	Information not provided.
Dual exciter system with change over	Information not provided.
UHF - Liquid Cooled Solid State Transmitter 52 - 61 kW	Information not provided.
Other Electrical Service: Contractor estimate on electrical disconnect and reconnect.	Information not provided.

Transmission Facility Design	<b>Component Description:</b>	Demo Plans
	<b>Amount:</b>	\$17,796.34
	<b>Component Description:</b>	Room air-conditioning design to support new transmitter design; Demo plans
	<b>Amount:</b>	\$68,107.68
	<b>Component Description:</b>	Design Coordination and Construction /Permit Set, Expenses
	<b>Amount:</b>	\$61,439.41
	<b>Component Description:</b>	Review Equipment Data, Design Team Site Survey and Report Brief
	<b>Amount:</b>	\$9,307.36
RF System	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
<b>Primary</b>	<b>\$344,340.00</b>	<b>\$242,933.00</b>		<b>\$109,319.85</b>	
<b>Antenna TFU-22JTH/VP-R O6</b>					
UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized	\$289,500.00	\$188,010.00	N/A	\$84,604.50	N/A
Elbow complex, single channel, at antenna input, per 6 1 /8. feedline (if needed)	\$12,300.00	\$12,383.00	See attached quote	\$5,572.35	N/A
Transmission Line accessories	<b><i>\$42,540.00</i></b>	\$42,540.00	Included in antenna proposal	\$19,143.00	N/A
<b>Auxiliary</b>	<b>\$193,735.00</b>	<b>\$191,403.00</b>		<b>\$92,038.05</b>	
<b>Antenna TFU-22JTH/VP-R O6</b>					
Elbow complex, single channel, at antenna input, per 6 1 /8. feedline (if needed)	\$12,300.00	\$10,298.00	N/A	\$5,572.35	N/A

UHF - High Power, Side Mount, basic slot antenna, 618 kW input, elliptically or circularly polarized	<b>\$174,705.00</b>	\$174,705.00	N/A	\$86,465.70	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
<b>Sub-total</b>	\$538,075.00	\$434,336.00	N/A	\$201,357.90	N/A
<b>Total for all systems</b>	\$5,856,761.30	\$4,518,964.15	N/A	\$416,721.05	N/A

## Components

Actual Information	
Description	File Name
UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized	<b>Component Description:</b> See line 1 of invoice <b>Amount:</b> \$84,604.50
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	<b>Component Description:</b> See line 3 of invoice <b>Amount:</b> \$5,572.35
Transmission Line accessories	<b>Component Description:</b> See lines 2, 4-6 of invoice <b>Amount:</b> \$19,143.00

<p>Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)</p>	<p><b>Component Description:</b> This is only for the cost of line item 2. The elbow complex</p> <p><b>Amount:</b> \$5,572.35</p>
<p>UHF - High Power, Side Mount, basic slot antenna, 618 kW input, elliptically or circularly polarized</p>	<p><b>Component Description:</b> Updated invoice date. This only accounts for the cost of line item 1 on this invoice.</p> <p><b>Amount:</b> \$86,465.70</p>
<p>Sweep test of existing antenna</p>	<p>Information not provided.</p>

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	\$0.00	\$0.00		\$0.00	
Auxiliary Transmission Line	\$135,340.00	\$103,637.80		\$59,068.91	
Rigid Transmission Line - copper, 6 1/8"	\$135,340.00	\$103,637.80	N/A	\$59,068.91	N/A
Sub-total	\$135,340.00	\$103,637.80	N/A	\$59,068.91	N/A
Total for all systems	\$5,856,761.30	\$4,518,964.15	N/A	\$416,721.05	N/A

Components

Actual Information	
Description	File Name
Rigid Transmission Line - copper, 6 1/8"	<div><div>Component Description:</div><div>This accounts for the cost of the transmission line. See line items 3 and 7 on invoice. Note: Line item 7 is miscellaneous equipment that is necessary for the transmission line.</div><div>Amount:</div><div>\$59,068.91</div></div>

## 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
<b>Auxiliary Tower</b>	<b>\$1,275,100.00</b>	<b>\$712,000.00</b>		<b>\$6,333.33</b>	
Structural engineering tower load study for well documented tower	\$12,600.00	\$12,000.00	N/A	\$6,333.33	N/A
Tall Tower (greater than 500')	\$210,500.00	\$200,000.00	N/A	N/A	N/A
Serious tower reinforcement /modifications	\$1,052,000.00	\$500,000.00	N/A	N/A	N/A
<b>Primary Tower</b>	<b>\$605,300.00</b>	<b>\$464,783.00</b>		<b>\$8,928.00</b>	
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$14,783.00	Tower mapping and structural engineering	\$8,928.00	N/A



Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	\$421,000.00	\$400,000.00	N/A	N/A	N/A
Minor tower reinforcement /modifications	\$158,000.00	\$50,000.00	N/A	N/A	N/A
<b>Sub-total</b>	\$1,880,400.00	\$1,176,783.00	N/A	\$15,261.33	N/A
<b>Total for all systems</b>	\$5,856,761.30	\$4,518,964.15	N/A	\$416,721.05	N/A

## Components

Actual Information	
Description	File Name
Structural engineering tower load study for well documented tower	<p><b>Component Description:</b></p> <p>This is just for the cost of the structural engineering tower load study with no tax. It does not include the cost for mapping. UPDATED INVOICE.</p> <p><b>Amount:</b></p> <p>\$6,333.33</p>
Tall Tower (greater than 500')	Information not provided.
Serious tower reinforcement /modifications	Information not provided.

