



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **66781** | Service: **DTV** | Call **KIRO-TV** | Channel: **23 (UHF)** |  
ID:  
Sign:  
File **0000028117**  
Number:  
FRN: **0014361620** | Date **02/15**  
Submitted: **/2021**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address
<b>KIRO-TV, Inc.</b> Doing Business As: KIRO-TV, Inc.	Chief Engineer 2807 Third Avenue Seattle, WA 98121 United States

## Reimbursement Contact Information

### Reimbursement Contact Name and Information

Applicant	Address
[Confidential]	

## Preparer Contact Information

### Preparer Contact Name and Information

Applicant	Address
<b>Keith Nealey</b> <i>Director Of Engineering KIRO TV INC</i> <i>KIRO-TV, Inc.</i>	Keith Nealey 2807 Third Avenue Seattle, WA 98121 United States

## Broadcaster Information and Transition Plan

Question
Will the station be sharing equipment with another broadcast television station or station (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 station(s) and click 'prefill' to download those stations' licensing information.

---

Briefly describe transition plan

---

## Transmitters

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

---

Auxiliary Transmitter

Add Transmitter Information

Section	Question
Existing Transmitter Description	Type of change
	Use
	Description of Use
	Ownership
	Owner
	Site
	Is this transmitter currently shared with another station?
	Is this transmitter currently in operating condition?
Existing Transmitter Manufacturer and Type	Manufacturer
	Model
	Year
	Type
	Solid State Cooling
	Solid State Power Capacity

Auxiliary Transmitter

New Transmitter Costs

Section	Question
New Transmitter	Use
	Change Type
	Is this a request for upgraded equipment?
	Manufacturer
	Model
	Transmitter Type
	Solid State Cooling
	Solid State Power capacity
	Justification for New Transmitter

Auxiliary Transmitter

Other Transmitter Costs

Section	Question
Electrical Service	Service Entrance (3 phases 800A 208V)
	Switchgear (industrial 800 amp)
	Transformer (480V)
	Power
	Rigid Conduit and Wiring
	Size
	Length
	Other Electrical Service
	Description
HVAC Service	Does the replacement transmitter require HVAC S

	Type
	Size
	Other Size
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition,
	Size
<b>Channel 14 Costs</b>	Is an RF Consulting Engineer needed?
	Is a channel 14 Mask Filer needed?
	Is additional field engineering time needed?
	Number of Days

## Auxiliary Transmitter

## Other Transmitter Cost Not Listed

Information not provided.

Primary Transmitter

Existing Transmitter Information

Section	Question
Existing Transmitter Description	Type of change
	Use
	Description of Use
	Ownership
	Owner
	Site
	Is this transmitter currently shared with another station?
	Is this transmitter currently in operating condition?
Existing Transmitter Manufacturer and Type	Manufacturer
	Model
	Year
	Type
	IOT Power Type
	Power Capacity

Primary Transmitter

New Transmitter Costs

Section	Question
New Transmitter	Use
	Change Type
	Is this a request for upgraded equipment?
	Manufacturer
	Model
	Transmitter Type
	Solid State Cooling
	Solid State Power capacity
	Justification for New Transmitter

Primary Transmitter

Other Transmitter Costs

Section	Question
Electrical Service	Service Entrance (3 phases 800A 208V)
	Switchgear (industrial 800 amp)
	Transformer (480V)
	Power
	Rigid Conduit and Wiring
	Size
	Length
	Other Electrical Service
	Description
HVAC Service	Does the replacement transmitter require HVAC S

	Type
	Size
	Other Size
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition,
	Size
<b>Channel 14 Costs</b>	Is an RF Consulting Engineer needed?
	Is a channel 14 Mask Filer needed?
	Is additional field engineering time needed?
	Number of Days

## Primary Transmitter

## Other Transmitter Cost Not Listed

Information not provided.



