



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **76324** | Service: **DTV** | Call **WSKY-TV** | Channel:
ID: | Sign:
13 (High VHF) | File **0000027685**
Number:
FRN: **0022836373** | Date **08/23**
Submitted: **/2019**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
TIDEWATER TV LLC Doing Business As: TIDEWATER TV LLC	150 Fayetteville Street Suite 1700 Raleigh, NC 27601 United States	+1 (919) 839- 0300	cramsey@brookspierce. 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
Bob Pectelidis <i>Director of Engineering TIDEWATER TV LLC</i>	Bob Pectelidis 3914 Wistar Road Richmond, VA 23228 United States	+1 (804) 672- 6565	bob@lockwoodbroadcast. 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	See attached

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	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	Platinum
	Year	2010
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	11.96 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	THV9-12
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	15 kW
	Justification for New Transmitter	See Transition Plan, attached

**Primary
Transmitter**

Other Transmitter Costs

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	Yes
	Power	150 kVA
	Rigid Conduit and Wiring	Yes
	Size	2 inches
	Length	500.0 feet
	Other Electrical Service	No
	Description	N/A

HVAC Service	Does the replacement transmitter require HVAC Service?	Yes
	Type	Heating and Cooling
	Size	15 tons
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leasehold 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

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	Horizontal
	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)	70.0 kW

Manufacturer	
Model	TW-9B9-R
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	Horizontal
	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)	70.0 kW
	Manufacturer	

Model	ATW9V3-HSO-13
Year	2020
Justification for New Antenna	See Transition Plan , attached

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	3 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
Information not provided.

Transmission Line

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

Primary
Transmission Line

Existing Transmission Line

Section	Question	Response
Existing Transmission Line Description	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing transmission line shared with another station or stations?	No
	Is Transmission Line in operating condition?	Yes
Existing Transmission Line Manufacturer and Type	Manufacturer	
	Type	Flexible Air
	Diameter	3 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1100 feet per run

Primary **New Transmission Line**
Transmission Line

Section	Question	Response
New Transmission Line Costs	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Flexible Air
	Diameter	3 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1100 feet per run
	Justification for New Transmission Line	See Transition Plan, attached

Primary **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

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?	Unknown
	Is tower compliant with Rev G?	Unknown
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1252202
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	36° 31' 15.0" N-
	Longitude (NAD83)	076° 18' 15.0" W-
	Overall Structure Height	1036.40 feet
	Support Structure Height	979.32 feet
	Ground Elevation Above Mean Sea Level (AMSL)	12.80 feet

	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	Tidewater TV LLC
	Date Constructed	11/23/2007

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	N/A
Helicopter Services Required	Are helicopter services required?	No

Primary Tower

Other Tower Expenses Not Listed

Information not provided.

**Outside
Professional**

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	675
	Explanation	Expenses for experienced RF consultant to layout and assist with project management.
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	1
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
Attorney and Other Outside Consulting Services	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes

	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	1
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	No
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
RF Field Engineering Services	Comprehensive coverage verification via field study	No
	RF exposure measurements	No
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Outside Professional Services Costs

Other Professional Services Expenses Not Listed

Name	Description
Additional Repack Legal Services Not Otherwise Specified in Form 399	Non-Catalog Legal Services such as review of quarterly transition status reports and other miscellaneous non-catalog legal fees.

Other Expenses

Section	Question	Response
AM Pattern Disturbance	Is an Impact Study needed?	No
	Is Remediation needed?	No
Facility Expenses	Name	N/A
	Other Distributed Transmission System Expenses Not listed	N/A
	Name	N/A
	Is Notification of a Medical Facility required as a result of DTV broadcasting?	Yes
Permit and Filing Costs	Local Zoning	No
	Non-zoning permits	No
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	No
	FCC License to Cover Application	No
	FCC Special Temporary Authority Application	No
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?	No
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	Yes
	Does this relocation require MVPD Notification of a Channel Change?	Yes

**Other
Expenses**

Other Expenses Not Listed

Name	Description
Site survey	Initial assessment and cad drawing of existing facilities
Site Preperation	reworking of existing interior rf system

