

Federal Communications Commission

(REFERENCE COPY - Not for submission) FCC Form 399: Reimbursement Request

Facility 74070-1	2-54243 Servi	ce: DRT Call	WSOC-TV	Channel:
ID:		Sign:		
12 (High VHF)	File 000	0107861		
	Number:			
FRN: 0001842491	Eligibility	Eligible Date	06/09)
	Status:	Subn	nitted: /2020)

Applicant Name, Type, and Contact Information

Information

ו					Applicant
	Applicant	Address	Phone	Email	Туре
	WSOC TELEVISION, LLC	Ted Hand	+1 (704)	ted.	Limited
	Doing Business As: WSOC	235 West	335-4732	hand@cmg.	Liability
	TELEVISION, LLC	23rd Street		com	Company
		CHARLOTTE,			
		NC 28206			
		United States			

Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer	Preparer Contact Na	me and Information				
Contact Information	Applicant	Address	Phone	Email		
	Ted Hand Director of Engineering WSOC-TV LLC	Ted Hand 235 West 23rd Street Charlotte, NC 28206 United States	+1 (704) 335- 4732	ted.hand@cmg. com		

Broadcaster	Question	Response
Information and Transition Plan	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	Install new antenna, mask filter, transmitter

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

Primary	Existing Transmitter Infor	mation			
Transmitter	Section	Question	Response		
	Existing Transmitter Description	Type of change	Purchase New		
		Use	Primary (Main)		
		Ownership	Owned		
		Is this transmitter currently shared with another station?	No		
		Is this transmitter currently in operating condition?	Yes		
	Existing Transmitter	Manufacturer			
	Manufacturer and Type	Model	Maxiua		
		Year	2010		
		Туре	Solid State		
	Solid State Cooling	Solid State Cooling	Air Cooled		
		Solid State Power Capacity	2 kW		

Existing Transmitter Information

Primary New Transmitter Costs				
Transmitter	Section	Question	Response	
	New Transmitter	Use	Primary (Main)	
		Change Type	Purchase New	
		Is this a request for upgraded equipment?	No	
		Manufacturer		
		Model	VAXTE- 2R37	
		Transmitter Type	Solid State	
		Solid State Cooling	Air Cooled	
		Solid State Power capacity	2 kW	
		Justification for New Transmitter	Moved from UHF to VHF	

Primary	Other Transmitter Costs
Transmitter	Section

Section	Question	Response
Other Transmitter C	Does the transmitter installation require a Transmitter Building Site Survey /Installation?	No
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No
	Rigid Conduit and Wiring	No
	Other Electrical Service	No
HVAC Service	Does the replacement transmitter require HVAC Service?	No
Transmitter Building Addition/Modificatio Leasehold Improver	addition, modification, other leashold	No

Primary	Other Transmitter Cost Not Listed		
Transmitter	Name	Description	
	Gates Air	Mask Filter	

Antennas Section		Question	Response
Antenna Rela	ated Expenses	Do you have antenna related expenses?	Yes

Primary Antenna	Existing Antenna Information			
	Section	Question	Response	
	Existing Antenna Description	Type of change	Purchase New	
		Antenna Use	Primary (Main)	
		Ownership	Owned	
		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	Mounting	Side Mount	
	Manufacturer and Typ	e Antenna position in stack	Not in Stack	
		Polarization	Horizontal	
		Туре	Slotted Coaxial	
		ERP: (Effective Radiated Power)	4.5 kW	
		Manufacturer		
		Model	ALP-HSW- 46	
		Year	2010	

Existing Antenna Information

Primary Antenna	New Antenna Costs			
	Section	Question	Response	
	New Antenna Description	Use	Primary (Main)	
		Change Type	Purchase New	
		Ownership	Owned	
		Is antenna shared?	No	
		Is antenna directional?	Yes	
		Will antenna be located on or in close proximity to an antenna farm?	No	
	New Antenna Manufacturer and Types	Mounting	Side Mount	
		Antenna position in stack	Not in Stack	
		Polarization	Horizontal	
		Туре	Cross Dipole	
		ERP: (Effective Radiated Power)	3.0 kW	
		Manufacturer		
		Model	4X1K523057	
		Year	2019	
		Justification for New Antenna	Moved from UHF to VHF	

