

(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility 126 Service: DTV Call KDVR Channel: 36 (UHF)

ID:

Sign:

File **0000028119** 

Number:

FRN: **0022824668** Date **09/18** 

Submitted: /2019

# Applicant Information

#### **Applicant Name, Type, and Contact Information**

Applicant	Address	Phone	Email	Applicant Type
TRIBUNE BROADCASTING DENVER LICENSE, LLC Doing Business As: TRIBUNE BROADCASTING DENVER LICENSE, LLC	Dave Stromberg 100 EAST SPEER BLVD DENVER, CO 80203 United States	+1 (312) 222- 3894	dstromberg@tribunemedia.com	Limited Liability Company

# Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

#### Preparer Contact Information

#### **Preparer Contact Name and Information**

Bill Vanduynhoven , Vanduynhov .Bill Vanduynhoven VAnduynhoven Director of Engineering operations Tribune broadcastingBill +1 (404) 312- BillV@Tribunemedia. 8693BillV@Tribunemedia. comDirector of Engineering operations Tribune broadcasting2211 Rabbit Hill Cir Dacula, GA 30019	Applicant	Address	Phone	Email
United States	Vanduynhov . Director of Engineering operations	VAnduynhoven 2211 Rabbit Hill Cir Dacula, GA	` ,	

#### 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	Mount new Antenna above current antenna New transmission line Replace transmitter

#### **Transmitters**

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

## Auxiliary Transmitter

#### **Add Transmitter Information**

Section	Question	Response
Existing Transmitter Description	Type of change	Purchase New
	Use	Auxiliary (Backup)
	Description of Use	Backup
	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	
Manufacturer and Type	Model	Innovator HU5000BD
	Year	2008
	Туре	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	5 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	UAXTE-8
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	4.5 kW
	Justification for New Transmitter	Manufacturer has not responded with an acceptable quote. See justification

## 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	100A 208V service
HVAC Service	Does the replacement transmitter require HVAC Service?	No
	Туре	N/A
	Size	N/A
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leashold improvement?	No
	Size	N/A
Channel 14 Costs	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

Auxiliary

**Other Transmitter Cost Not Listed** 

Transmitter Information not provided.

## Primary Transmitter

#### **Existing Transmitter Information**

Section	Question	Response
Existing Transmitter Description	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
Existing Transmitter	Manufacturer	
Manufacturer and Type	Model	DCX-3
	Year	1998
	Туре	Inductive Output Tube
	IOT Power Type	Three
	Power Capacity	60 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?	Yes
	Manufacturer	
	Model	ULXTE-72
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	43 kW
	Justification for New Transmitter	Manufacturer has stated the current transmitter is not retunable

## Primary Transmitter

#### **Other Transmitter Costs**

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	Yes
	Switchgear (industrial 800 amp)	Yes
	Transformer (480V)	Yes
	Power	300 kVA
	Rigid Conduit and Wiring	Yes
	Size	2 inches
	Length	400.0 feet
	Other Electrical Service	No
	Description	N/A

HVAC Service	Does the replacement transmitter require HVAC Service?	No
	Туре	N/A
	Size	N/A
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leashold improvement?	No
	Size	N/A
Channel 14 Costs	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

#### Primary Transmitter

#### **Other Transmitter Cost Not Listed**

Name	Description
Removal	Clear space for new Transmitter

#### **Antennas**

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

#### **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 Yes
	Is the existing antenna directional?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
Existing Antenna	Class	Full Power
Manufacturer and Type	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	Туре	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)	1000.0 kW

Manufacturer	
Model	ATW-22H4- ESC3-32S
Year	2002

#### **New Antenna Costs**

Section	Question	Response
New Antenna Description	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Primary (Main)
	Is this a request for upgraded equipment?	No
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	No
New Antenna	Class	Full Power
Manufacturer and Types	Mounting	Side Mount
	Antenna position in stack	No Yes No Full Power Side Mount Not in Stack Elliptical Slotted Coaxial N/A N/A
	Polarization	Elliptical
	Туре	
	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)	1000.0 kW
	Manufacturer	

Model	TFU-26DSC /VP-R C170 MT
Year	2018
Justification for New Antenna	Current antenna will not work on assigned channel Updated replacement antenna model number to make assigned 1 MW ERP 3 /15/18

#### **Other Antenna Costs**

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	No
	Туре	
	Number of channels supported	N/A
	Frequencies of channels supported	N/A
	Frequency	N/A
	Do you need a combiner output splitter /switcher for dual feed lines?	N/A
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Single Channel
	Feed Line Size	6 1/8 inches inches

Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	Yes
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

#### **Other Antenna Cost Not Listed**

Information not provided.

