



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **40758** | Service: **DTV** | Call **WSYT** | Channel: **14 (UHF)** |
ID: | Sign:
File **0000028420**
Number:
FRN: **0022892913** | Date **08/16**
Submitted: **/2021**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email
BRISTLECONE BROADCASTING LLC	Brian Brady 2111 UNIVERSITY PARK DRIVE SUITE 650 OKEMOS, MI 48864 United States	+1 (517) 347- 4141	BRADY@NO COM

Reimbursement Contact Information

Reimbursement Contact Name and Information

Applicant	Address	Phone
[Confidential]		

Preparer Contact Information

Preparer Contact Name and Information

Applicant	Address	Phone
Barbara Sweatte <i>COX Media Group</i>	Barbara Sweatte 2111 UNIVERSITY PARK DRIVE SUITE 650 OKEMOS, MI 48864 United States	+1 (760) 406-

Broadcaster Information and Transition Plan

Question	Response
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<p>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.</p>	<p>Yes</p>
<p>Briefly describe transition plan</p>	<p>Purchase of the transmission line. Current transmitter to the new channel. In transmission line, whi</p>

Transmitters

Section	Question
<p>Transmitter Related Expenses</p>	<p>Do you have transmitter related expenses?</p>

**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 Service?

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

Primary Transmitter

Other Transmitter Cost Not Listed

Name	Description
RF Filter and Combiner, Switch and Transmitter Control System	The system will interface control along with other Dielectric's Scout unit
WSYT CH14 Temp Filter	Temporary Mask Filter Repack WSYT-CH14 Cover_Letter"

**Interim
Transmitter**

New Transmitter Costs

Section	Question
New Transmitter	Use
	Description of Use
	Change Type
	Manufacturer
	Model
	Transmitter Type
	Solid State Cooling
	Solid State Power capacity
	Justification for New Transmitter

**Interim
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 Service?
	Type
	Size
	Other Size
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification or leasehold improvement?
	Size
Channel 14 Costs	Is an RF Consulting Engineer needed?
	Is a channel 14 Mask Filer needed?
	Is additional field engineering time needed?
	Number of Days
Inside RF System	Is an additional interior RF system required to support this transmitter?

**Interim
Transmitter**

Other Transmitter Cost Not Listed

Information not provided.

Antennas

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

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 or station group?
	Is the existing antenna directional?
	Is antenna in operating condition?
	Is antenna located on or in close proximity to an antenna farm?
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 an antenna farm?
	New Antenna Manufacturer and Types
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 dual feed lines?
Elbow Complex	Do you require the separate purchase of the Elbow Complex?
	Broadband or Single Channel?
	Feed Line Size
Side Mount Brackets	Do you require the separate purchase of side mount brackets for high power antenna?
Pattern Scatter Analysis	Do you require separate purchase of pattern scatter analysis for side mount high or medium power antenna?
Sweep Test	Do you require the sweep testing of transmission line and antenna?

Enter a list of RF channel numbers.

RF Channel Number
15
14

Primary Antenna

Other Antenna Cost Not Listed

Name	Description
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Antnna Monitoring Kit	RF Scout Assembly f
Beacon Kit	Beacon Kit for suppor
Transmission Line 7-75 EIA	T/L 7-75 EIA Length existing line

Interim Antenna

New Antenna Costs

Section	Question
New Antenna Description	Use
	Description of Use
	Change Type
	Ownership
	Owner
	Is antenna shared?
	Is antenna directional?
	Will antenna be located on or in close proximity to an antenna farm?
New Antenna Manufacturer and Type	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

Interim 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 dual feed lines?
Elbow Complex	Do you require the separate purchase of the Elbow Complex
	Broadband or Single Channel?
	Feed Line Size
Side Mount Brackets	Do you require the separate purchase of side mount brackets for an antenna?
Pattern Scatter Analysis	Do you require separate purchase of pattern scatter analysis for side mount high or medium power antenna?
Sweep Test	Do you require the sweep testing of transmission line and antenna?

