



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **47904** | Service: **DTV** | Call **WRC-TV** | Channel: **48 (UHF)** |  
ID: | Sign:  
File **0000028771**  
Number:  
FRN: **0019509470** | Date **05/03**  
Submitted: **/2018**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>NBC TELEMUNDO LICENSE LLC</b>	Margaret L. Tobey 300 NEW JERSEY AVE, N.W. SUITE 700 WASHINGTON, DC 20001 United States	+1 (202) 524- 6401	MARGARET. TOBEY@NBCUNI. COM	Limited Liability Company

## Reimbursement Contact Information

### Reimbursement Contact Name and Information

Applicant	Address	Phone	Email
[Confidential]			

## Preparer Contact Information

### Preparer Contact Name and Information

Applicant	Address	Phone	Email
The Preparer is same as the reimbursement contact.			

**Broadcaster  
Information  
and  
Transition  
Plan**

Question		Response
Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information.		Yes
Briefly describe transition plan		Replace old IOT aux with reliable solid state transmitter and tunable filter. Use with broadband aux antenna on old channel while replacing main antenna and transmitter with equipment for new channel. Retune aux filter and transmitter after repack/

**Transmitters**

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

**Auxiliary  
Transmitter****Existing Transmitter Information**

Section	Question	Response
<b>Existing Transmitter Description</b>	Type of change	Purchase New
	Use	Auxiliary (Backup)
	Description of Use	Used to remain on air when work done on main transmitter or antenna
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	DCX-2
	Year	2000
	Type	Inductive Output Tube
	IOT Power Type	Two
	Power Capacity	40 kW

**Auxiliary  
Transmitter**

**New Transmitter Costs**

Section	Question	Response
New Transmitter	Use	Auxiliary (Backup)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Manufacturer	
	Model	THU9-30
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	37 kW
	Justification for New Transmitter	older IOT transmitter no longer supported by manufacturer

**Auxiliary  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No
	Power	N/A
	Rigid Conduit and Wiring	No
	Size	N/A
	Length	N/A
	Other Electrical Service	Yes

	Description	Cost to disconnect power from old transmitter and connect to new transmitter.
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	No
	Type	N/A
	Size	N/A
	Other Size	N/A
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
<b>Channel 14 Costs</b>	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

**Auxiliary  
Transmitter**

**Other Transmitter Cost Not Listed**

Information not provided.

**Primary  
Transmitter**

**Existing Transmitter Information**

Section	Question	Response
<b>Existing Transmitter Description</b>	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	DCXP-2
	Year	2012
	Type	Inductive Output Tube
	IOT Power Type	Two
	Power Capacity	53 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	THU9-36
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	55 kW
	Justification for New Transmitter	It is less expensive to buy new Solid State, than to re-tune existing Comark IOT.

**Primary  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No
	Power	N/A
	Rigid Conduit and Wiring	No
	Size	N/A
	Length	N/A

	Other Electrical Service	Yes
	Description	Actual electrical connectivity from main building distribution to transmitter.
<b>HVAC Service</b>	Does the replacement transmitter require HVAC Service?	No
	Type	N/A
	Size	N/A
	Other Size	N/A
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
<b>Channel 14 Costs</b>	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

**Primary Transmitter**

**Other Transmitter Cost Not Listed**

Name	Description
<b>Electrical disconnection</b>	Remove electric connection from old main transmitter



**Antennas**

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

**Auxiliary  
Antenna****Add Antenna Information**

Section	Question	Response
Existing Antenna Description	Type of change	Retune Existing
	Antenna Use	Auxiliary (Backup)
	Description of Use	Used to maintain coverage when main antenna or transmitter is unavilable
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is this antenna currently shared with any other stations?	No
	Is this antenna directional?	No
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
Existing Antenna Manufacturer and Type	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Broadband Panel
	Number of Stations Supported	1

Number of Panels	36
Design power capacity in use	50.0 %
Lower Limit	470.00 MHz
Upper Limit	698.00 MHz
Other Antenna Type	N/A
ERP: (Effective Radiated Power)	291.0 kW
Manufacturer	RFS
Model	PHP36L
Year	2011

### Auxiliary Antenna

#### Adjustment to Existing Antenna

Section	Question	Response
<b>Sweep Test of Existing Antenna</b>	Do you need a sweep test of existing antenna?	No

### Auxiliary Antenna

#### Other Antenna Costs

Section	Question	Response
<b>Combiner for Shared Antenna</b>	Do you need a Combiner for a Shared Antenna?	No
	Type	
	Number of channels supported	N/A
	Frequencies of channels supported	N/A
	Frequency	

### Auxiliary Antenna

#### Other Antenna Cost Not Listed

Information not provided.

