Approved by OMB (Office of Management and Budget) 3060-1178



Federal Communications Commission

unications ssion	(REFERENCE COPY - Not for submission) FCC Form 399: Reimbursement Request				
	Facility66781-18-54680Service: DRTCallKIRO-TVChannel:				
	ID: Sign:				
	18 (UHF) File 0000086807				
	Number:				
	FRN: 0014361620 Eligibility Eligible Date 07/23				
	Status: Submitted: /2020				

Applicant Name, Type, and Contact Information

Information	Applicant	Address	Phone	Email	Applicant Type
	KIRO-TV, INC. Doing Business As: KIRO-TV, INC.	Chief Engineer 2807 THIRD AVENUE SEATTLE, WA 98121 United States	+1 (206) 728-7777	knealey@kiro7. com	Corporation

Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer	Preparer Contact Name and Information				
Contact Information	Applicant	Address	Phone	Email	
information	Keith Nealey Engineering Manager KIRO-TV, Inc.	Chief Engineer 2807 THIRD AVENUE SEATTLE, WA 98121 United States	+1 (206) 728- 7777	knealey@kiro7. 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	We powered down the old transmitter, took down the old antenna and removed the old transmitter. We then installed the new transmitter and antenna in place of the old ones using existing wave guide. This occurred in a three hour period in Nov. of 2018.

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

Primary	Existing Transmitter Information				
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 and Type	Manufacturer			
		Model	TTHDU-250		
		Year	2009		
		Туре	Solid State		
		Solid State Cooling	Air Cooled		
		Solid State Power Capacity	180 W		

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	UAXTE-3P- C-600W		
		Transmitter Type	Solid State		
		Solid State Cooling	Air Cooled		
		Solid State Power capacity	600 kW		
		Justification for New Transmitter	Location within the predicted noiselimited contour of and predicted interference greater than 0.5 percent to Post- Incentive- Auction Spectrum Repack facilities of Full-Service station KWDK on Channel 34, which itself is being repacked from Channel 42.		

Primary	Other Transmitter Costs			
Transmitter	Section	Question	Response	
	Other Transmitter Costs	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/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leashold improvement?	No	

Other Transmitter Cost Not Listed Primary

Transmitter Information not provided.

Other Transmitter Costs

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

Primary	Existing Antenna Information			
Antenna	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?	Yes	
	Existing Antenna	Mounting	Side Mount	
	Manufacturer and Type	Antenna position in stack	Bottom	
		Polarization	Horizontal	
		Туре	Broadband Panel	
		Number of Stations Supported	1	
		Number of Panels	4	
		Design power capacity in use	33.0 %	
		Lower Limit	692.00 MHz	
		Upper Limit	698.00 MHz	
		ERP: (Effective Radiated Power)	0.95 kW	
		Manufacturer		
		Model	ALP4L1- HSP-51	
		Year	2009	

Primary	New Antenna Costs		
Antenna	Section	Question	Response
	New Antenna Description	Use	Primary (Main)
		Change Type	Purchase New
		Ownership	Owned
		Is antenna shared?	No
		Is antenna directional?	No
		Will antenna be located on or in close proximity to an antenna farm?	Yes
	New Antenna Manufacturer and Types	Mounting	Side Mount
		Antenna position in stack	Bottom
		Polarization	Horizontal
		Туре	Slotted Coaxial
		ERP: (Effective Radiated Power)	0.95 kW
		Manufacturer	
		Model	AL4P-18M
		Year	2018
		Justification for New Antenna	Antenna cannot be retuned to Channel 18 from 51

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?	No

Primary Other Antenna Cost Not Listed

Antenna Information 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

Primary	Existing Tower					
Tower	Section	Question	Response			
	Existing Tower Description	Type of change	Modify Existing			
	-	Tower Use	Primary (Main)			
		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	No			
		Is tower documented for structural analysis?	Unknown			
		Is tower compliant with Rev G?	Unknown			
	Existing Tower Structure	Do you have a tower registration number?	Yes			
	Registration	ASR Number	1056094			
	Coordinates (NAD83 (North American Datum of	Latitude (NAD83)	47° 30' 16.3" N-			
	1983))	Longitude (NAD83)	121° 58' 10.0" W-			
		Overall Structure Height	310.04 feet			