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 THV9-12	\$550,505.00	\$464,135.00		\$442,517.30	
15 Ton system	\$88,400.00	\$3,780.00	N/A	\$1,892.67	N/A
Transformer 3 phase /480v - 150 KVA	\$25,550.00	\$24,300.00	LMS limits selection for lower power transformer. Station has change order for 208V, 90kVA Transformer.	\$17,069.63	N/A
High VHF - Liquid Cooled Solid State Transmitter 15 kW	<i>\$423,555.00</i>	\$423,555.00	Rohde & Schwarz quote SQ169749.1; SJ Ramer Invoices 19006, 19021; Ed Murlatt & Associates, Inc. Quote #R190111WSKY	\$423,555.00	N/A
2" Rigid Conduit and Wiring (Cost per foot)	\$13,000.00	\$12,500.00	N/A	\$0.00	N/A
Sub-total	\$550,505.00	\$464,135.00	N/A	\$442,517.30	N/A
Total for all systems	\$1,574,775.00	\$1,438,027.00	N/A	\$499,645.66	N/A

Components

Actual Information	
Description	File Name
15 Ton system	<div> <div>Component Description:</div> <div>Replace A39 belt, install heater for Carrier Air Handler</div> </div> <div> <div>Amount:</div> <div>\$1,892.67</div> </div>
Transformer 3 phase/480v - 150 KVA	<div> <div>Component Description:</div> <div>Repack related electrical work for WSKY</div> </div> <div> <div>Amount:</div> <div>\$14,832.00</div> </div> <div> <div>Component Description:</div> <div>Engineering Costs</div> </div> <div> <div>Amount:</div> <div>\$2,237.63</div> </div>

High VHF - Liquid Cooled Solid State Transmitter 15 kW	Component Description: Amount:	DP 75% Final Payment, Transmitter Replacement for Repack \$288,416.25
	Component Description: Amount:	DP 25% Down payment; R & S Transmitter Replacement for Repack \$96,138.75
	Component Description: Amount:	Installation services \$9,500.00
	Component Description: Amount:	Installation Services \$10,000.00
	Component Description: Amount:	Installation services \$9,500.00
	Component Description: Amount:	Installation services - in conjunction with SJ Ramer Associates with installation, commissioning and proof of Rohde- Schwarz THV9evo- 12 at WSKY-TV transmitter. \$10,000.00
2" Rigid Conduit and Wiring (Cost per foot)	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 ATW9V3- HSO-13	\$356,330.00	\$338,800.00		\$0.00	
Elbow complex, single channel, at antenna input, per 3 1/8. feedline (if needed)	\$7,600.00	\$7,400.00	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, One station antenna -- top mount, horizontally polarized	\$342,000.00	\$325,000.00	N/A	N/A	N/A
Sub-total	\$356,330.00	\$338,800.00	N/A	\$0.00	N/A
Total for all systems	\$1,574,775.00	\$1,438,027.00	N/A	\$499,645.66	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	\$64,900.00	\$61,600.00		\$0.00	
Flexible Air Transmission Line - dielectric, 3"	\$64,900.00	\$61,600.00	N/A	N/A	N/A
Sub-total	\$64,900.00	\$61,600.00	N/A	\$0.00	N/A
Total for all systems	\$1,574,775.00	\$1,438,027.00	N/A	\$499,645.66	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	\$394,800.00	\$366,987.00		\$8,493.50	
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$16,987.00	Includes geotech and mapping, see attached quote.	\$8,493.50	N/A
Tall Tower (greater than 500')	\$210,500.00	\$200,000.00	N/A	N/A	N/A
Minor tower reinforcement /modifications	\$158,000.00	\$150,000.00	N/A	N/A	N/A
Sub-total	\$394,800.00	\$366,987.00	N/A	\$8,493.50	N/A
Total for all systems	\$1,574,775.00	\$1,438,027.00	N/A	\$499,645.66	N/A

Components

Actual Information	
Description	File Name

Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study	<div> <div> Component Description: </div> <div> Partial Payment for structural analysis and geotechnical survey </div> </div> <div> Amount: </div> <div> \$8,493.50 </div>
Tall Tower (greater than 500')	Information not provided.
Minor tower reinforcement /modifications	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	\$142,360.00	\$148,425.00		\$45,154.16	
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,500.00	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 - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$1,888.70	N/A
Prepare request for Special Temporary Authorization	\$2,050.00	\$1,500.00	N/A	N/A	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 engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$1,750.00	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$5,400.76	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	\$1,161.30	N/A
Additional Repack Legal Services Not Otherwise Specified in Form 399	\$5,000.00	\$5,000.00	N/A	\$897.90	N/A
Project management of the transition	\$106,650.00	\$114,675.00	Per additional quote from Widelity	\$34,055.50	N/A
Sub-total	\$142,360.00	\$148,425.00	N/A	\$45,154.16	N/A
Total for all systems	\$1,574,775.00	\$1,438,027.00	N/A	\$499,645.66	N/A