**Primary  
Antenna**

**Existing Antenna Information**

Section	Question	Response
<b>Existing Antenna Description</b>	Type of change	Purchase New
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	No
	Is the existing antenna directional?	No
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
<b>Existing Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Top
	Polarization	Horizontal
	Type	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels	N/A
	Design power capacity in use	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power) .....	813.0 kW

Manufacturer	
Model	TFU- 26GTH-R 04
Year	2000

Primary  
Antenna

New Antenna Costs

Section	Question	Response
New Antenna Description	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	No
	Will antenna be located on or in close proximity to an antenna farm?	No
New Antenna Manufacturer and Types	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Top
	Polarization	Elliptical
	Type	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels/Bays	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Design power capacity in use	N/A
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power) .....	624.0 kW
	Manufacturer	

Model	TFU-23JTH /VP-R O6
Year	2019
Justification for New Antenna	Existing antenna is single channel (48) and will not work on new channel (34).

## Primary Antenna

### Other Antenna Costs

Section	Question	Response
<b>Combiner for Shared Antenna</b>	Do you need a Combiner for a Shared Antenna?	No
	Type	
	Number of channels supported	N/A
	Frequencies of channels supported	N/A
	Frequency	N/A
	Do you need a combiner output splitter /switcher for dual feed lines?	N/A
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Single Channel
	Feed Line Size	7 3/16 inches inches
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power antenna?	No

<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	No

**Primary  
Antenna**

**Other Antenna Cost Not Listed**

Information not provided.

**Transmission Line**

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



**Primary**  
**Transmission Line**

**Existing Transmission Line**

Section	Question	Response
<b>Existing Transmission Line Description</b>	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing transmission line shared with another station or stations?	No
	Is Transmission Line in operating condition?	Yes
<b>Existing Transmission Line Manufacturer and Type</b>	Manufacturer	
	Type	Rigid
	Diameter	7 3/16 inches
	Other Diameter	N/A
	Segment Length	20 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	625 feet per run

**Primary**  
**Transmission Line**

**New Transmission Line**

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Rigid
	Diameter	7 3/16 inches
	Other Diameter	N/A
	Segment Length	19 1/2 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	625 feet per run
	Justification for New Transmission Line	Old line is insufficient for new antenna

**Primary**  
**Transmission Line**

**Other Transmission Line Expenses Not Listed**

Name	Description
<b>Feed Through Complex</b>	Feed Thru complex to get the line into the antenna from tower
<b>Antenna Adapter Section</b>	Test adapter section 3' long

**Tower Equipment And Rigging Costs**

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

**Primary Tower**

**Existing Tower**

Section	Question	Response
Existing Tower Description	Type of change	Move Equipment
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Is this tower consider Complex?	
	Is this tower currently shared with any other stations?	Yes
	One or more FM, AM or TV radio broadcaster(s)	Yes
	Others Types of Users	No
	Is tower documented for structural analysis?	No
	Is tower compliant with Rev G?	Yes
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1036610
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	38° 56' 24.0" N-
	Longitude (NAD83)	077° 04' 53.0" W-
	Overall Structure Height	662.07 feet
	Support Structure Height	524.93 feet
	Ground Elevation Above Mean Sea Level (AMSL)	386.81 feet

	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	NBC Subsidiary (WRC-TV) LLC
	Date Constructed	10/29/1998

**FM, AM or TV radio  
broadcasters. Facility ID's,  
Call Signs and Services of  
other broadcast stations with  
whom the tower is shared**

Facility ID	Call Sign	Service
73200	WKYS	FM
54712	WMMJ	FM
69532	WFDC-DT	DTV
168063	WIAV-CD	DTV
38437	WMDO-CD	DTV

## Primary Tower

### Tower Rigging Costs

Section	Question	Response
<b>Tower Rigging Costs</b>	Complex Tower	Other
<b>Helicopter Services Required</b>	Are helicopter services required?	No

## Primary Tower

### Other Tower Expenses Not Listed

Information not provided.