Interim Antenna

Other Antenna Cost Not Listed

Name	Description
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Transmission Line 6-50

T/L various fixed leng
/L with the Inside RF :

Transmission Line	Section	Question
	Transmission Line Related Expenses	

Primary 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 stations?
	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	Description
Dehydrator	Pressurization EQ.

Monitoring System for TL	Continuous monitoring at full power
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**Interim
Transmission
Line**

New Transmission Line

Section	Question
New Transmission Line Costs	Use
	Description of Use
	Change Type
	Type
	Diameter
	Segment Length
	Other Segment Length
	Number of parallel runs
	Length
	Justification for New Transmission Line

**Interim
Transmission
Line**

Other Transmission Line Expenses Not Listed

Name	Description
Dehydrator	Pressurization Equipr

**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 stations?
	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
58725	WNYS-TV	DTV

Primary Tower

Tower Modification Costs

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

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
<p>Outside Project Management Services</p>	Do you require outside project management services?
	Number of Hours
	Explanation
<p>Outside RF consulting Engineering Services</p>	Perform engineering study for new channel assignment and antenna development
	Prepare engineering section of Form FCC Construction Per 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	
<p>Attorney and Other Outside Consulting Services</p>	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 7460)
	Negotiation of Lease and other Matter for Shared Locations
	Prepare or Review FCC Form 399 for Reimbursement
	Address transition timing and coordination issues w/ other s and wireless providers
RF Field Engineering Services	Comprehensive coverage verification via field study
	RF exposure measurements
	Additional Field Engineering Service
	Number of Days
	Justification

Outside Professional Services Costs

Other Professional Services Expenses Not Listed

Information not provided.

Other Expenses

Section	Question
AM Pattern Disturbance	Is an Impact Study needed?
	Is Remediation needed?
Facility Expenses	Name
	Other Distributed Transmission System Expenses Not listed
	Name
	Is Notification of a Medical Facility required as a result of D1 broadcasting?
Permit and Filing Costs	Local Zoning
	Non-zoning permits
	BLM or NFS Coordination
	FCC Construction Permit Minor Change
	FCC License to Cover Application
	FCC Special Temporary Authority Application
Other Miscellaneous Expenses	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?
	Does this relocation require Equipment Storage?
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?
	Does this relocation require MVPD Notification of a Channel Change?

Other Expenses

Other Expenses Not Listed

Name	Description
Internal Project Management of Transition	120 h for repack prep engineering planning, budgeting, etc.
Land Mobile Notifications	Land Mobile Notifications

Cost Information

Transmitters

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification
Interim Transmitter THU9-EVO	\$1,133,950.00	\$572,508.14	
Transformer 3 phase/480v - 150 KVA	\$25,550.00	\$29,633.14	The Interim TX cost is split with WNYS. See attached "WSYT - WNYS CH19 & CH44 THU9evo-20 Interim updated Sales_Quote_180801_20190322-175139UTC", and the: "Syracuse Repack WSYT-WNYS-Estimate_Electrical_Service-Interim TX-Jun7-2019-Cover Letter".
Other -- Building Addition Size: 200.0	<i>\$10,000.00</i>	\$10,000.00	Estimate for possible costs of building modifications.
2" Rigid Conduit and Wiring (Cost per foot)	\$3,900.00	\$1,875.00	The Interim TX cost is split with WNYS
UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	\$947,000.00	\$461,000.00	The Interim TX cost is split with WNYS. See attached quote for Interim TX:WSYT Revised Interim THU9evo-20 Sales-Quote_131652_20180928-005347UTC
UHF inside RF system including switching	\$147,500.00	\$70,000.00	The Interim TX cost is split with WNYS. See attached quote: WSYT Revised Interim THU9evo-20 Sales-Quote_131652_20180928-005347UTC
Primary Transmitter THU9EVO-30	\$2,008,829.40	\$1,984,413.92	

