

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility 19190 Service: DTV Call WUPW Channel: 26 (UHF)

ID: Sign:

ID: File

0000024805

Number:

FRN: **0021396460** Date **02/17**

Submitted: /2020

Applicant Information

Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|---------------------------------|---|----------------------|------------------|---------------------------------|
| WUPW LICENSE SUBSIDIARY, LLC | Thomas Henson 2131 AYRSLEY TOWN BLVD. SUITE 300 CHARLOTTE, NC 28273 United States | +1 (704) 643-4148 | thenson@ayrsley. | Limited Liability Company |

Reimbursement Contact Name and Information Reimbursement Contact Information

| Applicant | Address | Phone | Email |
|----------------|---------|-------|-------|
| [Confidential] | | | |

Preparer Contact Information

Preparer Contact Name and Information

| Applicant | Address | Phone | Email |
|-----------|---------|-------|-------|
| | | | |

The Preparer is same as the reimbursement contact.

Broadcaster Information and Transition Plan Question Response

| Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information. | No |
|--|---|
| Briefly describe transition plan | Stations existing side mount antenna and line serves as interim. Remove dormant side mount, install new side mount antenna and 4" line. Install new main and backup Transmitters. |

Transmitters

| 'S | 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 | Retune Existing |
| | Use | Auxiliary (Backup) |
| | 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 | Harris |
| Manufacturer and Type | Model | UAX |
| | Year | 2011 |
| | | ' |

| Туре | Solid State |
|----------------------------|-------------|
| Solid State Cooling | Air Cooled |
| Solid State Power capacity | 1.1 kW |

Auxiliary Transmitter

Retuning Transmitter Costs

| Section | Question | Response |
|-----------------|--|----------|
| New IOT Tubes | Number of Tubes (including accessories) needed | N/A |
| New Mask Filter | Power | 3 kW |
| | Other Power | N/A |
| New Exciter | Is a new exciter needed? | No |

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 | No |
| | Description | N/A |
| HVAC Service | Does the replacement transmitter require HVAC Service? | No |
| | Туре | N/A |
| | Size | N/A |
| | | ı |

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

Auxiliary
Transmitter Information not provided.

Other Transmitter Cost Not Listed

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 | Ultimate |
| | Year | 2003 |
| | Туре | Solid State |
| | Solid State Cooling | Liquid Cooled |
| | Solid State Power Capacity | 5 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 | ULXTE-8 |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Liquid Cooled |
| | Solid State Power capacity | 5.2 kW |
| | Justification for New Transmitter | Existing transmitter can not be retuned |

Primary Transmitter

Other Transmitter Costs

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

Transmitter Information not provided.

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 |
| | 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 | Horizontal |
| | 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) | 110.0 kW |

| Manufacturer | |
|--------------|-------------------------|
| Model | TFU- 24DSC-R C170 |
| Year | 2002 |

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? | Yes |
| | 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 | Not in Stack |
| | Polarization | Elliptical |
| | Туре | 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) | 65.0 kW |
| | Manufacturer | |
| | | |

| Model | TFU-22DSC /VP-R C170 |
|-------------------------------|--|
| Year | 2019 |
| Justification for New Antenna | Existing Channel 46 antenna can not be retuned. E- Pol premium is not reimbursable |

Other Antenna Costs

| Section | Question | Response |
|--------------------------------|---|----------|
| Combiner for Shared Antenna | Do you need a Combiner for a Shared Antenna? | |
| | 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? | No |
| | Broadband or Single Channel? | N/A |
| | Feed Line Size | N/A |
| 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? | Yes |
| Sweep Test | Do you require the sweep testing of transmission line and antenna? | Yes |

Other Antenna Cost Not Listed

Information not provided.

| Transmission ^{Seffien} | Question | Response |
|------------------------------------|---|----------|
| Transmission Line Related Expenses | Do you have transmission line related expenses? | Yes |

Primary Transmission Line

Existing Transmission Line

| n 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 | 19 1/2 inches |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 1325 feet per run |

Primary Transmi

New Transmission Line

| nsmissio | 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 | 4 1/16 inches |
| | | Other Diameter | N/A |
| | | Segment Length | 20 inches |
| | | Other Segment Length | N/A |
| | | Number of parallel runs | 1 |
| | | Length | 1325 feet per run |
| | Justification for New Transmission Line | Existing line to serve as interim. | |