Primary Other Antenna Costs

Antenna			
	Section	Question	Response
	Elbow Complex	Do you require the separate purchase of the Elbow Complex?	No
	Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	No

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

Primary
AntennaOther Antenna Cost Not ListedInformation not provided.

Transmission Seffien	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	No

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

Existing Tower

Existing Tower			
Section	Question	Response	
Existing Tower Description	Type of change	Move Equipment	
	Tower Use	Primary (Main)	
	Ownership	Leased	
	Is this tower consider Complex?	No	
	Is this tower currently shared with any other stations?	No	
	Is tower documented for structural analysis?	Yes	
	Is tower compliant with Rev G?	Unknown	
Existing Tower Structure Registration	Do you have a tower registration number?	No	
Coordinates (NAD83 (Latitude (NAD83)	35° 49' 59.7" N-	
of 1983))	Longitude (NAD83)	080° 42' 14.0" W-	
	Overall Structure Height	1504.90 feet	
	Support Structure Height	1499.98 feet	
	Ground Elevation Above Mean Sea Level (AMSL)	817.90 feet	
	Section Existing Tower Description Existing Tower Structure Registration Coordinates (NAD83 (North American Datum	SectionQuestionExisting Tower DescriptionType of changeTower UseOwnershipIs this tower consider Complex?Is this tower consider Complex?Is this tower currently shared with any other stations?Is tower documented for structural analysis?Is tower compliant with Rev G?Existing Tower Structure RegistrationCoordinates (NAD83 (North American Datum of 1983))Latitude (NAD83)Overall Structure Height Support Structure Height Ground Elevation Above Mean Sea Level	

Structure Type	GTOWER - Guyed Structure Used for Communication Purposes
Tower Owner	American Tower, LLC
Date Constructed	04/06/1988

Primary Tower Section

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

Primary	Other Tower Expenses Not Listed		
Tower	Name	Description	
	Tower Coummunications Services	Removed and installed antenna	

Outside Professional	Section	Question	Response
	Services Costs Outside Project Management Services	Do you require outside project management services?	No
	Outside RF consulting Engineering Services	Perform engineering study for displacement application	No
		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
		Prepare Form 601	Yes
	Attorney and Other Outside Consulting Services	Prepare and file Form FCC Construction Permit Application	No
		Prepare and file Form FCC License to Cover Application	No
		Prepare request for Special Temporary Authority	No
		Negotiation of Lease and other Matter for Shared Locations	No
		Prepare or Review FCC Form 399 for Reimbursement	No
		Form 399 assistance or other program management costs	No
	RF Field Engineering Services	Comprehensive coverage verification via field study	No
		RF exposure measurements	No
		Additional Field Engineering Service	No

Other Professional Services Expenses Not Listed Professional Services roostsided.

Other Expenses	Section	Question	Response
	AM Pattern Disturbance	Is an Impact Study needed?	No
		Is Remediation needed?	No
	Permit and Filing Costs	FCC Construction Permit Major Change	No
		FCC Construction Permit Minor Change	Yes
		FCC License to Cover Application	Yes
		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)?	No
		Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	No
		Does this relocation require Equipment Storage?	No
	Point to Point Microwave (STL/ICR)	Frequency Coordination for Unidirection System	No
		Frequency Coordination for Bi-Direction System	No
		New Point to Point Microwave System	No

Other Expenses Not Listed

Expenses Information not provided.