Components

Actual Information	
Description	File Name
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	<div> <div> Component Description: Amount: </div> <div> Brooks Pierce 3942263 \$79.20 </div> </div> <div> <div> Component Description: Amount: </div> <div> Brooks Pierce 3941525 \$1,809.50 </div> </div>
Prepare request for Special Temporary Authorization	Information not provided.
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	<div> <div> Component Description: Amount: </div> <div> Revised Smith and Fisher Invoice 6692 per request for additional information. \$1,750.00 </div> </div>

Perform engineering study for new channel assignment and antenna development	<table> <tr> <td data-bbox="697 174 1011 210">Component Description:</td><td data-bbox="1145 174 1362 286">Travel at half-rate. Travel on June 12, 2017.</td></tr> <tr> <td data-bbox="697 297 815 333">Amount:</td><td data-bbox="1145 297 1262 333">\$4,750.76</td></tr> <tr> <td data-bbox="697 434 1011 470">Component Description:</td><td data-bbox="1145 434 1370 622">Revised Smith and Fisher Invoice 6611 per request for additional information.</td></tr> <tr> <td data-bbox="697 633 815 669">Amount:</td><td data-bbox="1145 633 1241 669">\$650.00</td></tr> </table>	Component Description:	Travel at half-rate. Travel on June 12, 2017.	Amount:	\$4,750.76	Component Description:	Revised Smith and Fisher Invoice 6611 per request for additional information.	Amount:	\$650.00												
Component Description:	Travel at half-rate. Travel on June 12, 2017.																				
Amount:	\$4,750.76																				
Component Description:	Revised Smith and Fisher Invoice 6611 per request for additional information.																				
Amount:	\$650.00																				
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.																				
Prepare and or review reimbursement form	<table> <tr> <td data-bbox="697 958 1011 994">Component Description:</td><td data-bbox="1145 958 1310 1030">Brooks Pierce 3941525</td></tr> <tr> <td data-bbox="697 1041 815 1077">Amount:</td><td data-bbox="1145 1041 1241 1077">\$138.60</td></tr> <tr> <td data-bbox="697 1178 1011 1214">Component Description:</td><td data-bbox="1145 1178 1362 1249">WSKY-TV Repack Legal Services</td></tr> <tr> <td data-bbox="697 1261 815 1296">Amount:</td><td data-bbox="1145 1261 1241 1296">\$260.50</td></tr> <tr> <td data-bbox="697 1397 1011 1433">Component Description:</td><td data-bbox="1145 1397 1310 1469">Brooks Pierce 3939261</td></tr> <tr> <td data-bbox="697 1480 815 1516">Amount:</td><td data-bbox="1145 1480 1241 1516">\$232.70</td></tr> <tr> <td data-bbox="697 1617 1011 1653">Component Description:</td><td data-bbox="1145 1617 1374 1765">WSKY-Prepare and /or Review Reimbursement Form</td></tr> <tr> <td data-bbox="697 1776 815 1812">Amount:</td><td data-bbox="1145 1776 1241 1812">\$371.10</td></tr> <tr> <td data-bbox="697 1912 1011 1948">Component Description:</td><td data-bbox="1145 1912 1310 1984">Brooks Pierce 3942263</td></tr> <tr> <td data-bbox="697 1995 815 2031">Amount:</td><td data-bbox="1145 1995 1241 2031">\$158.40</td></tr> </table>	Component Description:	Brooks Pierce 3941525	Amount:	\$138.60	Component Description:	WSKY-TV Repack Legal Services	Amount:	\$260.50	Component Description:	Brooks Pierce 3939261	Amount:	\$232.70	Component Description:	WSKY-Prepare and /or Review Reimbursement Form	Amount:	\$371.10	Component Description:	Brooks Pierce 3942263	Amount:	\$158.40
Component Description:	Brooks Pierce 3941525																				
Amount:	\$138.60																				
Component Description:	WSKY-TV Repack Legal Services																				
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Component Description:	Brooks Pierce 3939261																				
Amount:	\$232.70																				
Component Description:	WSKY-Prepare and /or Review Reimbursement Form																				
Amount:	\$371.10																				
Component Description:	Brooks Pierce 3942263																				
Amount:	\$158.40																				