#### Interim Antenna

#### **New Antenna Costs**

Section	Question	Response
New Antenna Description	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	No
New Antenna	Class	Full Power
Manufacturer and Type	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Туре	Broadband Slot
	Number of Stations Supported	1
	Number of Panels/Bays	8
	Lower Limit	470.00 MHz
	Upper Limit	700.00 MHz
	Design power capacity in use	90.0 %
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	100.0 kW
	Manufacturer	
	Model	TFU-WB8
	Year	2020

Justification for New Antenna	Interim
	antenna to
	operate
	during
	transition

#### Interim Antenna

#### **Other Antenna Costs**

Section	Question	Response
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	В
	Feed Line Size	4 1/16 inches
Side Mount Brackets	Do you require the separate purchase of side mount brackets for an 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

#### Interim Antenna

Other Antenna Cost Not Listed

Information not provided.

Transmission <sup>Seffien</sup>	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

# Primary Transmission Line

#### **Existing Transmission Line**

on 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	Manufacturer	
Line Manufacturer and Type	Туре	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	250 feet per run

#### **New Transmission Line**

Primary
<b>Transmission</b>

Section 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
	Туре	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	420 feet per run
	Justification for New Transmission Line	Replace line so KDVR can continue to operate or existing antenna system during transition Old line is shorter then new line.

Primary Other Transmission Line Expenses Not Listed

Transmission loinetion not provided.

#### Interim

#### **New Transmission Line**

Transmission	n Line Section	Question	Response
New Transmission Line		Use	Interim
	Costs	Description of Use	N/A
		Change Type	Purchase New
		Туре	Flexible Air
		Diameter	3 inches
		Segment Length	N/A
		Other Segment Length	
		Number of parallel runs	1
		Length	200 feet per run
		Justification for New Transmission Line	To feed interim antenna during transition

Other Transmission Line Expenses Not Listed Interim
Transmission icination 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?	Terrain Constrained
	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?	Yes
	Is tower compliant with Rev G?	No
Existing Tower Structure	Do you have a tower registration number?	Yes
Registration	ASR Number	1022259
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	39° 43' 42.1" N-
	Longitude (NAD83)	105° 14' 15.7" W-
	Overall Structure Height	375.00 feet
	Support Structure Height	372.04 feet

Ground Elevation Above Mean Sea Level (AMSL)	7357.85 feet
Structure Type	LTOWER - Lattice Tower
Tower Owner	Tribune Broadcasting Denver License, LLC
Date Constructed	05/06/2014

## 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:	Serious Reinforcements needed

## Primary Tower

# **Tower Rigging Costs**

Section	Question	Response
Tower Rigging Costs	Complex Tower	Terrain constrained
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?	No
	Number of Hours	N/A
	Explanation	N/A
Outside RF consulting Engineering Services	Perform engineering study for new channel assignment and antenna development	Yes
	Prepare engineering section of Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	2
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
Attorney and Other Outside Consulting	Prepare and file Form FCC Construction Permit Application	No
Services	For Auxiliary Facility	N/A
	For Main Facility	N/A
	Prepare and file 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
	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	No
	Address transition timing and coordination issues w/ other stations and wireless providers	No
RF Field Engineering Services	Comprehensive coverage verification via field study	No
	RF exposure measurements	Yes
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Outside
Other Professional Services Expenses Not Listed
Professional Services ©qstsided.

# 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	Yes
	Non-zoning permits	No
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	Yes
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	Yes
Other Miscellaneous Expenses	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	Yes
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes
	Does this relocation require Equipment Storage?	Yes
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	Yes
	Does this relocation require MVPD  Notification of a Channel Change?	Yes

Other Expenses Not Listed

**Expenses** Information not provided.

# **Cost Information**

#### **Transmitters**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Transmitter ULXTE-72	\$1,597,800.00	\$1,388,000.00		\$693,508.12	
2" Rigid Conduit and Wiring (Cost per foot)	\$10,400.00	\$10,000.00	N/A	N/A	N/A
Removal	\$25,000.00	\$25,000.00	Clear space to replacement transmitter	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	\$1,473,000.00	\$1,268,000.00	N/A	\$693,508.12	N/A
Transformer 3 phase /480v - 300 KVA	\$36,800.00	\$35,000.00	N/A	N/A	N/A
Switchgear - industrial 800 amp	\$38,200.00	\$36,300.00	N/A	N/A	N/A
Service entrance 3 phase/800 amp/208 volt	\$14,400.00	\$13,700.00	N/A	N/A	N/A
Auxiliary Transmitter UAXTE-8	\$251,500.00	\$149,000.00		\$0.00	