**Antennas**

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

## Auxiliary Antenna

### Add Antenna Information

Section	Question
Existing Antenna Description	Type of change
	Antenna Use
	Description of Use
	Ownership
	Owner
	Site
	Is this antenna currently shared with any other sta
	Is this antenna directional?
	Is antenna in operating condition?
	Is antenna located on or in close proximity to an a
Existing Antenna Manufacturer and Type	Class
	Mounting
	Antenna position in stack
	Polarization
	Type
	Number of Stations Supported
	Number of Panels
	Design power capacity in use
	Lower Limit
	Upper Limit
	Other Antenna Type
	ERP: (Effective Radiated Power) .....
	Manufacturer
	Model
	Year



Auxiliary Antenna

New Antenna Costs

Section	Question
New Antenna Description	Use
	Description of Use
	Change Type
	Is this a request for upgraded equipment?
	Ownership
	Owner
	Is antenna shared?
	Is antenna directional?
	Will antenna be located on or in close proximity to
New Antenna Manufacturer and Types	Class
	Mounting
	Antenna position in stack
	Polarization
	Type
	Number of Stations Supported
	Number of Panels/Bays
	Lower Limit
	Upper Limit
	Design power capacity in use
	Other Antenna Type
	ERP: (Effective Radiated Power) .....
	Manufacturer
	Model
	Year

Justification for New Antenna

## Auxiliary Antenna

### Other Antenna Costs

Section	Question
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?
	Type
	Number of channels supported
	Frequencies of channels supported
	Frequency
	Do you need a combiner output splitter/switcher for
Elbow Complex	Do you require the separate purchase of the Elbow
	Broadband or Single Channel?
	Feed Line Size
Side Mount Brackets	Do you require the separate purchase of side mount
Pattern Scatter Analysis	Do you require separate purchase of pattern scatter medium power antenna?
Sweep Test	Do you require the sweep testing of transmission l

## Auxiliary Antenna

### Other Antenna Cost Not Listed

Name
Antenna Support Brackets
Dielectric Custom Flanges
Freight Charges

## Primary Antenna

### Existing Antenna Information

Section	Question
Existing Antenna Description	Type of change
	Antenna Use
	Description of Use
	Ownership
	Owner
	Site
	Is the existing antenna shared with another station?
	Is the existing antenna directional?
	Is antenna in operating condition?
	Is antenna located on or in close proximity to an airport?
Existing Antenna Manufacturer and Type	Class
	Mounting
	Antenna position in stack
	Polarization
	Type
	Number of Stations Supported
	Number of Panels
	Design power capacity in use
	Lower Limit
	Upper Limit
	Other Antenna Type
	ERP: (Effective Radiated Power) .....
	Manufacturer
	Model
	Year



Primary Antenna

New Antenna Costs

Section	Question
New Antenna Description	Use
	Description of Use
	Change Type
	Is this a request for upgraded equipment?
	Ownership
	Owner
	Is antenna shared?
	Is antenna directional?
	Will antenna be located on or in close proximity to
New Antenna Manufacturer and Types	Class
	Mounting
	Antenna position in stack
	Polarization
	Type
	Number of Stations Supported
	Number of Panels/Bays
	Lower Limit
	Upper Limit
	Design power capacity in use
	Other Antenna Type
	ERP: (Effective Radiated Power) .....
	Manufacturer
	Model
	Year



Justification for New Antenna

## Primary Antenna

### Other Antenna Costs

Section	Question
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?
	Type
	Number of channels supported
	Frequencies of channels supported
	Frequency
	Do you need a combiner output splitter/switcher for
Elbow Complex	Do you require the separate purchase of the Elbow
	Broadband or Single Channel?
	Feed Line Size
Side Mount Brackets	Do you require the separate purchase of side mount
Pattern Scatter Analysis	Do you require separate purchase of pattern scatter medium power antenna?
Sweep Test	Do you require the sweep testing of transmission line

## Primary Antenna

### Other Antenna Cost Not Listed

Name
Main antenna Support Brackets
Dielectric Custom Flanges
Main Antenna Freight

Transmission Line

Section	Question
Transmission Line Related Expenses	Do you have transmission line related expenses?

