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

Federal Communications Commission

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility ID: **71422** | Service: **DCA** | Call Sign: **WBME-CD** | Channel: **24 (UHF)**

File Number: **0000028290**

FRN: **0009562380** | Date Submitted: **12/15/2020**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
CHANNEL 41 AND 63 LIMITED PARTNERSHIP Doing Business As: CHANNEL 41 AND 63 LIMITED PARTNERSHIP	Norman Shapiro 26 NORTH HALSTED ST. CHICAGO, IL 60661 United States	+1 (312) 705-2600	NShaprio@wciu.com	Limited Partnership

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
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.	Yes
Briefly describe transition plan	WBME plans to operate on its current licensed facility until the time of transition. A new antenna and transmitter will be installed due to the channel change.

Transmitters

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

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 and Type	Manufacturer	
	Model	TDU2 5K80 ULA SD
	Year	2012
	Type	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?	Yes
	Manufacturer	
	Model	THU9evo-4
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	6.5 kW
	Justification for New Transmitter	The current mask filter is channel-specific and must be replaced. The current transmitter is no longer supported by the manufacturer and as a result, is unable to be retuned.

Primary Transmitter

Other Transmitter Costs

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No
	Power	N/A

	Rigid Conduit and Wiring	No
	Size	N/A
	Length	N/A
	Other Electrical Service	Yes
	Description	Retrofit of existing electrical service for WBME Primary transmitter service
HVAC Service	Does the replacement transmitter require HVAC Service?	No
	Type	N/A
	Size	N/A
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leashold improvement?	No
	Size	N/A
Channel 14 Costs	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

Primary Transmitter

Other Transmitter Cost Not Listed

Name	Description
Installation	This is the cost for the installation of the new Primary transmitter

Antennas

Section	Question	Response
Antenna Related Expenses	Do you have antenna related expenses?	No

Transmission Line

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

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?	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?	Yes
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1047092

Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	43° 06' 42.0" N-
	Longitude (NAD83)	087° 55' 50.0" W-
	Overall Structure Height	1226.03 feet
	Support Structure Height	1171.25 feet
	Ground Elevation Above Mean Sea Level (AMSL)	623.02 feet
	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	WEIGEL BROADCASTING CO.
	Date Constructed	11/01/1996

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
63595	WLUM-FM	FM
71427	WDJT-TV	DTV

Other Types of Users

Users
LM Land Mobile
FX FM Services
LD TV Services

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 Services Costs

Section	Question	Response
Outside Project Management Services	Do you require outside project management services?	No
	Number of Hours	N/A
	Explanation	N/A
Outside RF consulting Engineering Services	Perform engineering study for new channel assignment and antenna development	Yes
	Prepare engineering section of Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	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	Yes
RF Field Engineering Services	Comprehensive coverage verification via field study	No
	RF exposure measurements	Yes
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Outside Professional Services Costs

Other Professional Services Expenses Not Listed

Information not provided.

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	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)?	Yes
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes
	Does this relocation require Equipment Storage?	No
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	No
	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
Primary Transmitter THU9evo-4	**$304,656.23**	**$247,239.17**		**$247,239.17**	
Installation	***$20,000.00***	$20,000.00	The transmitter did not include the cost of on-site installation. This is the cost for installing the transmitter.	$20,000.00	N/A
Other Electrical Service: Retrofit of existing electrical service for WBME Primary transmitter service	***$11,156.23***	$11,156.23	N/A	$11,156.23	N/A
UHF - Liquid Cooled Solid State Transmitter 4.9 . 6.5 kW	$273,500.00	$216,082.94	N/A	$216,082.94	N/A
Sub-total	$304,656.23	$247,239.17	N/A	$247,239.17	N/A
Total for all systems	$753,171.23	$311,574.17	N/A	$272,999.17	N/A

Components

Actual Information Description	File Name	
Installation	**Component Description:** **Amount:**	WBME Primary transmitter installation final payment $20,000.00
Other Electrical Service: Retrofit of existing electrical service for WBME Primary transmitter service	**Component Description:** **Amount:**	WBME Primary transmitter electrical final payment $11,156.23
UHF - Liquid Cooled Solid State Transmitter 4.9 . 6.5 kW	**Component Description:** **Amount:**	WBME Primary Transmitter Final Payment $204,725.66
	Component Description: **Amount:**	WBME Primary transmitter shipping invoice $5,280.00
	Component Description: **Amount:**	WBME Primary transmitter additional RF components invoice $6,077.28

Cost Information

Antennas

Information not provided.