Additional Repack Legal Services Not Otherwise Specified in Form 399	<div> Component Description: Repack Legal Services </div> <div> Amount: \$44.50 </div>
	<div> Component Description: Brooks Pierce 3948020 </div> <div> Amount: \$42.70 </div>
	<div> Component Description: TV Repack Legal Services (76324) </div> <div> Amount: \$222.50 </div>
	<div> Component Description: Brooks Pierce 3944883 </div> <div> Amount: \$59.40 </div>
	<div> Component Description: Brooks Pierce 3943444 </div> <div> Amount: \$213.50 </div>
	<div> Component Description: WSKY-TV Repack Legal Services (76324) </div> <div> Amount: \$21.60 </div>
	<div> Component Description: Repack Legal Services (76324) </div> <div> Amount: \$109.30 </div>
	<div> Component Description: Brooks Pierce 3945606 </div> <div> Amount: \$184.40 </div>
Project management of the transition	

Component Description:	Revised Ed Murlatt Invoice WSKY180205 per request for additional information.
Amount:	\$225.00

Component Description:	Revised Ed Murlatt Invoice WSKY171204 per request for additional information.
Amount:	\$750.00

Component Description:	Project Management
Amount:	\$5,077.90

Component Description:	Project Management
Amount:	\$4,896.55

Component Description:	Hourly Project Management Services by Ed Murlatt
Amount:	\$600.00

Component Description:	Project Management
Amount:	\$5,466.05

Component Description:	Project Management
Amount:	\$597.45

Component Description:	Revised Ed Murlatt Invoice WSKY170701 per request for additional information.
Amount:	\$1,500.00

Component Description:	Hourly Project Management Services
Amount:	\$1,462.50

Component Description:	Project Management
Amount:	\$6,618.80

Component Description:	Project Management
Amount:	\$5,736.25

Component Description:	Hourly Project Management Services
Amount:	\$1,125.00

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	\$65,880.00	\$58,080.00		\$3,480.70	
Site Preparation	<i>\$8,000.00</i>	\$8,000.00	see transition plan attached	\$2,097.20	N/A
Site survey	<i>\$5,330.00</i>	\$5,330.00	see transition plan attached	N/A	N/A
MVPD Notification of Channel Change	<i>\$1,000.00</i>	\$1,000.00	See Transition Plan Attached	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$5,000.00</i>	\$5,000.00	See Transition Plan Attached	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$3,750.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$20,000.00</i>	\$20,000.00	See Transition Plan Attached	\$133.50	N/A
Equipment Delivery and Handling Charges	<i>\$15,000.00</i>	\$15,000.00	See Transition Plan Attached	\$1,250.00	N/A
Sub-total	\$65,880.00	\$58,080.00	N/A	\$3,480.70	N/A

Total for all systems	\$1,574,775.00	\$1,438,027.00	N/A	\$499,645.66	N/A
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Components

Actual Information	
Description	File Name
Site Preperation	<p>Component Description: Tandem load ABC Rock to be delivered</p> <p>Amount: \$1,095.68</p> <p>Component Description: "Tandem load ABC Rock to be delivered 198 Gallberry Road South Mills, NC (Repairs to road for deliveries)"</p> <p>Amount: \$1,001.52</p>
Site survey	Information not provided.
MVPD Notification of Channel Change	Information not provided.
Develop and air announcement of upcoming channel change	Information not provided.
DTV Medical Facility Notification	Information not provided.
Disposal Costs (for equipment and other waste, net of any salvage value)	<p>Component Description: Disposal Fee 20 Yd - Ro</p> <p>Amount: \$133.50</p>

Equipment Delivery and Handling Charges	<table><tr><td data-bbox="710 96 1141 394">Component Description:</td><td data-bbox="1141 96 1433 394">Furnish and install gate in existing fence</td></tr><tr><td data-bbox="710 394 1141 394">Amount:</td><td data-bbox="1141 394 1433 394">\$1,250.00</td></tr></table>	Component Description:	Furnish and install gate in existing fence	Amount:	\$1,250.00
Component Description:	Furnish and install gate in existing fence				
Amount:	\$1,250.00				

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

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$1,574,775.00	\$1,438,027.00	\$499,645.66

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	<p>WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.</p>	
		<ol style="list-style-type: none"> 1. The Authorized Person signing below certifies that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity. 2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations. 3. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount. 	

4. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (broadcasters) or to continue to carry the signal of a broadcaster that changes channels (MVPD).
5. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
6. The above-named entity certifies that it will maintain and provide to the Commission detailed records, including receipts, of all costs eligible for reimbursement actually incurred.
7. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.

<p>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.</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>Bob Pectelidis <i>Director of Corporate Engineering</i></p> <p>08/23/2019</p>

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 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).	
		<ol style="list-style-type: none"> 1. The Authorized Person signing below certifies and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity. 2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct. 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.

<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>Bob Pectelidis <i>Director of Corporate Engineering</i></p> <p>08/23/2019</p>

Attachments