WSYT CH14 Temp Filter	<i>\$73,091.62</i>	\$73,091.62	Represents the cost estimate with taxes included per the estimate in the cover letter: "Syracuse Repack WSYT-CH14_loaner Filter-Primary_TX-NOV22-2019-Cover_Letter"
RF Filter and Combiner, Switch and Transmitter Control System	<i>\$55,477.78</i>	\$55,477.78	The documentation is attached to form 399: "WSYT_WNYS Burk Control System Second Revision Sales-Quote_236630_20190805-184606UTC" and "WSYT_WNYS Burk Additional HW and Services Sales-Quote_265011_20191030-162009UTC"
Additional field engineering time, 10-30 days	\$63,100.00	\$60,000.00	N/A
Channel 14 Mask Filter	\$189,500.00	\$180,000.00	N/A
RF Consulting Engineer	\$5,260.00	\$5,000.00	N/A
Other -- Building Addition Size: 800.0	<i>\$10,000.00</i>	\$10,000.00	Estimate for possible costs of building modifications.
2" Rigid Conduit and Wiring (Cost per foot)	\$2,600.00	\$2,500.00	N/A
Transformer 3 phase/480v - 500 KVA	\$48,400.00	\$114,344.52	This new revised estimate includes the cost for the new 480V/400V, 3 Phase Transformer along with all the electrical cost for material and labor. See the attached: "Syracuse Repack WSYT-Estimate_Electrical_Service-Primary_TX-AUG26-2019-Cover_Letter"

UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	\$1,473,000.00	\$1,400,000.00	See attached SS-TX TPO notification:Syracuse Repack WSYT-SS-TX-Upgrade-SEPT2017-rev01,with: authorization-new CP-540K-Jan 22-2018,TPO-ERP CALC-WSYT-TOP_Ant-H-pol-rev01,C-70579-4, THU9evo_bro_en_3607-5860-12_v0100,WSYT CH14 THU9evo-24 AMPs/30 AMPs quotes.
15 Ton system	\$88,400.00	\$84,000.00	N/A
Sub-total	\$3,142,779.40	\$2,556,922.06	N/A
Total for all systems	\$5,579,050.66	\$4,716,683.32	N/A

Components

Actual Information Description	File Name
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Transformer 3 phase/480v - 150 KVA	<p>Component Description: TI by W Ju IN w</p> <p>Amount: \$:</p> <p>Component Description: N re R 2l 9t dt w</p> <p>Amount: \$:</p> <p>Component Description: TI R 2l re lte dt w</p> <p>Amount: \$:</p> <p>Component Description: N V C re lte dt w</p> <p>Amount: \$:</p>
Other -- Building Addition Size: 200.0	<p>Component Description: S cc M</p> <p>Amount: \$:</p>
2" Rigid Conduit and Wiring (Cost per foot)	Information not provided.

UHF - Liquid Cooled Solid State Transmitter 21
- 31 kW

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UHF inside RF system including switching	<p>Component Description: N re R 2l 3l cc</p> <p>Amount: \$:</p> <p>Component Description: In Ti fo</p> <p>Amount: \$:</p> <p>Component Description: In Ti fo st</p> <p>Amount: \$:</p>
WSYT CH14 Temp Filter	<p>Component Description: R cl th M</p> <p>Amount: \$:</p> <p>Component Description: R In aj S P C</p> <p>Amount: \$:</p>

RF Filter and Combiner, Switch and Transmitter Control System	<p>Component Description: R C</p> <p>Amount: \$</p> <p>Component Description: R a i n p t</p> <p>Amount: \$</p>
Additional field engineering time, 10-30 days	Information not provided.
Channel 14 Mask Filter	<p>Component Description: Ite # p M</p> <p>Amount: \$</p> <p>Component Description: Ite re</p> <p>Amount: \$</p>
RF Consulting Engineer	<p>Component Description: S</p> <p>Amount: \$</p>
Other -- Building Addition Size: 800.0	<p>Component Description: B In V</p> <p>Amount: \$</p>
2" Rigid Conduit and Wiring (Cost per foot)	Information not provided.