Cost Information

Transmission Line

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
Primary Tower TOWER	**$381,100.00**	**$23,760.00**		**$23,760.00**	
Tall Tower (greater than 500')	$210,500.00	$23,760.00	N/A	$23,760.00	N/A
Minor tower reinforcement /modifications	$158,000.00	$0.00	N/A	N/A	N/A
Structural engineering tower load study for well documented tower	$12,600.00	$0.00	N/A	$0.00	N/A
Sub-total	$381,100.00	$23,760.00	N/A	$23,760.00	N/A
Total for all systems	$753,171.23	$311,574.17	N/A	$272,999.17	N/A

Components

Actual Information Description	File Name

Tall Tower (greater than 500')	**Component Description:** **Amount:**	WBME Primary tower tall tower installation final payment $23,760.00
Minor tower reinforcement /modifications	Information not provided.	
Structural engineering tower load study for well documented tower	Information not provided.	

Cost Information

Outside Professional Services

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Outside Professional Services	**$46,030.00**	**$28,750.00**		**$0.00**	
RF Exposure Measurements	$21,050.00	$5,000.00	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	N/A	N/A

Perform engineering study for new channel assignment and antenna development	$7,360.00	$7,000.00	N/A	N/A	N/A
Address transition timing and coordination issues w/ other stations and wireless	$2,630.00	$2,500.00	N/A	N/A	N/A
Prepare and or review reimbursement form	$2,630.00	$2,500.00	N/A	N/A	N/A
Sub-total	$46,030.00	$28,750.00	N/A	$0.00	N/A
Total for all systems	$753,171.23	$311,574.17	N/A	$272,999.17	N/A

Components

Information not provided.

Cost Information

Other Expenses

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Other Expenses	**$21,385.00**	**$11,825.00**		**$2,000.00**	
MVPD Notification of Channel Change	***$2,500.00***	$2,500.00	Notification to all MVPD regarding channel changes.	$0.00	N/A
FCC Filing Fees - Form 2100 license to cover application	$335.00	$325.00	N/A	N/A	N/A
DTV Medical Facility Notification	$11,550.00	$2,000.00	N/A	$2,000.00	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	***$3,500.00***	$3,500.00	Disposal of the WBME transmitter, RF systems, and related electrical.	N/A	N/A

Equipment Delivery and Handling Charges	***$3,500.00***	$3,500.00	Cost estimate to relocate equipment from standard shipping trucks to smaller trucks that are able to access and cross the transmitter site bridge.	N/A	N/A
Sub-total	$21,385.00	$11,825.00	N/A	$2,000.00	N/A
Total for all systems	$753,171.23	$311,574.17	N/A	$272,999.17	N/A

Components

Actual Information Description	**File Name**
MVPD Notification of Channel Change	Information not provided.
FCC Filing Fees - Form 2100 license to cover application	Information not provided.
DTV Medical Facility Notification	**Component Description:** WBME DTV Medical facility notification invoice **Amount:** $2,000.00
Disposal Costs (for equipment and other waste, net of any salvage value)	Information not provided.
Equipment Delivery and Handling Charges	Information not provided.

Cost Information

Grand Total

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	$753,171.23	$311,574.17	$272,999.17

Reimbursement Status

Question	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.	
	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 above-named applicant for the Authorization(s) specified above.	**Kyle Walker** *VP, Technology* 12/15/2020

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.	
	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 acknowledges that all certifications and attached documentation are considered material representations. 2. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.	

	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. 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. 5. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission. 6. 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.	**Kyle Walker** *VP, Technology* 12/15/2020

Attachments