Primary Other Transmission Line Expenses Not Listed

Transmission loine tion 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? | Yes |
| Existing Tower Structure Registration | Is tower compliant with Rev G? | No |
| | Do you have a tower registration number? | Yes |
| | ASR Number | 1012423 |
| Coordinates (NAD83 (North American Datum of 1983)) | Latitude (NAD83) | 41° 39' 22.0" N- |
| | Longitude (NAD83) | 083° 26' 41.0" W- |
| | Overall Structure Height | 1252.94 feet |
| | Support Structure Height | 1222.10 feet |
| | Ground Elevation Above Mean Sea Level (AMSL) | 595.47 feet |
| | | 1 |

| Structure Type | TOWER - Free Standing or Guyed Structure |
|------------------|---|
| Tower Owner | WUPW LICENSE SUBSIDIARY, LLC |
| Date Constructed | 08/23/1985 |

Primary 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: | 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 | 595 |
| | Explanation | Pattern analysis Antenna Spec Transmitter Spec Building drawings Installation Supervision Accounting Internal Legal |
| 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 | No |
| | Quantity | N/A |
| | 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 | 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 | No |
| RF Field Engineering Services | Comprehensive coverage verification via field study | Yes |
| | RF exposure measurements | No |
| | Additional Field Engineering Service | No |
| | Number of Days | N/A |
| | Justification | N/A |

Outside Professional

Other Professional Services Expenses Not Listed

| l Services Costs | Description | |
|----------------------------|----------------------------|--|
| Other Engineering Services | Other Engineering Services | |

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? | Yes |
| | Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change? | Yes |
| | Does this relocation require MVPD Notification of a Channel Change? | Yes |

Other Expenses

Other Expenses Not Listed

| Name | Description |
|----------|--|
| Security | Security service - Security Personnel provided by vendor to the equipment shelter site |

Cost Information

Transmitters

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

| Description Primary Transmitter ULXTE-8 | Predetermined Cost Estimate \$337,250.00 | Estimated Cost \$291,196.63 | Estimated Cost Justification | Actual Cost \$210,595.55 | Actual Cost Justification |
|---|--|-----------------------------------|--|-----------------------------|------------------------------|
| Transformer 3 phase /480v - 150 KVA | \$25,550.00 | \$24,300.00 | N/A | \$2,122.87 | N/A |
| UHF - Liquid Cooled Solid State Transmitter 4.9 . 6.5 kW | \$273,500.00 | \$230,596.63 | Quote attached | \$208,472.68 | N/A |
| Switchgear - industrial 800 amp | \$38,200.00 | \$36,300.00 | N/A | N/A | N/A |
| Auxiliary Transmitter UAX | \$109,355.00 | \$11,948.60 | | \$2,785.40 | |
| 3 kW mask filter | \$4,155.00 | \$0.00 | existing filter retuned | N/A | N/A |
| UHF and VHF - minor banding issues | \$105,200.00 | \$11,948.60 | Quote attached (GA- 00021683) | \$2,785.40 | N/A |
| Sub-total | \$446,605.00 | \$303,145.23 | N/A | \$213,380.95 | N/A |
| Total for all systems | \$1,394,256.00 | \$1,311,393.06 | N/A | \$784,079.73 | N/A |

Components

| Actual Information Description | File Name | |
|------------------------------------|------------------------|---|
| Transformer 3 phase/480v - 150 KVA | Component Description: | 1. WUPW-110-1st Primary Transmitter - 3 Phase, 480 V, 150 |
| | Amount: | KVA Transformer \$2,122.87 |

| UHF - Liquid Cooled Solid State Transmitter 4.9 . 6.5 kW | Component Description: | Transmitter, Mask Filter Saystem, RF Accessories, |
|--|--------------------------------|---|
| | Amount: | Electrical \$35,653.37 |
| | Component Description: Amount: | LABOR \$659.27 |
| | Component Description: Amount: | LABOR \$1,434.60 |
| | Component Description: Amount: | ULXTE-8 \$23,059.66 |
| | Component Description: | Transmitter, Mask Filter Saystem, RF Accessories, Electrical, Installation & Proof |
| | Amount: | \$113,076.29 |
| | Component Description: | Transmitter, Mask Filter Saystem, RF Accessories, Electrical, Installation & |
| | Amount: | Proof \$34,589.49 |
| Switchgear - industrial 800 amp | Information not provided. | |
| | | |

