



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **190915** | Service: **DCA** | Call **WSVF-CD** | Channel:  
ID: | Sign:  
**36 (UHF)** | File **0000028691**  
Number:  
FRN: **0018223693** | Date **06/08**  
Submitted: **/2020**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>GRAY TELEVISION LICENSEE, LLC</b>	50 NORTH MAIN STREET HARRISONBURG, VA 22802 United States	+1 (540) 433-9191	robert.folliard@gray.tv	Limited Liability Company

## Reimbursement Contact Information

### Reimbursement Contact Name and Information

Applicant	Address	Phone	Email
[Confidential]			

## Preparer Contact Information

### Preparer Contact Name and Information

Applicant	Address	Phone	Email
<b>Samuel Hariton</b> <i>Widely</i>	Samuel Hariton 4031 University Dr Suite 100 Fairfax, VA 22030 United States	+1 (339) 222-8107	sam.hariton@widelity.com

**Broadcaster  
Information  
and  
Transition  
Plan**

Question	Response
Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information.	Yes
Briefly describe transition plan	The station will be replacing the main antenna, transmission line, and transmitter.

**Transmitters**

Section	Question	Response
<b>Transmitter Related Expenses</b>	Do you have transmitter related expenses?	Yes

**Primary  
Transmitter**

**Existing Transmitter Information**

<b>Section</b>	<b>Question</b>	<b>Response</b>
<b>Existing Transmitter Description</b>	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
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	UAX2000
	Year	2013
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	2.2 kW

**Primary  
Transmitter**

**New Transmitter Costs**

Section	Question	Response
<b>New Transmitter</b>	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Manufacturer	
	Model	EC702HP-BB
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	1.7 kW
	Justification for New Transmitter	The old transmitter cannot be returned

**Primary  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
<b>Electrical Service</b>	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No
	Power	N/A
	Rigid Conduit and Wiring	No
	Size	N/A
	Length	N/A
	Other Electrical Service	No
	Description	N/A

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

**Primary Transmitter**      **Other Transmitter Cost Not Listed**  
Information not provided.

**Interim  
Transmitter**

**New Transmitter Costs**

Section	Question	Response
<b>New Transmitter</b>	Use	Interim
	Description of Use	N/A
	Change Type	Lease New
	Manufacturer	
	Model	UAXT-3R37
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	1.5 kW
	Justification for New Transmitter	Renting transmitter while main is being returned.

**Interim  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
<b>Electrical Service</b>	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	The new transmitter will require reconfiguration of the electrical service on site. The electrical work cost has been estimated based on verbal guidance from local electrical contractors.
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	No
	Type	N/A
	Size	N/A
	Other Size	N/A
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
<b>Channel 14 Costs</b>	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A
<b>Inside RF System</b>	Is an additional interior RF system required to support this interim transmitter?	No

**Interim Transmitter**

**Other Transmitter Cost Not Listed**

Name	Description
HVAC	Additional HVAC for interim transmitter

**Antennas**

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



**Primary  
Antenna**

**Existing Antenna Information**

Section	Question	Response
<b>Existing Antenna Description</b>	Type of change	Purchase New
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	No
	Is the existing antenna directional?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	Yes
<b>Existing Antenna Manufacturer and Type</b>	Class	Class A
	Mounting	Side 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) .....	13.0 kW

Manufacturer	
Model	AL80-43 (Single Channel with Broadband Nulling System)
Year	2013

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**Primary  
Antenna**

**New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	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?	Yes
	Is antenna directional?	No
	Will antenna be located on or in close proximity to an antenna farm?	Yes
<b>New Antenna Manufacturer and Types</b>	Class	Class A
	Mounting	Top Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	Type	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels/Bays	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Design power capacity in use	N/A
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	15.0 kW
Manufacturer		

Model	ETU4U7-ETP4OX-30/34/36
Year	2012
Justification for New Antenna	Current Antenna cannot be returned.