Support Structure Height	270.01 feet
Ground Elevation Above Mean Sea Level (AMSL)	2838.88 feet
Structure Type	LTOWER - Lattice Tower
Tower Owner	American Towers LLC
Date Constructed	12/01/1998

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
57843	KNUC	FM
56852	KWPX-TV	DTV
1091	KJAQ	FM
4630	KQMV	FM
20356	KSWD	FM
20357	KZOK-FM	FM
35419	KWDK	DTV

Tower Modification Costs Primary

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Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	No study needed
Tower Reinforcements	Please select whether tower reinforcements are needed:	No reinforcements needed

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

Other Tower Expenses Not Listed

Primary Tower

Name	Description
Tower Climbers	Moved translator receive antenna to lower position on tower
Tower Climbers	Rigged tower, removed old antenna, attached new antenna

Outside	Section	Question	Response
Professional	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	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
		Prepare Form 601	No
	Attorney and Other Outside Consulting Services	Prepare and file Form FCC Construction Permit Application	Yes
		For Auxiliary Facility	No
		For Main Facility	Yes
		Prepare and file Form FCC License to Cover Application	Yes
		For Auxiliary Facility	No
		For Main Facility	Yes
		Prepare request for Special Temporary Authority	Yes
		Quantity	2
		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	Yes
	RF exposure measurements	Yes
	Additional Field Engineering Service	No

Outside Other Professional Services Expenses Not Listed

Professional Services rCostsided.

Other	Section	Question	Response
Expenses	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	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)?	No
		Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes
		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 UAXTE-3P-C- 600W	\$28,000.00	\$28,000.00		\$26,837.19	
UHF - Air Cooled Solid State Transmitter 600 kW	\$28,000.00	\$28,000.00	N/A	\$26,837.19	N/A
Sub-total	\$28,000.00	\$28,000.00	N/A	\$26,837.19	N/A
Total for all systems	\$130,827.50	\$68,820.97	N/A	\$64,775.71	N/A

Actual Information Description	File Name	
UHF - Air Cooled Solid State Transmitter 600 kW	Component Description:	Full amount of Transmitter plus tax. See quote "Cox Media- ISSAQUAH KIRO Q-76153 Quote. pdf" for power and cooling details. \$26,837.19

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 AL4P- 18M	\$14,000.00	\$14,000.00		\$13,242.50	
UHF-Low Power, Side Mount, Slotted Coaxial, 0.95 kW input, Horizontal	\$14,000.00	\$14,000.00	N/A	\$13,242.50	N/A
Sub-total	\$14,000.00	\$14,000.00	N/A	\$13,242.50	N/A
Total for all systems	\$130,827.50	\$68,820.97	N/A	\$64,775.71	N/A

Actual Information Description	File Name	
UHF-Low Power, Side Mount, Slotted Coaxial, 0.95kW input, Horizontal	Component Description:	Combination of invoices KIRO- 52058 & KIRO-001, with tax and freight included. See cover letter "ISSAQUAH TRANSLATOR COVER LETTER FOR INVOICE COMBINATION. pdf" for details \$13,242.50

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 LTOWER	\$9,200.00	\$9,200.00		\$8,808.00	
Tower Climbers	\$1,200.00	\$1,200.00	N/A	\$1,101.00	N/A
Complex Tower (includes, e.g., towers with candelabras and/or stacked antennas)	\$8,000.00	\$8,000.00	N/A	\$7,707.00	N/A
Sub-total	\$9,200.00	\$9,200.00	N/A	\$8,808.00	N/A
Total for all systems	\$130,827.50	\$68,820.97	N/A	\$64,775.71	N/A

Actual Information Description	File Name	
Tower Climbers		
	Component Description:	Lower receive
		antenna so as not
		to get RF
		interference from
		transmitter
	Amount:	\$1,101.00

g., towers with candelabras and/or stacked antennas)	Component Description:	Rig tower, remove existing antenna and hang new antenna in its
		place. Waveguide rerouting.
	Amount:	\$7,707.00

