

(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility 7933 Service: DTV Call WNUV Channel: 25 (UHF)

ID: Sign:

ID: File

0000028873

Number:

FRN: **0003778909** Date **08/30** 

Submitted: /2017

# Applicant Information

## **Applicant Name, Type, and Contact Information**

Applicant	Address	Phone	Email	Applicant Type
BALTIMORE (WNUV-TV) LICENSEE, INC. Doing Business As: BALTIMORE (WNUV-TV) LICENSEE, INC.	Lisa Asher 2000 WEST 41ST STREET BALTIMORE, MD 21211 United States	+1 (410) 662- 9688	LAsher@cunninghambroadcasting.com	Corporation

# Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

## Preparer Contact Information

### **Preparer Contact Name and Information**

Paul A. Cicelski , Esq .Paul Cicelski +1 (202) 416- 2001 L Street NW 6756 comLerman Senter PLLCSuite 400 Washington, DC 20036	Applicant	Address	Phone	Email
United States	Esq.	2001 L Street NW Suite 400 Washington, DC	` ,	•

# 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	See Exhibit A.

# **Transmitters**

s <sup>s</sup>	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	Leased
	Owner	Chesapeake Television, LLC
	Site	N/A
Existing Transmitter Manufacturer and Type	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
	Manufacturer	
	Model	Quantum 60QXD2
	Year	2002
	Туре	Inductive Output Tube
	IOT Power Type	Two
	Power Capacity	60 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	ULXTE-50
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	29.2 kW
	Justification for New Transmitter	Per the manufacturer, the current transmitter cannot be retuned. See Exhibit B.

# Primary Transmitter

## **Other Transmitter Costs**

ction	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	Yes
	Transformer (480V)	Yes
	Power	300 kVA
	Rigid Conduit and Wiring	Yes
	Size	2 inches
	Length	800.0 feet
	Other Electrical Service	No
	-	

	Description	N/A
HVAC Service	Does the replacement transmitter require HVAC Service?	No
	Туре	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** 

Transmitter Information not provided.

### **Antennas**

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

# Primary Antenna

### **Existing Antenna Information**

Section	Question	Response
Existing Antenna Description	Type of change	Retune Existing
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
Existing Antenna Manufacturer and Type	Owner	Chesapeak Television Licensee, LLC
	Site	N/A
	Is the existing antenna shared with another station or stations?	Yes
	Is the existing antenna directional?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	Yes
	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Bottom
	Polarization	Horizontal
	Туре	Broadband Panel
	Number of Stations Supported	2
	Number of Panels	36

Design power capacity in use	55.0 %
Lower Limit	470.00 MHz
Upper Limit	698.00 MHz
Other Antenna Type	N/A
ERP: (Effective Radiated Power)	845.0 kW
Manufacturer	DIELECTRIC
Model	TUD-C5SP- 10/36SPH-1- B
Year	2002

# Facility ID's and Call Signs of all stations with whom the antenna is shared.

Facility ID	Call Sign
10758	WBFF

## Primary Antenna

# **Adjustment to Existing Antenna**

Section	Question	Response
Sweep Test of Existing Antenna	Do you need a sweep test of existing antenna?	Yes

# Primary Antenna

### **Other Antenna Costs**

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	Yes
	Туре	New
	Number of channels supported	2
	Frequencies of channels supported	RF channel
	Frequency	N/A

# Enter a list of RF channel numbers.

RF Channel Number
25
24

# Primary Antenna

### **Other Antenna Cost Not Listed**

Transmission Seffien	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	Yes

# Primary Transmissio

# **Existing Transmission Line**

Line Section	Question	Response
Existing Transmission Line Description	Type of change	Utilize Existing
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Leased
	Owner	Chesapeak Television, LLC
	Site	N/A
	Is the existing transmission line shared with another station or stations?	Yes
	Is Transmission Line in operating condition?	Yes
Existing Transmission	Manufacturer	Dielectric
Line Manufacturer and Type	Туре	Rigid
	Diameter	8 3/16 inches
	Other Diameter	N/A
	Segment Length	19 3/4 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1300 feet per run

# Facility ID's and Call Signs of all stations with whom the transmission line is shared.

Facility ID	Call Sign
10758	WBFF

**Primary** Other Transmission Line Expenses Not Listed

Transmission loine tion not provided.