**Primary Antenna**

**Other Antenna Costs**

Section	Question	Response
<b>Combiner for Shared Antenna</b>	Do you need a Combiner for a Shared Antenna?	Yes
	Type	New
	Number of channels supported	3
	Frequencies of channels supported	RF channel
	Frequency	N/A
	Do you need a combiner output splitter /switcher for dual feed lines?	No
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	No
	Broadband or Single Channel?	N/A
	Feed Line Size	N/A
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power antenna?	
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	No

**Enter a list of RF channel numbers.**

RF Channel Number
30
34
36

**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?

**Primary Transmission Line** **Add Transmission Line**

Section	Question	Response
Existing Transmission Line Description	Type of change	Utilize Existing
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is this transmission currently shared with any other stations?	No
	Is Transmission Line in operating condition?	Yes
Existing Transmission Line Manufacturer and Type	Manufacturer	Andrew
	Type	Flexible Foam
	Diameter	7/8 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	164 feet per run

**Primary  
Transmission  
Line**      **Other Transmission Line Expenses Not Listed**

<b>Name</b>	<b>Description</b>
<b>DO NOT USE. Null line for Green Bank.</b>	<b>DO NOT USE. Null line for Green Bank.</b>

**Primary  
Transmission  
Line**

**Existing Transmission Line**

Section	Question	Response
<b>Existing Transmission Line Description</b>	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
<b>Existing Transmission Line Manufacturer and Type</b>	Manufacturer	
	Type	Flexible Foam
	Diameter	1 5/8 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	164 feet per run



**Primary  
Transmission  
Line**

**New Transmission Line**

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Flexible Air
	Diameter	1 5/8 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	175 feet per run
	Justification for New Transmission Line	The new antenna requires a larger, air-dielectric pressurized line to pressurize the signal splitter on the antenna, so the needed line was added.

**Primary  
Transmission  
Line**

**Other Transmission Line Expenses Not Listed**

Information not provided.

**Interim  
Transmission  
Line**

**New Transmission Line**

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Type	Flexible Foam
	Diameter	1 5/8 inches
	Segment Length	N/A
	Other Segment Length	
	Number of parallel runs	2
	Length	164 feet per run
	Justification for New Transmission Line	Required for the new channel 36 antenna while the channel 43 antenna is broadcasting.

**Interim  
Transmission  
Line**

**Other Transmission Line Expenses Not Listed**

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	Leased
	Is this tower consider Complex?	Candelabra
	Is this tower currently shared with any other stations?	Yes
	One or more FM, AM or TV radio broadcaster(s)	Yes
	Others Types of Users	Yes
	Is tower documented for structural analysis?	Yes
	Is tower compliant with Rev G?	No
Existing Tower Structure Registration	Do you have a tower registration number?	No
	ASR Number	
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	38° 23' 34.4" N-
	Longitude (NAD83)	078° 46' 12.0" W-
	Overall Structure Height	80.00 feet
	Support Structure Height	80.00 feet
	Ground Elevation Above Mean Sea Level (AMSL)	2921.20 feet

Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	Rockingham County, VA
Date Constructed	01/01/1979

**FM, AM or TV radio broadcasters. Facility ID's, Call Signs and Services of other broadcast stations with whom the tower is shared**

Facility ID	Call Sign	Service
47705	WVIR-CD	DTV
168767	WSVW-LD	LPD
4688	WHSV-TV	DTV

**Other Types of Users**

Users
misc unlicensed
Emergency Radio

**Primary Tower**

**Tower Modification Costs**

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

**Primary  
Tower**

**Tower Rigging Costs**

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

**Primary  
Tower**

**Other Tower Expenses Not Listed**

Name	Description
Moving Equipment	Removing main antenna, installing a new antenna

**Outside Professional Services Costs**

Section	Question	Response
<p><b>Outside Project Management Services</b></p>	<p>Do you require outside project management services?</p>	<p>Yes</p>
	<p>Number of Hours</p>	<p>711</p>
	<p>Explanation</p>	<p>WSFV-CD does not have necessary resources in house to facilitate on-time completion of the station's build. WSFV-CD will hire an outside firm to support WSFV-CD in these tasks to ensure a timely and well managed transition.</p>
<p><b>Outside RF consulting Engineering Services</b></p>	<p>Perform engineering study for new channel assignment and antenna development</p>	<p>Yes</p>
	<p>Prepare engineering section of Form FCC Construction Permit Application</p>	<p>Yes</p>
	<p>For Auxiliary Facility</p>	<p>No</p>
	<p>For Main Facility</p>	<p>Yes</p>
	<p>Prepare engineering section of Form FCC License to Cover Application</p>	<p>Yes</p>
	<p>For Auxiliary Facility</p>	<p>No</p>
	<p>For Main Facility</p>	<p>Yes</p>
	<p>Prepare request for Special Temporary Authority</p>	<p>Yes</p>