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	\$78,727.50	\$16,720.97		\$14,996.21	
Comprehensive coverage verification via field study, if needed	\$52,600.00	\$5,000.00	N/A	\$4,312.15	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$1,577.50	\$1,632.97	FCC filing fees are included in the legal costs	\$1,632.97	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$3,025.00	\$1,200.00	N/A	\$964.85	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$4,470.00	\$5,188.00	Staggered RF power increases required multiple changes to the STA request during a period of 3 months.	\$5,188.00	N/A

Prepare \$2,102.50 \$1,200.00 N/A \$1,017.86 N/A engineering section of FCC Form 2100 (main), Construction Permit
Application
Prepare\$1,052.50\$500.00N/A\$300.00N/Aengineeringsection of FCCForm 2100(main), Licenseto CoverApplication
RF Exposure \$12,100.00 \$500.00 N/A \$150.00 N/A Measurements
Sub-total \$78,727.50 \$16,720.97 N/A \$14,996.21 N/A
Total for all \$130,827.50 \$68,820.97 N/A \$64,775.71 N/A systems \$100,000 \$

Actual Information Description	File Name	
Comprehensive coverage verification via field study, if needed	Component Description:	RF study portion of Issaquah translator - See Merrill Weiss 399 costs worksheet - Issaquah.pdf
	Amount:	\$4,312.15

Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Component Description: Amount:	Legal LTC application portion of Issaquah Translator - see Cooley 399 costs worksheet - Issaquah.pdf \$1,632.97
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Component Description: Amount:	Legal CP application portion of Issaquah Translator - see Cooley 399 costs worksheet - Issaquah.pdf \$964.85
Attorney Fees - Prepare and File request for Special Temporary Authorization	Component Description:	Legal STA application portion of Issaquah Translator - see Cooley 399 costs worksheet - Issaquah.pdf \$5,188.00
Perform engineering study for displacement application	Component Description: Amount:	RF displacement study portion of Issaquah translator - See Merrill Weiss 399 costs worksheet - Issaquah.pdf \$1,430.38

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Component Description:	RF CP application portion of Issaquah translator - See Merrill Weiss 399 costs worksheet - Issaquah.pdf \$1,017.86
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Component Description: Amount:	RF LTC application portion of Issaquah translator - See Merrill Weiss 399 costs worksheet - Issaquah.pdf \$300.00
RF Exposure Measurements	Component Description: Amount:	RF measurement portion of Issaquah translator - See Merrill Weiss 399 costs worksheet - Issaquah.pdf \$150.00

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	\$900.00	\$900.00		\$891.81	
Equipment Delivery and Handling Charges	\$900.00	\$900.00	N/A	\$891.81	N/A
Sub-total	\$900.00	\$900.00	N/A	\$891.81	N/A
Total for all systems	\$130,827.50	\$68,820.97	N/A	\$64,775.71	N/A

Actual Information Description	File Name	
Equipment Delivery and Handling Charges	Component Description:	Freight for Issaquah Translator
	Amount:	transmitter \$891.81

Cost	Grand Total			
Information		Predetermined Cost Estimate	Estimated Cost	Actual Cost
	Total for all systems	\$130,827.50	\$68,820.97	\$64,775.71

Reimbursem	entestiatus	Response
	The facility has ceased operating on its pre- auction channel.	Yes
	Construction of final facilities or all necessary modifications are complete.	Yes
	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. 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.	Keith Nealey Director of Engineering

Certification	Section	Question	Response
	Submission of Final Allocation or Accounting Information 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 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 acknowledges that all certifications and attached documentation are considered material representations. The above-named entity acknowledges the submission of the information herein 	
		creates no obligation on the part of the government to pay any amount.	

an aut nameo	are, under penalty of perjury, that I am horized representative of the above- d applicant for the Authorization(s) red above.	Keith Nealey Director of Engineering
	with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.	
6.	The above-named entity certifies that it is in full compliance	
5.	The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.	
4.	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.	
3.	The above-named entity certifies that all costs identified as "actual costs" herein accurately represent the costs actually paid by the above- named entity, including any discounts, refunds, or rebates.	

Attachments