Transmitters

Cost Information

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 VAXTE-2R37	\$105,200.00	\$54,200.00		\$45,758.27	
High VHF - Air Cooled Solid State Transmitter 1.1 - 4.4 kW	\$101,000.00	\$50,000.00	based on actual invoice	\$41,585.22	Based on actual invoices
Gates Air	\$4,200.00	\$4,200.00	N/A	\$4,173.05	N/A
Sub-total	\$105,200.00	\$54,200.00	N/A	\$45,758.27	N/A
Total for all systems	\$290,155.00	\$85,854.00	N/A	\$68,518.63	N/A

Components

Actual Information Description	File Name	
High VHF - Air Cooled Solid State Transmitter 1.1 - 4.4 kW	Component Description: Amount:	Transmitter \$40,625.69
	Component Description: Amount:	Mask Filter part \$959.53
Gates Air		
	Component Description:	Freight
	Amount:	\$4,173.05

Antennas

Cost Information

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 4X1K523057	\$6,850.00	\$11,418.00		\$7,760.36	
Sweep test of transmission line and antenna	\$5,730.00	\$3,600.00	N/A	N/A	N/A
High-VHF, Low Power, Yagi/Cross- Dipole/Log Periodic Transmit Antenna	\$1,120.00	\$7,818.00	Based on actual invoices	\$7,760.36	Based on Actual invoices
Sub-total	\$6,850.00	\$11,418.00	N/A	\$7,760.36	N/A
Total for all systems	\$290,155.00	\$85,854.00	N/A	\$68,518.63	N/A

Components

Actual Information Description	File Name	
Sweep test of transmission line and antenna	Information not provided.	
High-VHF, Low Power, Yagi /Cross-Dipole/Log Periodic Transmit Antenna	Component Description: Amount:	Antenna we only have credit card receipts for \$7760.36 so this is all we are requesting NOT \$7818.00 \$7,760.36

Cost Transmission Line

Information Information not provided.

Tower Equipment and Rigging Costs

Cost Information

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 GTOWER	\$172,750.00	\$15,001.00		\$15,000.00	
Tower Rigging Tall Tower (greater than 500')	\$157,750.00	\$1.00	N/A	N/A	N/A
Tower Coummunications Services	\$15,000.00	\$15,000.00	N/A	\$15,000.00	N/A
Sub-total	\$172,750.00	\$15,001.00	N/A	\$15,000.00	N/A
Total for all systems	\$290,155.00	\$85,854.00	N/A	\$68,518.63	N/A

Components

Actual Information Description	File Name	
Tower Rigging Tall Tower (greater than 500')	Information not provided.	
Tower Coummunications Services	Component Description: Amount:	Tower work \$15,000.00

Outside Professional Services

Cost Information

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Outside Professional Services	\$3,910.00	\$3,800.00		\$0.00	
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$2,102.50	\$2,100.00	N/A	N/A	N/A
Prepare Form 601	\$755.00	\$700.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,052.50	\$1,000.00	N/A	N/A	N/A
Sub-total	\$3,910.00	\$3,800.00	N/A	\$0.00	N/A
Total for all systems	\$290,155.00	\$85,854.00	N/A	\$68,518.63	N/A

Components

Information not provided.

Other Expenses

Cost Information

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Other Expenses	\$1,445.00	\$1,435.00		\$0.00	
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$335.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,100.00	N/A	N/A	N/A
Sub-total	\$1,445.00	\$1,435.00	N/A	\$0.00	N/A
Total for all systems	\$290,155.00	\$85,854.00	N/A	\$68,518.63	N/A

Components

Information not provided.

Grand Total					
	Predetermined Cost Estimate	Estimated Cost	Actual Cost		
Total for all systems	\$290,155.00	\$85,854.00	\$68,518.63		
		Predetermined Cost Estimate	Predetermined Cost Estimate Estimated Cost		

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

Certification	Section	Question	Response
	Submission of Estimated Expenses Statements	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.	
		 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).
- 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.	Ted Hand Director of Engineering /Operations 06/09/2020

Attachments