	Quantity	1
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
<b>Attorney and Other Outside Consulting Services</b>	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	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	Yes
Prepare or Review FCC Form 399 for Reimbursement	Yes	
Address transition timing and coordination issues w/ other stations and wireless providers	Yes	
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	No
	RF exposure measurements	No
	Additional Field Engineering Service	Yes

Number of Days	5
Justification	Yes. NRAO Compliance

**Outside  
Professional  
Services  
Costs**

**Other Professional Services Expenses Not Listed**

Information not provided.



**Other Expenses**

Section	Question	Response
<b>AM Pattern Disturbance</b>	Is an Impact Study needed?	No
	Is Remediation needed?	No
<b>Facility Expenses</b>	Name	N/A
	Other Distributed Transmission System Expenses Not listed	N/A
	Name	N/A
	Is Notification of a Medical Facility required as a result of DTV broadcasting?	Yes
<b>Permit and Filing Costs</b>	Local Zoning	No
	Non-zoning permits	Yes
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	No
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	Yes
<b>Other Miscellaneous Expenses</b>	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	No
	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**

Information not provided.

**Cost Information**

**Transmitters**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Interim Transmitter UAXT-3R37</b>	<b>\$126,000.00</b>	<b>\$0.00</b>		<b>\$0.00</b>	
HVAC	<i>\$0.00</i>	\$0.00	No interim transmitter is needed.	N/A	N/A
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	\$126,000.00	\$0.00	No interim transmitter is needed	N/A	N/A
Other Electrical Service: The new transmitter will require reconfiguration of the electrical service on site. The electrical work cost has been estimated based on verbal guidance from local electrical contractors.	<i>\$0.00</i>	\$0.00	No interim transmitter is needed.	N/A	N/A
<b>Primary Transmitter EC702HP-BB</b>	<b>\$126,000.00</b>	<b>\$85,958.00</b>		<b>\$85,958.00</b>	

UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	\$126,000.00	\$85,958.00	Please see WSVF and WHSV Massanutten Hitachi Comark proposal P#3740R3- WSVF MASSANUTTEN- EC702-190220, less cost of combiner	\$85,958.00	N/A
<b>Sub-total</b>	\$252,000.00	\$85,958.00	N/A	\$85,958.00	N/A
<b>Total for all systems</b>	\$1,338,553.73	\$715,068.60	N/A	\$285,130.92	N/A

### Components

Actual Information	
Description	File Name
HVAC	Information not provided.
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	Information not provided.
Other Electrical Service: The new transmitter will require reconfiguration of the electrical service on site. The electrical work cost has been estimated based on verbal guidance from local electrical contractors.	Information not provided.
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	<p><b>Component Description:</b> WSVF-CD, SYSTEM EC702HP-BB</p> <p><b>Amount:</b> \$81,660.10</p> <p><b>Component Description:</b> WSVF-CD, SYSTEM EC702HP-BB</p> <p><b>Amount:</b> \$4,297.90</p>



**Cost Information**

**Antennas**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Primary Antenna ETU4U7-ETP4OX-30 /34/36</b>	<b>\$269,408.73</b>	<b>\$189,603.73</b>		<b>\$77,940.20</b>	
New combiner, cost per channel (without antenna)	\$84,200.00	\$4,395.00	Please see WSVF and WHSV Massanutten Hitachi Comark proposal P#3740R3-WSVF MASSANUTTEN-EC702-190220	\$4,395.00	N/A
UHF - Lower Power, Top Mount, Class A, basic slot antenna, 15 kW input, elliptically or circularly polarized	<i>\$185,208.73</i>	\$185,208.73	per DTVPros Quote JEHQ1696	\$73,545.20	N/A
<b>Sub-total</b>	<b>\$269,408.73</b>	<b>\$189,603.73</b>	<b>N/A</b>	<b>\$77,940.20</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$1,338,553.73</b>	<b>\$715,068.60</b>	<b>N/A</b>	<b>\$285,130.92</b>	<b>N/A</b>