Primary Transmission Line

Existing Transmission Line

Section	Question
Existing Transmission Line Description	Type of change
	Use
	Description of Use
	Ownership
	Owner
	Site
	Is the existing transmission line shared with another?
	Is Transmission Line in operating condition?
Existing Transmission Line Manufacturer and Type	Manufacturer
	Type
	Diameter
	Other Diameter
	Segment Length
	Other Segment Length
	Number of parallel runs
	Length

Primary Transmission Line

Other Transmission Line Expenses Not Listed

Name
Required Category

Auxiliary Transmission Line

Add Transmission Line

Section	Question
Existing Transmission Line Description	Type of change
	Use
	Description of Use
	Ownership
	Owner
	Site
	Is this transmission currently shared with any other?
	Is Transmission Line in operating condition?
Existing Transmission Line Manufacturer and Type	Manufacturer
	Type
	Diameter
	Other Diameter
	Segment Length
	Other Segment Length
	Number of parallel runs
	Length

Auxiliary Transmission Line

Other Transmission Line Expenses Not Listed

Name
AUX Transmission Extension

Tower Equipment And Rigging Costs

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

Primary Tower

Existing Tower

Section	Question
Existing Tower Description	Type of change
	Tower Use
	Description of Use
	Ownership
	Is this tower consider Complex?
	Is this tower currently shared with any other station?
	One or more FM, AM or TV radio broadcaster(s)
	Others Types of Users
	Is tower documented for structural analysis?
	Is tower compliant with Rev G?
Existing Tower Structure Registration	Do you have a tower registration number?
	ASR Number
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)
	Longitude (NAD83)
	Overall Structure Height
	Support Structure Height
	Ground Elevation Above Mean Sea Level (AMSL)
	Structure Type
	Tower Owner
	Date Constructed

**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
182983	KYMU-LD	LPD
128217	K35PB-D	LPD

**Primary Tower**

**Tower Modification Costs**

Section	Question
Engineering Study	Please what type of engineering study is required,
Tower Reinforcements	Please select whether tower reinforcements are n

**Primary Tower**

**Tower Rigging Costs**

Section	Question
Tower Rigging Costs	Complex Tower
Helicopter Services Required	Are helicopter services required?

**Primary Tower**

**Other Tower Expenses Not Listed**

Information not provided.

## Outside Professional Services Costs

Section	Question
<b>Outside Project Management Services</b>	Do you require outside project management services?
	Number of Hours
	Explanation
<b>Outside RF consulting Engineering Services</b>	Perform engineering study for new channel assignment
	Prepare engineering section of Form FCC Construction Permit Application
	For Auxiliary Facility
	For Main Facility
	Prepare engineering section of Form FCC License to Cover Application
	For Auxiliary Facility
	For Main Facility
	Prepare request for Special Temporary Authority
	Quantity
	Do you have Distributed Transmission System engineering services?
	Critical Facility
	Terrain-Shielded Facility
<b>Attorney and Other Outside Consulting Services</b>	Prepare and file Form FCC Construction Permit Application
	For Auxiliary Facility
	For Main Facility
	Prepare and file Form FCC License to Cover Application
	For Auxiliary Facility
	For Main Facility
	Prepare request for Special Temporary Authority
	Quantity
	NEPA Section 106 environmental review

	Environmental Assessment
	ASR Modification
	FAA Consultation (including preparation of FAA Form 336)
	Negotiation of Lease and other Matter for Shared Use
	Prepare or Review FCC Form 399 for Reimbursement
	Address transition timing and coordination issues
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field studies
	RF exposure measurements
	Additional Field Engineering Service
	Number of Days
	Justification

**Outside Professional Services Costs**

**Other Professional Services Expenses Not Listed**

Name
DTV Medical Notifications

## Other Expenses

Section	Question
<b>AM Pattern Disturbance</b>	Is an Impact Study needed?
	Is Remediation needed?
<b>Facility Expenses</b>	Name
	Other Distributed Transmission System Expenses
	Name
	Is Notification of a Medical Facility required as a re
<b>Permit and Filing Costs</b>	Local Zoning
	Non-zoning permits
	BLM or NFS Coordination
	FCC Construction Permit Minor Change
	FCC License to Cover Application
	FCC Special Temporary Authority Application
<b>Other Miscellaneous Expenses</b>	Does this relocation require paying Disposal Costs (any salvage value)?
	Does this relocation require Equipment Delivery or in individual item costs?
	Does this relocation require Equipment Storage?
	Does this relocation require the Development and upcoming channel change?
	Does this relocation require MVPD Notification of i