UHF and VHF - minor banding issues

Component Description: Channel Change

& Proof

Amount: \$1,671.24

Component Description: Channel Change

UAX-1000AT

Amount: \$1,114.16

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 TFU-22DSC /VP-R C170 | \$115,090.00 | \$216,393.90 | | \$190,740.90 | |
| Pattern scatter analysis for side mount high /med power antennas (if not included in antenna base cost) | \$5,260.00 | \$5,000.00 | N/A | N/A | N/A |
| Sweep test of existing antenna | \$6,730.00 | \$6,400.00 | N/A | \$3,840.00 | N/A |

| UHF - Lower | \$103,100.00 | \$204,993.90 | Quote attached V- | \$186,900.90 | N/A |
|-----------------------------|----------------|----------------|----------------------|--------------|-----|
| Power | | | Pol | | |
| Side | | | premium | | |
| Mount, | | | deducted | | |
| One | | | from | | |
| Station | | | estimate; | | |
| antenna . | | | Please see | | |
| medium | | | WUPW- | | |
| power (50- | | | 210- | | |
| 200 kW), | | | Primary | | |
| elliptically | | | Antenna - | | |
| or | | | UHF Lower | | |
| circularly | | | Power Side | | |
| polarized | | | Mount, E- | | |
| | | | POL | | |
| | | | Estimated | | |
| | | | Cost | | |
| | | | Increase | | |
| | | | Justification | | |
| | | | Cover | | |
| | | | Letter v.0 | | |
| Sub-total | \$115,090.00 | \$216,393.90 | N/A | \$190,740.90 | N/A |
| Total for all systems | \$1,394,256.00 | \$1,311,393.06 | N/A | \$784,079.73 | N/A |

Components

| File Name | |
|---------------------------|--|
| Information not provided. | |
| | |
| Component Description: | Antenna Sweep |
| | Test |
| Amount: | \$640.00 |
| Component Description: | Sweep Test |
| Amount: | \$3,200.00 |
| | Information not provided. Component Description: Amount: Component Description: |

UHF - Lower Power Side Mount, One Station antenna . medium power (50-200 kW), elliptically or circularly polarized

Component Description: UHF-Lower Power

Side Mount

\$78,342.90 Amount:

Component Description: Mount, brackets,

> elbow complex, repack sweep, repack vpol.

transmission line,

Amount: \$18,093.00

Component Description:

Amount:

Primary Antenna

\$90,465.00

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 | \$188,150.00 | \$126,195.30 | | \$123,297.30 | |
| Rigid Transmission Line - copper, 4 1 /16" | \$188,150.00 | \$126,195.30 | see Estimated Cost Justification WUPW-310- Primary Transmission Line - Rigid Copper, 4 1_16 v0 | \$123,297.30 | N/A |
| Sub-total | \$188,150.00 | \$126,195.30 | N/A | \$123,297.30 | N/A |
| Total for all systems | \$1,394,256.00 | \$1,311,393.06 | N/A | \$784,079.73 | N/A |

Components

| Actual Information | |
|--------------------|-----------|
| Description | File Name |

Rigid Transmission Line - copper, 4 1/16"

Component Description: WUPW-310-

Primary

Transmission Line
- Rigid Copper, 4 1

/16"

Amount: \$49,509.18

Component Description: Primary

Transmission Line

Amount: \$61,490.10

Component Description: Primary

Transmission Line

Amount: \$12,298.02

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 | \$381,100.00 | \$365,522.63 | | \$186,089.63 | |
| Tall Tower (greater than 500') | \$210,500.00 | \$200,000.00 | N/A | \$165,000.00 | N/A |
| Minor tower reinforcement /modifications | \$158,000.00 | \$150,000.00 | N/A | \$0.00 | N/A |
| Structural engineering tower load study for well documented tower | \$12,600.00 | \$15,522.63 | per Estimated Cost Justification WUPW- 410- Existing Primary Tower - Tower Load Study v0 | \$21,089.63 | N/A |
| Sub-total | \$381,100.00 | \$365,522.63 | N/A | \$186,089.63 | N/A |
| Total for all systems | \$1,394,256.00 | \$1,311,393.06 | N/A | \$784,079.73 | N/A |

Components

| Actual Information | | |
|---------------------------|-----------|--|
| Description | File Name | |

| Tall Tower (greater than 500') | | |
|---|---------------------------|-------------------|
| 300) | Component Description: | Tower Service- |
| | | Down payment |
| | | and mobilization |
| | | for WUPW |
| | Amount: | \$65,000.00 |
| | Component Description: | Tower Service- |
| | | Final Invoice for |
| | | the WUPW |
| | | Project |
| | Amount: | \$100,000.00 |
| Minor tower reinforcement /modifications | Information not provided. | |

Structural engineering tower load study for well documented tower

Component Description: Inspection and

Mapping for WUPW \$5,618.11

Amount: \$5,618.1

Component Description: STNLSA STNL

Structural Analysis

Amount: \$2,567.00

Component Description: Structural analysis

Amount: \$1,500.00

Component Description: Structural analysis

Amount: \$1,500.00

Component Description: Perform a

Structural Analysis for referenced project.