<p>Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study</p>	<p><b>Component Description:</b></p> <p>This is just for the cost of the broadcast tower mapping plus tax. It does not include the structural.</p> <p><b>Amount:</b></p> <p>UPDATED INVOICE \$8,928.00</p>
<p>Complex Tower (includes, for example, those with candelabras and/or stacked antennas)</p>	<p>Information not provided.</p>
<p>Minor tower reinforcement /modifications</p>	<p>Information not provided.</p>

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	\$326,665.00	\$272,250.00		\$55,128.89	
Additional Field Engineering Service, 40 Days	\$40,000.00	\$40,000.00	N/A	\$5,074.81	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	\$40,000.00	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
Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	\$4,210.00	\$4,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$453.60	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	\$648.09	N/A
Project management of the transition	\$164,320.00	\$156,000.00	N/A	\$48,952.39	N/A
<b>Sub-total</b>	\$326,665.00	\$272,250.00	N/A	\$55,128.89	N/A
<b>Total for all systems</b>	\$5,856,761.30	\$4,518,964.15	N/A	\$416,721.05	N/A

## Components

Actual Information	
Description	File Name
Additional Field Engineering Service, 40 Days	<p><b>Component Description:</b> Engineering Site Survey, see attached site survey report for supporting documentation.</p> <p><b>Amount:</b> \$5,074.81</p>
RF Exposure Measurements	Information not provided.
Comprehensive coverage verification via field study, if needed	Information not provided.
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.

Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	Information not provided.	
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	<b>Component Description:</b>  <b>Amount:</b>	Preparation of minor change application \$415.80   Preparation of minor change application, see line 1 of invoice less 10% vendor discount. <b>Amount:</b> \$37.80
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.	
Prepare and or review reimbursement form	<b>Component Description:</b>  <b>Amount:</b>	See lines 2-4 of invoice, less 10% vendor discount. \$371.79   <b>Component Description:</b> Review of Form 399 <b>Amount:</b> \$43.65   <b>Component Description:</b> Review of Form 399. <b>Amount:</b> \$43.65   <b>Component Description:</b> Amendment of 399 estimates <b>Amount:</b> \$189.00

Project management of the transition

<b>Component Description:</b>	August 2018 Project Management
<b>Amount:</b>	\$150.00

<b>Component Description:</b>	October 2018 Project Management
<b>Amount:</b>	\$1,650.00

<b>Component Description:</b>	Project Management Services
<b>Amount:</b>	\$348.95

<b>Component Description:</b>	Project Management Services
<b>Amount:</b>	\$975.00

<b>Component Description:</b>	Project Management
<b>Amount:</b>	\$2,374.50

<b>Component Description:</b>	Project Management Invoice
<b>Amount:</b>	\$1,670.65

<b>Component Description:</b>	July 2018 Project Management
<b>Amount:</b>	\$6,905.00

<b>Component Description:</b>	Project Management Services
<b>Amount:</b>	\$4,200.00

<b>Component Description:</b>	November 2018 Project Management
<b>Amount:</b>	\$4,650.00

<b>Component Description:</b>	Project management April 18
<b>Amount:</b>	\$3,024.70

<b>Component Description:</b>	Project Management Services
<b>Amount:</b>	\$1,072.50

<b>Component Description:</b>	June 2018 Project Management
<b>Amount:</b>	\$4,750.00

<b>Component Description:</b>	Project management and expenses, see attachments for expense receipts
<b>Amount:</b>	\$3,356.09

<b>Component Description:</b>	August 2018 Project Management
<b>Amount:</b>	\$5,215.00

<b>Component Description:</b>	Project Management Services
<b>Amount:</b>	\$1,365.00

<b>Component Description:</b>	Point B project management services for the month of February 2019. See line item.
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<b>Amount:</b>	\$3,150.00
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<b>Component Description:</b>	Point B Project Management January 2019
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<b>Amount:</b>	\$1,950.00
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<b>Component Description:</b>	Project Management Services
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<b>Amount:</b>	\$2,145.00
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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	\$122,397.00	\$115,082.00		\$0.00	
MVPD Notification of Channel Change	<i>\$12,000.00</i>	\$12,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$30,000.00</i>	\$30,000.00	N/A	N/A	N/A
Equipment Storage	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$20,000.00</i>	\$20,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
Non-zoning permits	<i>\$2,500.00</i>	\$2,500.00	N/A	N/A	N/A

Local Zoning	<b>\$10,817.00</b>	\$10,817.00	\$4,700 to prepare tower documents \$4,700 to prepare ground documents \$750 permit application \$667 public hearing	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
DTV Medical Facility Notification	\$11,550.00	\$4,250.00	N/A	N/A	N/A
<b>Sub-total</b>	\$122,397.00	\$115,082.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$5,856,761.30	\$4,518,964.15	N/A	\$416,721.05	N/A

## Components

Information not provided.

<b>Cost Information</b>	<b>Grand Total</b>		
		<b>Predetermined Cost Estimate</b>	<b>Estimated Cost</b>
			<b>Actual Cost</b>
	<b>Total for all systems</b>	\$5,856,761.30	\$4,518,964.15
			\$416,721.05

<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	Response
	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 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"> <li>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.</li> <li>2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li>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.</li> </ol>	

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.

**Margaret L Tobey**  
*Assistant Secretary*

05/03/2019

Certification	Section	Question	Response
	Submission of Actual Cost Documentation Statements	<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>	
		<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> </ol>	

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.



<p>8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.</p> <p>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.</p>	
<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p><b>Margaret L Tobey</b>  <i>Assistant Secretary</i></p> <p>05/03/2019</p>

## Attachments