## Other Expenses

### Other Expenses Not Listed

Name
Merrill Weiss Group
Lead based paint - Disposal Costs
Lead based paint - Environmental Safety Study



## Cost Information

### Transmitters

Where no predetermined cost estimate is available, any estimate provided w

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification
<b>Primary Transmitter ULXTE-50</b>	<b>\$1,222,042.09</b>	<b>\$1,220,792.09</b>	
UHF - Liquid Cooled Solid State Transmitter 31.7 kW	<b>\$1,134,990.23</b>	\$1,134,990.23	10/15/18: Added Gates Air C transmitter Cost \$8827.93-See
Other Electrical Service: Electrician will remove existing electrical and install new transformer, conduits, and heat exchanger feeds for primary transmitter. See quote from Schneider for cost breakdowns.	<b>\$61,501.86</b>	\$61,501.86	Labor to remove existing electri includes 150KVA 480V to 208 Propo:
Transformer 3 phase /480v - 150 KVA	\$25,550.00	\$24,300.00	
<b>Auxiliary Transmitter ULXTE-24</b>	<b>\$751,388.00</b>	<b>\$697,457.46</b>	

Transformer 3 phase /480v - 150 KVA	\$25,550.00	\$24,300.00	
UHF - Liquid Cooled Solid State Transmitter 14.2 - 20 kW	\$684,000.00	\$631,319.46	10/15/18: Added Change Ord "KIRO_AUX_COVER_LETTER pdf" for details. Estimated
Other Electrical Service: Electrician will remove existing service connections and dispose. New transformer conduits and heat exchanger feeds will be installed for new Aux. See Schneider proposal Queen Anne for cost details.	<b>\$41,838.00</b>	\$41,838.00	Labor to remove existing c transformer and heat exchan transformer and wiring/conc
<b>Sub-total</b>	\$1,973,430.09	\$1,918,249.55	
<b>Total for all systems</b>	\$4,174,949.67	\$3,992,182.78	

## Components

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

<p>UHF - Liquid Cooled Solid State Transmitter 31.7 kW</p>	<p>Component De:</p> <p>Amount:</p> <p>Component De:</p> <p>Amount:</p> <p>Component De: Amount:</p> <p>Component De: Amount:</p>
<p>Other Electrical Service: Electrician will remove existing electrical and install new transformer, conduits, and heat exchanger feeds for primary transmitter. See quote from Schneider for cost breakdowns.</p>	<p>Component De: Amount:</p>
<p>Transformer 3 phase/480v - 150 KVA</p>	<p>Component De: Amount:</p> <p>Component De: Amount:</p> <p>Component De: Amount:</p>

Transformer 3 phase/480v - 150 KVA	<p>Component Description: Amount:</p> <p>Component Description: Amount:</p> <p>Component Description: Amount:</p>
UHF - Liquid Cooled Solid State Transmitter 14.2 - 20 kW	<p>Component Description: Amount:</p> <p>Component Description: Amount:</p> <p>Component Description: Amount:</p> <p>Component Description: Amount:</p>
Other Electrical Service: Electrician will remove existing service connections and dispose. New transformer conduits and heat exchanger feeds will be installed for new Aux. See Schneider proposal Queen Anne for cost details.	Information not provided

Cost Information

Antennas

Where no predetermined cost estimate is available, any estimate provided w	
Description	Predetermined Cost Estimate
Primary Antenna TFU-26JSC/VP-R C164	\$272,765.75
Main Antenna Freight	\$17,500.00
Dielectric Custom Flanges	\$3,837.00
Sweep test of existing antenna	\$6,730.00
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	\$12,300.00
Main antenna Support Brackets	\$21,750.00
UHF - High Power, Side Mount, basic slot antenna, 715 kW input, directional,, elliptically or circularly polarized	\$145,275.00