Transformer 3 phase/480v - 500 KVA

Component Description: Ite

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Amount: \$:

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UHF - Liquid Cooled Solid State Transmitter 35
- 50 kW

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Cost Information

Antennas

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimate Justification
Interim Antenna TFU-18DSC-R T140	\$119,019.00	\$97,797.75	
Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)	\$12,300.00	\$6,606.25	The In Antenna split with Dielectric attached D14 I interim_ Order. S attac transitio Syrac Repack Transiti sket SEPT: revl
Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)	\$5,260.00	\$5,000.00	N/
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$8,212.50	The In Antenna split with Dielectric attached D14 I interim_ Order. S attac transitio Syrac Repack Transiti sket SEPT: revl

UHF - High Power, Side Mount, basic slot antenna, 540 kW input, directional,, elliptically or circularly polarized	<i>\$67,050.00</i>	\$67,050.00	Please Estimate Justific WSYT Interim A - UHF Mou Directio POL
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/
Transmission Line 6-50	<i>\$4,529.00</i>	\$4,529.00	N/
Primary Antenna TFU-20DSC-R T140 DC	\$445,796.50	\$287,376.50	
Transmission Line 7-75 EIA	<i>\$9,206.50</i>	\$9,206.50	This total amount for 75ohm compone the add ones spe the cover the cover "Syrac Repack WN' Addition compo FEB11 Cover_I
Beacon Kit	<i>\$4,500.00</i>	\$4,500.00	N/
Antenna Monitoring Kit	<i>\$6,400.00</i>	\$6,400.00	N/
Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)	\$5,260.00	\$5,000.00	N/
Elbow complex, broadband, at antenna input, per 7 3/16. feedline (if needed)	\$16,850.00	\$16,000.00	N/
New combiner, cost per channel (without antenna)	\$84,200.00	\$80,000.00	N/
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/

UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized	\$289,500.00	\$145,087.50	The cost Master Mount A is split WNYS attac 1696 Confirma WSYT-1 Primary sum of I Item#4 Item# Master Antenna compo descripti split equ: WN'
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$14,782.50	***Sys Notice: E adjuste locked b line has supers ***Diel quote att WSYT WNYS Primary Orc
Sub-total	\$564,815.50	\$385,174.25	N/
Total for all systems	\$5,579,050.66	\$4,716,683.32	N/

Components

Actual Information Description	File Name
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<p>Elbow complex, single channel, at antenna input, per 6 1/8. feedline (if needed)</p>	<p>Component Description: V C</p> <p>Amount: \$</p> <p>Component Description: A S I I S V \$</p> <p>Amount: \$</p> <p>Component Description: M r F M M S \$</p> <p>Amount: \$</p>
<p>Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)</p>	<p>Component Description: T I</p> <p>Amount: M</p>

<p>Side mount brackets for high power antennas (if not included in antenna base cost)</p>	<p>Component Description: V E</p> <p>Amount: \$</p> <p>Component Description: A S I I t</p> <p>Amount: \$</p> <p>Component Description: N r F M i e</p> <p>Amount: \$</p>
<p>UHF - High Power, Side Mount, basic slot antenna, 540 kW input, directional,, elliptically or circularly polarized</p>	<p>Component Description: T</p> <p>Amount: \$</p> <p>Component Description: A S I I F e</p> <p>Amount: \$</p> <p>Component Description: N r F M r M</p> <p>Amount: \$</p>

Sweep test of existing antenna	<p>Component Description: V</p> <p>Amount: \$</p> <p>Component Description: A S I I r</p> <p>Amount: \$</p> <p>Component Description: M r F M i c</p> <p>Amount: \$</p>
Transmission Line 6-50	<p>Component Description: A S I I I</p> <p>Amount: \$</p> <p>Component Description: M r F M c</p> <p>Amount: \$</p>
Transmission Line 7-75 EIA	<p>Component Description: 7</p> <p>Amount: \$</p>