Tower
Equipment
And
Rigging
Costs

Section	Question	Response
Tower Equipment or Rigging Costs Changes	Do you have tower equipment or rigging costs changes?	No

# Outside Professional

Section	Question	Response
Il Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	400
	Explanation	Outside consulting engineering, legal work, and accounting services, as well as project management for regional and comprehensive repack execution.
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	Yes
	Quantity	2

	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
Attorney and Other Outside Consulting	Prepare and file Form FCC Construction Permit Application	Yes
Services	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	2
	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	Yes
	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	Yes
	RF exposure measurements	No
	Additional Field Engineering Service	No
	Number of Days	N/A

Justification	N/A

Outside
Professional Services Expenses Not Listed
Professional Services © pstsided.

# 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	Yes
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?	Yes
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	Yes
	Does this relocation require MVPD  Notification of a Channel Change?	Yes

Other Expenses Not Listed

**Expenses** Information not provided.

### **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 ULXTE-50	\$1,042,800.00	\$991,300.00		\$0.00	
Switchgear - industrial 800 amp	\$38,200.00	\$36,300.00	N/A	N/A	N/A
Transformer 3 phase/480v - 300 KVA	\$36,800.00	\$35,000.00	N/A	N/A	N/A
2" Rigid Conduit and Wiring (Cost per foot)	\$20,800.00	\$20,000.00	N/A	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	\$947,000.00	\$900,000.00	N/A	N/A	N/A
Sub-total	\$1,042,800.00	\$991,300.00	N/A	\$0.00	N/A
Total for all systems	\$1,967,476.00	\$1,347,181.00	N/A	\$0.00	N/A

## Components

### **Antennas**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Antenna TUD- C5SP-10/36SPH- 1-B	\$637,930.00	\$80,000.00		\$0.00	
Sweep test of existing antenna	\$6,730.00	\$0.00	This cost will be shared with WBFF, and WBFF will be purchasing this service.	N/A	N/A
UHF - High Power Top Mount (200- 1000 kW), Two Station broadband panel antenna, horizontally polarized	\$547,000.00	\$0.00	The cost of a new antenna populated, but the current primary antenna will only be retuned and reswept.	N/A	N/A
New combiner, cost per channel (without antenna)	\$84,200.00	\$80,000.00	N/A	N/A	N/A
Sub-total	\$637,930.00	\$80,000.00	N/A	\$0.00	N/A
Total for all systems	\$1,967,476.00	\$1,347,181.00	N/A	\$0.00	N/A

## Components

### **Transmission Line**

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 Transmission Line	\$0.00	\$0.00		\$0.00	
Sub-total	\$0.00	\$0.00	N/A	\$0.00	N/A
Total for all systems	\$1,967,476.00	\$1,347,181.00	N/A	\$0.00	N/A

## Components

## **Tower Equipment and Rigging Costs**

Cost Information

**Information** 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	\$188,050.00	\$177,750.00		\$0.00	
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$7,360.00	\$7,000.00	N/A	N/A	N/A
Attorney Fees - Negotiation of lease and other matters for shared locations	\$4,210.00	\$4,000.00	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
Project management of the transition	\$63,200.00	\$60,000.00	N/A	N/A	N/A
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	N/A	N/A	N/A
Prepare request for Special Temporary Authorization	\$4,100.00	\$3,000.00	N/A	N/A	N/A

Sub-total	\$188,050.00	\$177,750.00	N/A	\$0.00	N/A
Total for all systems	\$1,967,476.00	\$1,347,181.00	N/A	\$0.00	N/A

# Components

## **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	\$98,696.00	\$98,131.00		\$0.00	
MVPD Notification of Channel Change	\$5,000.00	\$5,000.00	See Exhibit J.	N/A	N/A
Develop and air announcement of upcoming channel change	\$28,050.00	\$28,050.00	See Response to August 18 Inquiry.	N/A	N/A
Equipment Storage	\$15,000.00	\$15,000.00	See Exhibit J.	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$28,566.00	\$28,566.00	See Response to August 18 Inquiry.	N/A	N/A
Equipment Delivery and Handling Charges	\$10,000.00	\$10,000.00	See Exhibit J.	N/A	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	\$11,000.00	N/A	N/A	N/A
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A	N/A	N/A
Sub-total	\$98,696.00	\$98,131.00	N/A	\$0.00	N/A

Total for all	\$1,967,476.00	\$1,347,181.00	N/A	\$0.00	N/A
systems					

# Components

## **Grand Total**

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$1,967,476.00	\$1,347,181.00	\$0.00

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

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 abovenamed applicant for the Authorization(s) specified above. Lisa Asher Secretary

08/30/2017

### **Attachments**