UHF - Lower Power, Side Mount, Class A, basic slot antenna, 715 kW input, directional,, horizontally polarized	<b>\$65,373.75</b>
<b>Auxiliary Antenna TFU-26JSC-R C164</b>	<b>\$209,330.55</b>
Antenna Support Brackets	<b>\$21,750.00</b>
Dielectric Custom Flanges	<b>\$5,657.00</b>
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	\$12,300.00
Sweep test of existing antenna	\$6,730.00
UHF - High Power, Side Mount, basic slot antenna, 715 kW input, directional,, horizontally polarized	<b>\$79,901.25</b>
Freight Charges	<b>\$17,618.55</b>
UHF - Lower Power, Side Mount, Class A, basic slot antenna, 715 kW input, directional,, horizontally polarized	<b>\$65,373.75</b>

<b>Sub-total</b>	\$482,096.30
<b>Total for all systems</b>	\$4,174,949.60

Components

Actual Information Description	File Name
Main Antenna Freight	Compon Amount:
	Compon Amount:
	Compon Amount:
Dielectric Custom Flanges	Compon
	Amount:
	Compon
	Amount:
	Compon
	Amount:

Sweep test of existing antenna	<p><b>Compon Amount:</b></p> <p><b>Compon Amount:</b></p> <p><b>Compon Amount:</b></p>
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	<p><b>Compon Amount:</b></p> <p><b>Compon Amount:</b></p> <p><b>Compon Amount:</b></p>
Main antenna Support Brackets	<p><b>Compon Amount:</b></p> <p><b>Compon Amount:</b></p> <p><b>Compon Amount:</b></p>
UHF - High Power, Side Mount, basic slot antenna, 715 kW input, directional,, elliptically or circularly polarized	<p><b>Compon Amount:</b></p>



UHF - Lower Power, Side Mount, Class A, basic slot antenna, 715 kW input, directional,, horizontally polarized	<div>Compon</div> <div>Amount:</div> <div>Compon</div> <div>Amount:</div>
Antenna Support Brackets	<div>Compon</div> <div>Amount:</div> <div>Compon</div> <div>Amount:</div> <div>Compon</div> <div>Amount:</div>
Dielectric Custom Flanges	<div>Compon</div> <div>Amount:</div> <div>Compon</div> <div>Amount:</div> <div>Compon</div> <div>Amount:</div>

Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	Compon Amount:
	Compon Amount:
	Compon Amount:
Sweep test of existing antenna	Compon Amount:
	Compon Amount:
	Compon Amount:
UHF - High Power, Side Mount, basic slot antenna, 715 kW input, directional,, horizontally polarized	Compon Amount:
	Compon Amount:

Freight Charges	<p><b>Compon Amount:</b></p> <p><b>Compon Amount:</b></p> <p><b>Compon Amount:</b></p> <p><b>Compon Amount:</b></p>
UHF - Lower Power, Side Mount, Class A, basic slot antenna, 715 kW input, directional,, horizontally polarized	<p><b>Compon Amount:</b></p>

Cost Information

Transmission Line

Where no predetermined cost estimate is available, any estimate provided w

Description	Predetermined Cost Estimate
Primary Transmission Line	\$0.00
Required Category	\$0.00
Auxiliary Transmission Line	\$20,973.00
AUX Transmission Extension	\$20,973.00
Sub-total	\$20,973.00
Total for all systems	\$4,174,949.6

Components

Information not provided.

Cost Information

Tower Equipment and Rigging Costs

Where no predetermined cost estimate is available, any estimate provided w

Description	Predetermined Cost Estimate
Primary Tower GTOWER	\$1,275,100.0
Serious tower reinforcement/modifications	\$1,052,000.0
Structural engineering tower load study for well documented tower	\$12,600.00
Tall Tower (greater than 500')	\$210,500.00
Sub-total	\$1,275,100.0
Total for all systems	\$4,174,949.6

Components

Actual Information Description	File Name
Serious tower reinforcement/modifications	Compon Amount:
	Compon Amount:
Structural engineering tower load study for well documented tower	Compon Amount:

Tall Tower (greater than 500')

Compon  
Amount:

Compon  
Amount:

Compon  
Amount:

## Cost Information

### Outside Professional Services

Where no predetermined cost estimate is available, any estimate provided w

Description	Predetermined Cost Estimate
<b>Outside Professional Services</b>	<b>\$181,940.00</b>
DTV Medical Notifications	\$7,500.00
Comprehensive coverage verification via field study, if needed	\$84,200.00
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	\$2,105.00
Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet	\$10,520.00
NEPA Section 106 environmental review, if needed	\$6,310.00
Attorney Fees - Negotiation of lease and other matters for shared locations	\$4,210.00
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00
Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	\$4,210.00
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application	\$1,580.00
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit Application	\$2,105.00

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00
Perform engineering study for new channel assignment and antenna development	\$7,360.00
Prepare and or review reimbursement form	\$2,630.00
Project management of the transition	\$15,800.00
RF Exposure Measurements	\$21,050.00
<b>Sub-total</b>	<b>\$181,940.00</b>
<b>Total for all systems</b>	<b>\$4,174,949.6</b>

## Components

Actual Information Description	File Name
DTV Medical Notifications	Informatic
Comprehensive coverage verification via field study, if needed	Informatic
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	Informatic
Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet	Informatic
NEPA Section 106 environmental review, if needed	Informatic



Attorney Fees - Negotiation of lease and other matters for shared locations	<p><b>Compon Amount:</b></p> <p><b>Compon Amount:</b></p> <p><b>Compon Amount:</b></p> <p><b>Compon Amount:</b></p> <p><b>Compon Amount:</b></p> <p><b>Compon Amount:</b></p> <p><b>Compon Amount:</b></p> <p><b>Compon Amount:</b></p>
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	<p><b>Compon Amount:</b></p>
Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	<p><b>Compon Amount:</b></p>

Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	<b>Compon Amount:</b>
	<b>Compon Amount:</b>
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application	Informati
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	<b>Compon Amount:</b>
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit Application	Informati
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Informati
Perform engineering study for new channel assignment and antenna development	Informati

Prepare and or review reimbursement form

**Compon**

**Amount:**

**Compon**

**Amount:**

**Compon**

**Amount:**

**Compon**

**Amount:**

**Compon**

**Amount:**

**Compon**

**Amount:**

**Compon**

**Amount:**

Project management of the transition	Compon Amount:
	Compon Amount:
	Compon Amount:
	Compon Amount:
RF Exposure Measurements	Informati

Cost Information

Other Expenses

Where no predetermined cost estimate is available, any estimate provided w	
Description	Predetermined Cost Estimate
Other Expenses	\$241,410.28
Lead based paint - Environmental Safety Study	\$84,777.00
Lead based paint - Disposal Costs	\$71,873.28
Merrill Weiss Group	\$32,825.00
MVPD Notification of Channel Change	\$1,250.00
Equipment Delivery and Handling Charges	\$32,300.00
Disposal Costs (for equipment and other waste, net of any salvage value)	\$6,500.00
FCC Filing Fees - Form 2100 license to cover application	\$335.00
DTV Medical Facility Notification	\$11,550.00
Sub-total	\$241,410.28

---

**Total for all systems**\$4,174,949.6

---

**Components**

Actual Information Description	File Name
Lead based paint - Environmental Safety Study	<b>Compon Amount:</b>
Lead based paint - Disposal Costs	<b>Compon Amount:</b>
Merrill Weiss Group	<b>Compon Amount:</b>  <b>Compon Amount:</b>
MVPD Notification of Channel Change	<b>Compon Amount:</b>
Equipment Delivery and Handling Charges	<b>Compon Amount:</b>
Disposal Costs (for equipment and other waste, net of any salvage value)	Informatic
FCC Filing Fees - Form 2100 license to cover application	Informatic
DTV Medical Facility Notification	<b>Compon Amount:</b>