Component Description: F
i
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F
Amount: \$

Component Description: F
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Component Description: A
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Amount: \$

Component Description: F
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Component Description: F
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Amount: \$

	<p>Component Description: N r F A h t</p> <p>Amount: \$</p>
Beacon Kit	<p>Component Description: F I</p> <p>Amount: \$</p> <p>Component Description: N r F A C I</p> <p>Amount: \$</p> <p>Component Description: A S I F F</p> <p>Amount: \$</p>

Antenna Monitoring Kit

Component Description: F

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Amount: \$

Component Description: A

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Amount: \$

Component Description: F

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Amount: \$

Component Description: N

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Amount: \$

Component Description: F

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Amount: \$

Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)

Component Description: T

v

Amount: M

<p>Elbow complex, broadband, at antenna input, per 7 3/16. feedline (if needed)</p>	<p>Component Description: F I</p> <p>Amount: \$</p> <p>Component Description: A S I I i</p> <p>Amount: \$</p> <p>Component Description: N r F A c</p> <p>Amount: \$</p>
<p>New combiner, cost per channel (without antenna)</p>	<p>Information not provided.</p>

Sweep test of existing antenna

Component Description: A
S
I
F
P
\$

Amount: \$

Component Description: F
i
V
i
P
\$

Amount: \$

Component Description: M
r
F
A
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\$

Amount: \$

UHF - High Power Top Mount (200-1000 kW),
One station antenna , elliptically or circularly
polarized

Component Description: /
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Side mount brackets for high power antennas (if
not included in antenna base cost)

Component Description: M
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Cost Information

Transmission Line

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Justificati
Interim Transmission Line	\$222,180.00	\$109,365.00	
Rigid Transmission Line - copper, 6 1/8"	\$220,180.00	\$107,365.00	The cost Interim TL with W
Dehydrator	<i>\$2,000.00</i>	\$2,000.00	See the a quote fr dehydi 08302 Order_Qu M14025 (002). The split with
Primary Transmission Line	\$28,300.00	\$28,300.00	
Monitoring System for TL	<i>\$23,652.00</i>	\$23,652.00	See the a quote#19 "Q19295: estimate i 8% ta
Dehydrator	<i>\$4,648.00</i>	\$4,648.00	Please Estimate Justific WSYT Prim: Transm Line - Def vC
Sub-total	\$250,480.00	\$137,665.00	N/

Total for all systems	\$5,579,050.66	\$4,716,683.32	N/
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Components

Actual Information Description	File Name
Rigid Transmission Line - copper, 6 1/8"	<p>Component Description: V /</p> <p>Amount: \$</p> <p>Component Description: M r F M M e \$</p> <p>Amount: \$</p> <p>Component Description: A S I I s i \$</p> <p>Amount: \$</p>
Dehydrator	<p>Component Description: T € V</p> <p>Amount: M</p>
Monitoring System for TL	Information not provided.
Dehydrator	<p>Component Description: F " V S \$</p> <p>Amount: \$</p>

Cost Information

Tower Equipment and Rigging Costs

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification
Primary Tower TOWER	\$1,323,124.00	\$1,337,944.00	
Tower Helicopter Lift	<i>\$48,024.00</i>	\$48,024.00	See the attached Cover letter for the c for using the Helicopter lift vs gin pole Comparison-Change Order Req-C Clearing_Cover_ Lett
Structural engineering tower load study for well documented tower	\$12,600.00	\$26,173.00	See the attached cover letter: "Syr Estimate_Structural Engineering Lc
Serious tower reinforcement /modifications	\$1,052,000.00	\$1,058,747.00	See the attached acceptance or Stainless_Modification_WSYT_WNYS_ and Stainless_Service_WSYT_WNYS_
Tall Tower (greater than 500')	\$210,500.00	\$205,000.00	See the attached acceptance or Stainless_Modification_WSYT_WNYS_ and Stainless_Service_WSYT_WNYS_
Sub-total	\$1,323,124.00	\$1,337,944.00	N/A
Total for all systems	\$5,579,050.66	\$4,716,683.32	N/A