Amount: \$6,000.00

Component Description: 20% deposit

Amount:

WUPW \$1,404.52

Component Description: Perform a

Structural

Reanalysis for the referenced site for the new scenario.

Amount: \$2,500.00

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 Co |
|---|-----------------------------|-------------------|---|-------------|-----------|
| Outside Professional Services | \$210,560.00 | \$255,985.00 | | \$65,689.95 | |
| Project management of the transition | \$94,010.00 | \$144,675.00 | Please see attached Widelity quote | \$56,479.95 | N/A |
| Other Engineering Services | \$10,000.00 | \$10,000.00 | Cost estimate for other engineering services such as RF calculations, evolving transition plan calculations, bid spec prep / distribution / award recommendation / etc and discussion, etc. | \$4,035.00 | N/A |
| Comprehensive coverage verification via field study, if needed | \$84,200.00 | \$80,000.00 | 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 - Prepare and File FCC Form 2100 (main), Construction Permit Application | \$5,260.00 | \$5,000.00 | 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 | \$2,000.00 | N/A |
| Perform engineering study for new channel assignment and antenna development | \$7,360.00 | \$7,000.00 | N/A | \$1,375.00 | N/A |
| Prepare and or review reimbursement form | \$2,630.00 | \$2,560.00 | N/A | \$1,800.00 | N/A |
| Sub-total | \$210,560.00 | \$255,985.00 | N/A | \$65,689.95 | N/A |
| Total for all systems | \$1,394,256.00 | \$1,311,393.06 | N/A | \$784,079.73 | N/A |

Components

| Actual Information Description | File Name |
|--------------------------------------|-----------|
| Project management of the transition | |

Component Description: Osborn 33673

v190618pmv1

Amount: \$1,050.00

Component Description: Osborn 32839

v190614pmv1

Amount: \$1,875.00

Component Description: Osborn 32837

v190614pmv1

Amount: \$150.00

Component Description: Osborn 32975

v190617pmv1

Amount: \$150.00

Component Description: Osborn 35819

v200204jgv1

Amount: \$316.00

Component Description: Project

Management

Amount: \$2,263.15

Component Description: Project

Management

Amount: \$1,753.20

Component Description: Project

Management

Amount: \$1,782.20

Component Description: Project

Management

Amount: \$2,593.60

Component Description: Osborn 35405

v200204jgv1

Amount: \$237.00

Component Description: Project

Management

Amount: \$1,965.45

Component Description: Osborn 32210

v200204jgv1

Amount: \$1,200.00

Component Description: Osborn 34590

v190813jgv1

Amount: \$375.00

Component Description: Osborn 35010

v200204jgv1

Amount: \$300.00

Component Description: Project

Management

Amount: \$2,305.35

Component Description: Osborn 36196

v200204jgv1

Amount: \$1,264.00

Component Description: Project

Management

Amount: \$2,533.55

Component Description: Project

Management

Amount: \$3,419.95

Component Description:

Project Management

Amount:

\$2,607.35

Component Description:

Project

Amount:

Management \$2,843.35

Component Description:

Project

Amount:

Management \$3,476.95

Component Description:

Project

Amount:

Management \$5,022.90

Component Description:

Project

Amount:

Management \$2,133.70

Component Description:

Project

Amount:

Management

\$4,417.40

Component Description:

Project

Amount:

Management \$2,531.60

Component Description:

Project

Amount:

Management \$2,348.30

Component Description:

Project

Amount:

Management

\$2,649.65

| | Component Description: Amount: | Project management \$2,915.30 |
|---|--------------------------------|---|
| Other Engineering Services | Component Description: Amount: | Osborn 36196 v200204jgv1 \$4,035.00 |
| 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 - Prepare and File FCC Form 2100 (main), Construction Permit Application | 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 | Component Description: Amount: | FCC Form 2100 Construction Permit Application \$2,000.00 |