**Cost Information**

**Grand Total**

	Predetermined Cost Estimate
Total for all systems	\$4,174,949.67

**Reimbursement Status**

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

## Certification

Section	Question
Submission of Estimated Expenses Statements	<p>WILLFUL FALSE STATEMENTS ON THIS FORM IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), OR CONSTRUCTION PERMITS (U.S. CODE, TITLE 42, SECTION 1905), AND/OR FORFEITURE (U.S. CODE, TITLE 42, SECTION 1905) STATEMENTS COULD SUBJECT THIS ENTITY TO THE FEDERAL CLAIMS ACT.</p> <hr/> <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 the certifications and attached documentation are true and considered material representations.</li><li>3. The above-named entity acknowledges the submission of the information herein creates a legal obligation on the part of the government to reimburse the amount.</li><li>4. The above-named entity certifies that the expenses 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).</li><li>5. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (received by the entity listed on this form) will be used only for expenses that are eligible for reimbursement from the Fund.</li><li>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.</li><li>7. The above-named entity acknowledges that any overpayments or payments in error must be refunded to the Commission.</li><li>8. The above-named entity certifies that it is in compliance with all statutes, rules, regulations, and governmental requirements for which compensation is a pre-requisite for obtaining the payments he/she requested.</li></ol> <hr/> <p>I declare, under penalty of perjury, that I am an authorized named applicant for the Authorization(s) specified</p>





## Certification

Section	Question
Submission of Actual Cost Documentation Statements	WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS, AND/OR STATEMENTS PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE, AND/OR FINE, AND/OR IMPRISONMENT (U.S. CODE, TITLE 47, SECTION 312(a)(1), AND SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS, SHALL BE SUBJECT THIS ENTITY TO LIABILITY UNDER TITLE 31, SECTIONS 3729-3733).

1. The Authorized Person signing below certifies that he/she is authorized to submit the TV Broadcaster Relocation Fund Reimbursement on behalf of the above-named entity.
2. The above-named entity certifies that the information submitted in this form and attached documentation are true, accurate, complete, and correct.
3. The above-named entity acknowledges that the information submitted in this form and attached documentation are true, accurate, complete, and correct, and are considered material representations.
4. The above-named entity acknowledges the submission of the information herein creates a legal obligation on the part of the government to reimburse the amount.
5. The above-named entity certifies that the expenses and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (full power and Class A stations); or to change and/or otherwise modify a television station as a result of the spectrum repack (LPTV/Translator stations); or to minimize service interruptions resulting from a repacked television station; or to continue to carry the signal of a television broadcaster that changes channels (MVPD).
6. The above-named entity certifies that all payments received from the TV Broadcaster Relocation Fund (including any interest received) will only be used for expenses that are eligible for reimbursement from the Fund.
7. The above-named entity certifies that the information/documents submitted reflect costs actually incurred.
8. The above-named entity acknowledges that any overpayments or payments in error must be refunded to the Commission.
9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations, and other governmental requirements for which compliance is a prerequisite for obtaining the payments hereby requested.

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

## Certification

Section	Question
Submission of Final Allocation or Accounting Information Statements	<p>WILLFUL FALSE STATEMENTS ON THIS FORM IMPRISONMENT (U.S. CODE, TITLE 18, SECTIO STATION LICENSE OR CONSTRUCTION PERM (1), AND/OR FORFEITURE (U.S. CODE, TITLE 4 STATEMENTS COULD SUBJECT THIS ENTITY CLAIMS ACT.</p> <hr/> <ol style="list-style-type: none"><li>1. The Authorized Person signing below certifi represents that he/she is authorized to sub Broadcaster Relocation Fund Reimbursem on behalf of the above-named entity. The a named entity acknowledges that all certifica attached documentation are considered ma representations.</li><li>2. The above-named entity acknowledges the submission of the information herein create obligation on the part of the government to amount.</li><li>3. The above-named entity certifies that all co identified as "actual costs" herein accuratel represent the costs actually paid by the abo named entity, including any discounts, refu rebates.</li><li>4. The above-named entity certifies that all pa from the TV Broadcaster Relocation Fund ( received by the entity listed on this form wil only for expenses that are eligible for reimb from the Fund.</li><li>5. The above-named entity acknowledges tha overpayments or payments in error must be refunded to the Commission.</li><li>6. The above-named entity certifies that it is in compliance with all statutes, rules, regulatio governmental requirements for which comp pre-requisite for obtaining the payments he requested.</li></ol> <hr/> <p>I declare, under penalty of perjury, that I am an au named applicant for the Authorization(s) specified</p>

## Attachments