**Components**

Actual Information		
Description	File Name	
New combiner, cost per channel (without antenna)	<b>Component Description:</b>	WSVF-210-New Primary Antenna - Combiner
	<b>Amount:</b>	\$4,175.25
	<b>Component Description:</b>	WSVF-210-New Primary Antenna - Combiner
	<b>Amount:</b>	\$219.75
UHF - Lower Power, Top Mount, Class A, basic slot antenna, 15 kW input, elliptically or circularly polarized	<b>Component Description:</b>	UHF-Low Power Broadband Top Mount (15KW)
	<b>Amount:</b>	\$73,545.20

**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
<b>Interim Transmission Line</b>	<b>\$7,872.00</b>	<b>\$0.00</b>		<b>\$0.00</b>	
Flexible Foam Transmission Line - dielectric, 1 5 /8"	\$7,872.00	\$0.00	No interim transmission line is needed.	N/A	N/A
<b>Primary Transmission Line</b>	<b>\$5,775.00</b>	<b>\$8,276.87</b>		<b>\$0.00</b>	
Flexible Air Transmission Line - dielectric, 1 5 /8"	\$5,775.00	\$8,276.87	Please see WSVF DTVPros quote JEHQ1712	N/A	N/A
<b>Primary Transmission Line</b>	<b>\$0.00</b>	<b>\$0.00</b>		<b>\$0.00</b>	
DO NOT USE. Null line for Green Bank.	<i>\$0.00</i>	\$0.00	DO NOT USE. Null line for Green Bank.	N/A	N/A
<b>Sub-total</b>	<b>\$13,647.00</b>	<b>\$8,276.87</b>	N/A	<b>\$0.00</b>	N/A
<b>Total for all systems</b>	<b>\$1,338,553.73</b>	<b>\$715,068.60</b>	N/A	<b>\$285,130.92</b>	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
<b>Primary Tower TOWER</b>	<b>\$618,160.00</b>	<b>\$262,960.00</b>		<b>\$33,739.12</b>	
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	\$421,000.00	\$80,000.00	Short tower with candelabra on top	\$1,820.00	N/A
Minor tower reinforcement /modifications	\$158,000.00	\$150,000.00	N/A	\$25,694.12	N/A
Structural engineering tower load study for well documented tower	\$12,600.00	\$6,400.00	N/A	\$6,225.00	N/A
Moving Equipment	<i>\$26,560.00</i>	\$26,560.00	See attached Shenandoah Tower quote B17-1358	\$0.00	N/A
<b>Sub-total</b>	<b>\$618,160.00</b>	<b>\$262,960.00</b>	N/A	<b>\$33,739.12</b>	N/A
<b>Total for all systems</b>	<b>\$1,338,553.73</b>	<b>\$715,068.60</b>	N/A	<b>\$285,130.92</b>	N/A

**Components**

Actual Information Description	File Name
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<p>Complex Tower (includes, for example, those with candelabras and/or stacked antennas)</p>	<p><b>Component Description:</b> VAP190117_Massanutten <b>Amount:</b> \$1,820.00</p>
<p>Minor tower reinforcement /modifications</p>	<p><b>Component Description:</b> ENGINEERING CLIMBING INSPECTION <b>Amount:</b> \$12,060.00</p> <p><b>Component Description:</b> Tower Services <b>Amount:</b> \$2,412.00</p> <p><b>Component Description:</b> ENGINEERING CLIMBING INSPECTION <b>Amount:</b> \$11,222.12</p>
<p>Structural engineering tower load study for well documented tower</p>	<p><b>Component Description:</b> VAP190200_Massanutten_PO7071 <b>Amount:</b> \$1,725.00</p> <p><b>Component Description:</b> VAP190202 Massanutten_PO7077. <b>Amount:</b> \$4,500.00</p>
<p>Moving Equipment</p>	<p>Information not provided.</p>