Perform engineering study for new channel assignment **Component Description:** Engineering study and antenna development work for new channel assignment and antenna development. \$1,250.00 Amount: **Component Description:** Engineering study work for new channel assignment and antenna development. Amount: \$125.00 Prepare and or review reimbursement form **Component Description:** Osborn 35405 v200204jgv1 Amount: \$45.00 **Component Description:** Osborn 35010 v200204jgv1 Amount: \$1,530.00 **Component Description:** Osborn 36196 v200204jgv1 Amount: \$50.00 **Component Description:** Osborn 35819 v200204jgv1

Amount:

\$175.00

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 |
|---|--------------------------------|-------------------|---|-------------|-------------|
| Other Expenses | \$52,751.00 | \$44,151.00 | | \$4,881.00 | |
| Security | \$4,536.00 | \$4,536.00 | Security service - Security Personnel provided by vendor to the equipment shelter site | \$4,536.00 | N/A |
| Develop and air announcement of upcoming channel change | \$2,850.00 | \$2,850.00 | estimate for on air rescan announcement production Quote attached | N/A | N/A |
| MVPD Notification of Channel Change | \$0.00 | \$0.00 | N/A | N/A | N/A |
| DTV Medical Facility Notification | \$11,550.00 | \$2,950.00 | Group quote attached | N/A | N/A |
| Disposal Costs (for equipment and other waste, net of any salvage value) | \$3 45 .00 | \$345.00 | Please see attached disposal justification document and Bluebox Dumpsters, Inc. invoice #2920 | \$345.00 | N/A |
| Equipment Delivery and Handling Charges | \$2,970.00 | \$2,970.00 | On site forklift rental estimate Representative quote attached | N/A | N/A |

| Equipment Storage \$30,500.00 \$30,500.00 Estimate for Dielectric on Site antenna Storage Dielectric letter attached N/A Sub-total \$52,751.00 \$44,151.00 N/A \$4,881.00 Total for all systems \$1,394,256.00 \$1,311,393.06 N/A \$784,079.73 | | | | | | |
|--|---------------|----------------|----------------|-------------------|--------------|-----|
| Sub-total \$52,751.00 \$44,151.00 N/A \$4,881.00 Total for all \$1,394,256.00 \$1,311,393.06 N/A \$784,079.73 | Equipment | \$30,500.00 | \$30,500.00 | | N/A | N/A |
| Sub-total \$52,751.00 \$44,151.00 N/A \$4,881.00 Total for all \$1,394,256.00 \$1,311,393.06 N/A \$784,079.73 | Storage | | | | | |
| Sub-total \$52,751.00 \$44,151.00 N/A \$4,881.00 Total for all \$1,394,256.00 \$1,311,393.06 N/A \$784,079.73 | | | | | | |
| Sub-total \$52,751.00 \$44,151.00 N/A \$4,881.00 Total for all \$1,394,256.00 \$1,311,393.06 N/A \$784,079.73 | | | | Dielectric letter | | |
| Total for all \$1,394,256.00 \$1,311,393.06 N/A \$784,079.73 | | | | attached | | |
| | Sub-total | \$52,751.00 | \$44,151.00 | N/A | \$4,881.00 | N/A |
| systems | Total for all | \$1,394,256.00 | \$1,311,393.06 | N/A | \$784,079.73 | N/A |
| | systems | | | | | |

Components

| Actual Information | | |
|--|--------------------------------|--------------------------------|
| Description Description | File Name | |
| Security | Component Description: | Security Service |
| | Amount: | \$1,512.00 |
| | Component Description: Amount: | Security Service \$2,016.00 |
| | Component Description: Amount: | Security Service \$1,008.00 |
| Develop and air announcement of upcoming channel change | Information not provided. | |
| MVPD Notification of Channel Change | Information not provided. | |
| DTV Medical Facility Notification | Information not provided. | |
| Disposal Costs (for equipment and other waste, net of any salvage value) | Component Description: Amount: | 20 yd. dumpster \$345.00 |
| Equipment Delivery and Handling Charges | Information not provided. | |

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Information not provided.

Cost Information

Grand Total

| | Predetermined Cost Estimate | Estimated Cost | Actual Cost |
|-----------------------|--------------------------------|----------------|--------------|
| Total for all systems | \$1,394,256.00 | \$1,311,393.06 | \$784,079.73 |

| Reimbursem | envestiatus | 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. Paul Eriksen Controller

02/17/2020

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. Paul Eriksen

Controller

02/17/2020

Attachments