Components

Actual Information Description	File Name
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Tower Helicopter Lift	<p>Component Description: F Amount: \$</p> <p>Component Description: C Amount: \$</p> <p>Component Description: F S li Amount: \$</p>
Structural engineering tower load study for well documented tower	<p>Component Description: F P Amount: \$</p> <p>Component Description: F e Amount: \$</p> <p>Component Description: F P Amount: \$</p>
Serious tower reinforcement/modifications	<p>Component Description: F C Amount: \$</p> <p>Component Description: F C Amount: \$</p> <p>Component Description: F t Amount: \$</p>

Tall Tower (greater than 500')

Component Description: F

C

Amount: \$

Component Description: F

t

Amount: \$

Cost Information

Outside Professional Services

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Justification
Outside Professional Services	\$170,175.00	\$171,316.25	
Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	\$4,210.00	\$6,000.00	Attorney Estimate attached Northwest Cost Estimate Letter 1 Swearing (00113549)
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A
RF Exposure Measurements	\$21,050.00	\$20,000.00	N/A
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	N/A
NEPA Section 106 environmental review, if needed	\$6,310.00	\$6,000.00	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$7,000.00	Attorney Estimate
Attorney Fees - Negotiation of lease and other matters for shared locations	\$4,210.00	\$4,000.00	N/A
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$5,500.00	Attorney Estimate attached Northwest Cost Estimate Letter 1 Swearing (00113549)

Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/
Prepare request for Special Temporary Authorization	\$2,050.00	\$1,500.00	N/
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application	\$1,580.00	\$1,500.00	N/
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit Application	\$2,105.00	\$2,000.00	N/
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/
Project management of the transition	\$15,800.00	\$16,316.25	The esti cost has adjuste includ invoices st for reimbu at this
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/
Sub-total	\$170,175.00	\$171,316.25	N/
Total for all systems	\$5,579,050.66	\$4,716,683.32	N/

Components

Actual Information Description	File Name
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Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	Component Description: Amount:	V / \$
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Component Description: Amount:	(\$
RF Exposure Measurements	Information not provided.	
Comprehensive coverage verification via field study, if needed	Component Description: Amount:	(\$
NEPA Section 106 environmental review, if needed	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	Information not provided.	
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	Information not provided.	
Prepare request for Special Temporary Authorization	Information not provided.	
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application	Component Description: Amount:	V / \$
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit Application	Information not provided.	

<p>Prepare engineering section of FCC Form 2100 (main), Construction Permit Application</p>	<p>Component Description: V /</p> <p>Amount: \$</p>
<p>Perform engineering study for new channel assignment and antenna development</p>	<p>Component Description: C C</p> <p>Amount: \$</p> <p>Component Description: C Amount: \$</p> <p>Component Description: C Amount: \$</p> <p>Component Description: C Amount: \$</p>
<p>Project management of the transition</p>	<p>Component Description: F Amount: \$</p> <p>Component Description: C Amount: \$</p> <p>Component Description: F Amount: \$</p>
<p>Prepare and or review reimbursement form</p>	<p>Information not provided.</p>
<p>Address transition timing and coordination issues w/ other stations and wireless</p>	<p>Component Description: V C</p> <p>Amount: \$</p>