**Cost Information**

**Outside Professional Services**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Outside Professional Services</b>	<b>\$152,258.00</b>	<b>\$144,000.00</b>		<b>\$82,738.60</b>	
Additional Field Engineering Service, 5 Days	<i>\$5,000.00</i>	\$5,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,500.00	N/A	N/A	N/A
Attorney Fees - Negotiation of lease and other matters for shared locations	\$4,210.00	\$2,000.00	N/A	\$148.00	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	\$196.50	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	\$3,100.00	see Estimated Cost Justification WSVF-530-RF Eng CP v0	\$3,100.00	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$5,812.50	N/A
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A	\$148.00	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Project management of the transition	\$112,338.00	\$108,150.00	Please see Widality Strategic Support Quote	\$73,333.60	N/A

<b>Sub-total</b>	\$152,258.00	\$144,000.00	N/A	\$82,738.60	N/A
<b>Total for all systems</b>	\$1,338,553.73	\$715,068.60	N/A	\$285,130.92	N/A

## Components

<b>Actual Information Description</b>	<b>File Name</b>
Additional Field Engineering Service, 5 Days	Information not provided.
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.
Attorney Fees - Negotiation of lease and other matters for shared locations	<p><b>Component Description:</b> Professional Services Rendered Through September 30, 2019</p> <p><b>Amount:</b> \$148.00</p>
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	<p><b>Component Description:</b> Professional services: complete and file Repack Application for WSVF-CD</p> <p><b>Amount:</b> \$196.50</p>
Prepare request for Special Temporary Authorization	Information not provided.

<p>Prepare engineering section of FCC Form 2100 (main), License to Cover Application</p>	<p>Information not provided.</p>	
<p>Prepare engineering section of FCC Form 2100 (main), Construction Permit Application</p>	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>WSVF-530-RF Eng CP \$775.00</p>
	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Consulting Engineer \$1,300.00</p>
	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Perform engineering and develop exhibits for CP application \$1,025.00</p>
<p>Perform engineering study for new channel assignment and antenna development</p>	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Engineer consult \$250.00</p>
	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Consulting Engineer - J. Davis \$775.00</p>
	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Perform engineering study for new channel assignment \$250.00</p>
	<p><b>Component Description:</b></p> <p><b>Amount:</b></p>	<p>Engineering for statement of consent application /new channel study \$1,562.50</p>

**Component Description:** Perform engineering study for new channel assignment  
**Amount:** \$325.00

**Component Description:** Provide NRAO Quiet Zone interference office with specifications of substitute directional antenna  
**Amount:** \$550.00

**Component Description:** Regarding planned antenna for repack Ch-36  
**Amount:** \$975.00

**Component Description:** Review correspondence re: predicted interference to 11 GHz microwave system from Rural Broadband application, facilitate interference analysis, discuss with counsel, assist with prep of objections.  
**Amount:** \$687.50

	<p><b>Component Description:</b> Respond to query from NRAO Quiet Zone interference office for add'l detail of 11.4 kW 90 day facility. On receipt from NRAO, prepare amendment to pending 90 day FCC CP application.</p> <p><b>Amount:</b> \$437.50</p>
Address transition timing and coordination issues w/ other stations and wireless	<p><b>Component Description:</b> WSVF-510-Transition Timing and Coordination</p> <p><b>Amount:</b> \$148.00</p>
Prepare and or review reimbursement form	Information not provided.
Project management of the transition	<p><b>Component Description:</b> Project Management</p> <p><b>Amount:</b> \$2,405.00</p> <p><b>Component Description:</b> Project Management</p> <p><b>Amount:</b> \$1,995.75</p> <p><b>Component Description:</b> Project management</p> <p><b>Amount:</b> \$2,592.65</p> <p><b>Component Description:</b> Project Management</p> <p><b>Amount:</b> \$2,316.30</p>