UHF - Air Cooled Solid State Transmitter 4 - 6 kW	\$236,500.00	\$134,000.00	N/A	N/A	N/A
Other Electrical Service: 100A 208V service	\$15,000.00	\$15,000.00	N/A	N/A	N/A
Sub-total	\$1,849,300.00	\$1,537,000.00	N/A	\$693,508.12	N/A
Total for all systems	\$3,915,935.00	\$2,511,315.00	N/A	\$949,610.48	N/A

## Components

Actual Information Description	File Name	
2" Rigid Conduit and Wiring (Cost per foot)	Information not provided.	
Removal	Information not provided.	
UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	Component Description: Amount:	ULXTE-72 Deposit \$343,127.69
	Component Description: Amount:	2nd payment for ULXTE-72 \$350,380.43
Transformer 3 phase/480v - 300 KVA	Information not provided.	
Switchgear - industrial 800 amp	Information not provided.	
Service entrance 3 phase /800 amp/208 volt	Information not provided.	
UHF - Air Cooled Solid State Transmitter 4 - 6 kW	Information not provided.	

Other Electrical Service:			
100A 208V service			

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
Interim Antenna TFU-WB8	\$107,080.00	\$67,900.00		\$0.00	
UHF - Lower Power Side Mount, One station antenna - medium power (50- 200 kW), horizontally polarized	\$89,400.00	\$55,000.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
Elbow complex, broadband, at antenna input, per 4 1/16. feedline (if needed)	\$10,950.00	\$6,500.00	N/A	N/A	N/A
Primary Antenna TFU-26DSC /VP-R C170 MT	\$242,180.00	\$237,400.00		\$188,772.76	

Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	\$12,300.00	\$11,000.00	N/A	\$9,267.76	N/A
UHF - High Power, Side Mount, basic slot antenna, 1000 kW input, directional,, elliptically or circularly polarized	\$200,000.00	\$200,000.00	N/A	\$173,745.00	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$5,760.00	N/A
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$20,000.00	N/A	N/A	N/A
Sub-total	\$349,260.00	\$305,300.00	N/A	\$188,772.76	N/A
Total for all systems	\$3,915,935.00	\$2,511,315.00	N/A	\$949,610.48	N/A

#### Components

<b>Actual Information</b>		
Description	File Name	

UHF - Lower Power Side Mount, One station antenna -	Information not provided.		
medium power (50-200 kW), horizontally polarized			
Sweep test of existing antenna	Information not provided.		
Elbow complex, broadband, at antenna input, per 4 1/16. feedline (if needed)	Information not provided.		
Elbow complex, single channel, at antenna input,			
per 6 1/8. feedline (if needed)	Component Description:	deposit - elbow	
po. 0 ./o. /ooao ( //ooa.a/		complex	
	Amount:	\$4,633.88	
	Component Description:	2nd payment -	
		elbow complex	
	Amount:	\$4,633.88	
UHF - High Power, Side Mount, basic slot antenna,			
1000 kW input, directional,	Component Description:	2nd payment -	
elliptically or circularly		VPOL	
polarized	Amount:	\$9,517.50	
	Component Description:	2nd payment -	
		antenna	
	Amount:	\$77,355.00	
	Component Description:	Antenna deposit	
	Amount:	\$77,355.00	
	Component Description:	deposit - VPOL	
	Amount:	\$9,517.50	

Sweep test of existing antenna	Component Description: Amount:	2nd payment - sweep test \$2,880.00
	Component Description: Amount:	deposit - sweep test \$2,880.00
Side mount brackets for high power antennas (if not included in antenna base cost)	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
Interim Transmission Line	\$11,800.00	\$11,200.00		\$0.00	
Flexible Air Transmission Line - dielectric, 3"	\$11,800.00	\$11,200.00	N/A	N/A	N/A
Primary Transmission Line	\$84,840.00	\$75,000.00		\$63,579.60	
Rigid Transmission Line - copper, 6 1/8"	\$84,840.00	\$75,000.00	N/A	\$63,579.60	N/A
Sub-total	\$96,640.00	\$86,200.00	N/A	\$63,579.60	N/A
Total for all systems	\$3,915,935.00	\$2,511,315.00	N/A	\$949,610.48	N/A

#### Components

Actual Information Description	File Name
Flexible Air Transmission Line - dielectric, 3"	Information not provided.