Cost Information

Other Expenses

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Account
Other Expenses	\$127,676.76	\$127,661.76		\$
Land Mobile Notifications	<i>\$1,037.50</i>	\$1,037.50	Please see Estimated Cost Justification WSYT-610-Land Mobile Notifications v0	:
Internal Project Management of Transition	<i>\$18,000.00</i>	\$18,000.00	120h @ \$150/h estimate.	
MVPD Notification of Channel Change	<i>\$10,000.00</i>	\$10,000.00	See attached FCC Catalog of Potential Expenses and Estimated Costs	
Develop and air announcement of upcoming channel change	<i>\$230.00</i>	\$230.00	See attached: Develop-On_Air_Announcement-cost-2017	
Equipment Storage	<i>\$39,500.00</i>	\$39,500.00	See the attached storage fee calculation for 8 months (32 weeks): Syracuse Repack WSYT-Storage calculation-SEPT2017 along with the Dielectric Storage Fees: "Storage Instructions and Rates-Dielectric".	:
Equipment Delivery and Handling Charges	<i>\$25,000.00</i>	\$25,000.00	See attached FCC Catalog of Potential Expenses and Estimated Costs	\$

Disposal Costs (for equipment and other waste, net of any salvage value)	\$20,719.26	\$20,719.26	Please see Estimated Cost Justification WSYT-610-Disposal Costs v0	\$
DTV Medical Facility Notification	\$11,550.00	\$11,550.00	N/A	
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,110.00	N/A	
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	N/A	
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A	
Sub-total	\$127,676.76	\$127,661.76	N/A	\$
Total for all systems	\$5,579,050.66	\$4,716,683.32	N/A	\$3

Components

Actual Information Description	File Name
Land Mobile Notifications	<p>Component Description: V</p> <p>Amount: (</p> <p>Component Description: A</p> <p>Amount: \$</p>
Internal Project Management of Transition	Information not provided.

MVPD Notification of Channel Change	<p>Component Description: /</p> <p>Amount: \$</p>
Develop and air announcement of upcoming channel change	Information not provided.
Equipment Storage	<p>Component Description: V</p> <p>Amount: \$</p> <p>Component Description: F i V e s</p> <p>Amount: \$</p>
Equipment Delivery and Handling Charges	<p>Component Description: V</p> <p>Amount: \$</p> <p>Component Description: F s C C e</p> <p>Amount: \$</p> <p>Component Description: F s C C 1 e</p> <p>Amount: \$</p>

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Disposal Costs (for equipment and other waste, net of any salvage value)	<p>Component Description: V / r E C</p> <p>Amount: \$</p>
	<p>Component Description: E</p> <p>Amount: \$</p>
	<p>Component Description: M t c C</p> <p>Amount: \$</p>
	<p>Component Description: F t</p> <p>Amount: \$</p>
	<p>Component Description: E C E V 2</p> <p>Amount: \$</p>
DTV Medical Facility Notification	<p>Component Description: V</p> <p>Amount: \$</p>
	<p>Component Description: /</p> <p>Amount: \$</p>
FCC Filing Fees - Form 2100 minor change CP application	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.

Cost Information **Grand Total**

	Predetermined Cost Estimate	Estimated Cost
Total for all systems	\$5,579,050.66	\$4,716,683.32

**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
Submission of Estimated Expenses Statements	<p>WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. C TITLE 18, SECTION 1001), AND/OR REVOCATION OF AN STATION LICENSE OR CONSTRUCTION PERMIT (U.S. C 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>

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 Authority (s) specified above.

Certification

Section	Question
Submission of Actual Cost Documentation Statements	<p data-bbox="810 228 1503 618">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 (a)(1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENT COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).</p> <ol data-bbox="858 698 1318 1998" style="list-style-type: none"><li data-bbox="858 698 1318 909">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 data-bbox="858 936 1318 1070">2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.<li data-bbox="858 1097 1318 1232">3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.<li data-bbox="858 1258 1318 1438">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.<li data-bbox="858 1464 1318 1998">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 Authority (s) specified above.

Certification

Section	Question
Submission of Final Allocation or Accounting Information Statements	<p>WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. C TITLE 18, SECTION 1001), AND/OR REVOCATION OF AN STATION LICENSE OR CONSTRUCTION PERMIT (U.S. C 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>

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 Authority (s) specified above.