**Component Description:** Project  
Management  
**Amount:** \$2,067.45

**Component Description:** Project  
Management  
**Amount:** \$2,176.30

**Component Description:** Project  
Management  
**Amount:** \$1,821.95

**Component Description:** Project  
Management  
**Amount:** \$1,938.10

**Component Description:** Project  
Management  
**Amount:** \$1,958.85

**Component Description:** Cost Reconciliation  
**Amount:** \$2,450.45

**Component Description:** Project  
Management  
**Amount:** \$1,978.20

**Component Description:** Project  
Management  
**Amount:** \$3,093.25

**Component Description:** Project  
Management  
**Amount:** \$2,262.90

**Component Description:** Project  
Management  
**Amount:** \$2,498.65

**Component Description:** Project  
Management  
**Amount:** \$2,904.40

**Component Description:** Project  
Management  
**Amount:** \$1,959.35

**Component Description:** Project  
Management  
**Amount:** \$2,233.15

**Component Description:** Project  
Management  
**Amount:** \$1,328.55

**Component Description:** Project  
Management  
**Amount:** \$2,048.35

**Component Description:** Project  
Management  
**Amount:** \$1,782.20

**Component Description:** Project  
Management  
**Amount:** \$2,406.05

**Component Description:** Project  
Management  
**Amount:** \$2,235.90

**Component Description:** Project Management  
**Amount:** \$1,698.10

**Component Description:** Project Management  
**Amount:** \$1,907.30

**Component Description:** Transition Related Project Management Costs  
**Amount:** \$1,500.00

**Component Description:** Project Management  
**Amount:** \$1,743.75

**Component Description:** Project Management  
**Amount:** \$1,863.20

**Component Description:** Project Management  
**Amount:** \$988.95

**Component Description:** Project Management  
**Amount:** \$28.20

**Component Description:** Project Management  
**Amount:** \$802.25

**Component Description:** Project Management  
**Amount:** \$733.30

**Component Description:** 2830.9  
**Amount:** \$2,830.90

**Component Description:** Project  
Management  
**Amount:** \$1,697.55

**Component Description:** Project  
management  
**Amount:** \$2,614.40

**Component Description:** Project  
Management  
**Amount:** \$2,017.75

**Component Description:** Project  
Management  
**Amount:** \$2,129.80

**Component Description:** Project  
Management  
**Amount:** \$2,324.40

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**Cost Information**

**Other Expenses**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Other Expenses</b>	<b>\$33,080.00</b>	<b>\$24,270.00</b>		<b>\$4,755.00</b>	
MVPD Notification of Channel Change	<i>\$2,000.00</i>	\$2,000.00	see Estimated Cost Justification WSVF-610-MVPD Notifications v0	\$2,000.00	N/A
Develop and air announcement of upcoming channel change	<i>\$3,000.00</i>	\$3,000.00	N/A	N/A	N/A
Equipment Storage	<i>\$5,000.00</i>	\$5,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$5,000.00</i>	\$5,000.00	N/A	N/A	N/A
Non-zoning permits	<i>\$6,000.00</i>	\$6,000.00	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

DTV Medical Facility Notification	\$11,550.00	\$2,755.00	N/A	\$2,755.00	N/A
<b>Sub-total</b>	\$33,080.00	\$24,270.00	N/A	\$4,755.00	N/A
<b>Total for all systems</b>	\$1,338,553.73	\$715,068.60	N/A	\$285,130.92	N/A

## Components

Actual Information	
Description	File Name
MVPD Notification of Channel Change	<p><b>Component Description:</b> Total Professional Services</p> <p><b>Amount:</b> \$2,000.00</p>
Develop and air announcement of upcoming channel change	Information not provided.
Equipment Storage	Information not provided.
Equipment Delivery and Handling Charges	Information not provided.
Non-zoning permits	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.
DTV Medical Facility Notification	<p><b>Component Description:</b> Mailing: Print and mail</p> <p><b>Amount:</b> \$2,755.00</p>

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

	<b>Predetermined Cost Estimate</b>	<b>Estimated Cost</b>	<b>Actual Cost</b>
<b>Total for all systems</b>	\$1,338,553.73	\$715,068.60	\$285,130.92

**Reimbursement Status**

<b>Question</b>	<b>Response</b>
The facility has ceased operating on its pre-auction channel.	No
Construction of final facilities or all necessary modifications are complete.	No
All receipts for reimbursement have been submitted no further costs are expected to be incurred. Note this will lock the Form 399 from further editing and begin close-out procedures with the Fund Administrator.	No

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



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

8. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.

I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.

**Robert  
Folliard , III**  
.  
*Assistant  
Secretary*

06/08/2020

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

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

8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.

9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested.

I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.

**Robert  
Folliard , III**  
.  
*Assistant  
Secretary*

06/08/2020

## Attachments