Rigid Transmission Line - copper, 6 1/8"

Component Description: 2nd payment -

transmission line

**Amount:** \$29,933.55

Component Description: 2nd payment -

TLSCR's

**Amount:** \$1,856.25

Component Description: deposit - TLSCR's

**Amount:** \$1,856.25

Component Description: deposit -

transmission line

**Amount:** \$29,933.55

# **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 LTOWER	\$1,499,300.00	\$465,800.00		\$0.00	
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$25,800.00	BAsed on final billing	N/A	N/A
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	\$421,000.00	\$120,000.00	N/A	N/A	N/A
Serious tower reinforcement /modifications	\$1,052,000.00	\$320,000.00	N/A	N/A	N/A
Sub-total	\$1,499,300.00	\$465,800.00	N/A	\$0.00	N/A
Total for all systems	\$3,915,935.00	\$2,511,315.00	N/A	\$949,610.48	N/A

#### Components

Information not provided.

### **Cost** Information

#### **Outside Professional Services**

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

Description  Outside Professional Services  RF Exposure Measurements  Prepare request for Special Temporary	Predetermined Cost Estimate \$37,245.00 \$21,050.00 \$4,100.00	Estimated Cost \$34,500.00 \$20,000.00	Estimated Cost Justification  N/A	\$0.00  N/A  N/A	Actual Cost Justification
Professional Services  RF Exposure Measurements  Prepare request for Special	\$21,050.00	\$20,000.00		N/A	
Measurements  Prepare request for Special					
request for Special	\$4,100.00	\$3,000.00	N/A	N/A	NI/A
Authorization					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	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	N/A	N/A
Sub-total	\$37,245.00	\$34,500.00	N/A	\$0.00	N/A

Total for all	\$3,915,935.00	\$2,511,315.00	N/A	\$949,610.48	N/A
systems					

### Components

Information not provided.

### **Cost Information**

#### **Other Expenses**

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

Description	Predetermined Cost Estimate	Estimated	Estimated Cost Justification	Actual Cast	Actual Cost Justification
Other Expenses	\$84,190.00	\$82,515.00	Justinication	\$3,750.00	Justinication
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	\$3,750.00	N/A
MVPD Notification of Channel Change	\$11,000.00	\$11,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	\$0.00	\$0.00	N/A	N/A	N/A
Equipment Storage	\$10,000.00	\$10,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	\$15,000.00	\$15,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$25,000.00	\$25,000.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$0.00	N/A	N/A	N/A

FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	N/A	N/A	N/A
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A	N/A	N/A
Local Zoning	\$10,000.00	\$10,000.00	N/A	N/A	N/A
Sub-total	\$84,190.00	\$82,515.00	N/A	\$3,750.00	N/A
Total for all systems	\$3,915,935.00	\$2,511,315.00	N/A	\$949,610.48	N/A

### Components

Actual Information Description	File Name	
DTV Medical Facility Notification	Component Description: Amount:	medical testing \$3,750.00
MVPD Notification of Channel Change	Information not provided.	
Develop and air announcement of upcoming channel change	Information not provided.	
Equipment Storage	Information not provided.	
Equipment Delivery and Handling Charges	Information not provided.	
Disposal Costs (for equipment and other waste, net of any salvage value)	Information not provided.	
FCC Filing Fees - Form 2100 minor change CP application	Information not provided.	
FCC Filing Fees - Form 2100 license to cover application	Information not provided.	

FCC Filing Fees - Special Temporary Authorization request	Information not provided.
Local Zoning	Information not provided.

## Cost Information

#### **Grand Total**

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$3,915,935.00	\$2,511,315.00	\$949,610.48

Reimbursem	entestatus	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

Section Question Response

### Submission of Estimated Expenses Statements

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.

- 1. The Authorized
  Person signing
  below certifies that he
  /she is authorized to
  submit this TV
  Broadcaster
  Relocation Fund
  Reimbursement
  Form on behalf of
  the above-named
  entity.
- 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 abovenamed applicant for the Authorization(s) specified above. Teri Ann Guillory Broadcasting Operations

09/18/2019

Section Question Response

# Submission of Actual Cost Documentation Statements

WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISIONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).

- 1. The Authorized
  Person signing
  below certifies and
  represents that he
  /she is authorized to
  submit this TV
  Broadcaster
  Relocation Fund
  Reimbursement
  Form on behalf of
  the above-named
  entity.
- The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.
- The above-named entity acknowledges that all certifications and attached documentation are considered material representations.

- 4. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.
- 5. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (full power and Class A stations) and/or otherwise modify a television station's facility as a result of the spectrum repack (LPTV/TV Translator stations); or to minimize service disruption resulting from a repacked television station (FM stations); or to continue to carry the signal of a broadcaster that changes channels (MVPD).
- 6. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
- 7. The above-named entity certifies that the cost information /documents submitted reflect costs actually incurred.

- 8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.
- 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 abovenamed applicant for the Authorization(s) specified above. Teri Ann Guillory Broadcasting Operations

09/18/2019

#### **Attachments**