**Outside  
Professional Services Costs**

Section	Question	Response
<b>Outside Project Management Services</b>	Do you require outside project management services?	Yes
	Number of Hours	1040
	Explanation	Project oversight of transmitter install, electrical connectivity, tower work, and antenna installation. Additional time will be spent tracking financial and legal process and coordinating with other broadcasters.
<b>Outside RF consulting Engineering Services</b>	Perform engineering study for new channel assignment and antenna development	No
	Prepare engineering section of Form FCC Construction Permit Application	No
	For Auxiliary Facility	N/A
	For Main Facility	N/A
	Prepare engineering section of Form FCC License to Cover Application	No
	For Auxiliary Facility	N/A
	For Main Facility	N/A
	Prepare request for Special Temporary Authority	No
	Quantity	N/A
	Do you have Distributed Transmission System engineering services?	N/A

	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
<b>Attorney and Other Outside Consulting Services</b>	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	No
	Quantity	N/A
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	No
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	Yes
	RF exposure measurements	Yes
	Additional Field Engineering Service	Yes
	Number of Days	40

	Justification	Transmitter and RF design at ground level
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**Outside Professional Services Costs**      **Other Professional Services Expenses Not Listed**  
Services not provided.

## Other Expenses

Section	Question	Response
<b>AM Pattern Disturbance</b>	Is an Impact Study needed?	No
	Is Remediation needed?	No
<b>Facility Expenses</b>	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
<b>Permit and Filing Costs</b>	Local Zoning	Yes
	Non-zoning permits	Yes
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	No
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	Yes
<b>Other Miscellaneous Expenses</b>	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



<b>Other Expenses</b>	<b>Other Expenses Not Listed</b>
	Information not provided.

**Cost  
Information**

**Transmitters**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Justification
<b>Primary Transmitter THU9-36</b>	<b>\$1,874,895.00</b>	<b>\$1,202,030.77</b>		<b>\$0.00</b>	
Other Electrical Service: Actual electrical connectivity from main building distribution to transmitter.	<i>\$83,753.00</i>	\$83,753.00	See attachment "NBC Transmitter Power 2017 8-1-17.pdf" quote from Power Solution - items "Install" and "Rigging".	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 52 - 61 kW	\$1,788,000.00	\$1,115,135.77	Retuning or replacing the existing IOT transmitter would be more expensive as a completely new RF system would be required and additional labor would be required. Next higher power transmitter requested to preserve headroom in old transmitter.	N/A	N/A
Electrical disconnection	<i>\$3,142.00</i>	\$3,142.00	See attachment "NBC Transmitter Power 2017 8-1-17.pdf" from Power Solutions - "Disconnect main transmitter"	N/A	N/A
<b>Auxiliary Transmitter THU9-30</b>	<b>\$1,485,474.00</b>	<b>\$1,043,854.00</b>		<b>\$0.00</b>	

UHF - Liquid Cooled Solid State Transmitter 35 - 50 kW	\$1,473,000.00	\$1,031,380.00	See attachment "NBC_THU9-30_Evo_399_Template.pdf" with complete quote for transmitter and related items from Rohde and Schwarz.	N/A	N/
Other Electrical Service: Cost to disconnect power from old transmitter and connect to new transmitter.	<b>\$12,474.00</b>	\$12,474.00	See attachment "NBC Transmitter Power 2017 8-1-17.pdf" quote from Power Solutions - "Reconnect /Disconnect auxiliary transmitter"	N/A	N/
<b>Sub-total</b>	\$3,360,369.00	\$2,245,884.77	N/A	\$0.00	N/
<b>Total for all systems</b>	\$4,950,192.75	\$3,445,975.27	N/A	\$55,872.27	N/

## Components

Information not provided.

**Cost  
Information**

**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
<b>Primary Antenna TFU-23JTH /VP-R O6</b>	<b>\$303,400.00</b>	<b>\$215,392.50</b>		<b>\$0.00</b>	
Elbow complex, single channel, at antenna input, per 7 3/16. feedline (if needed)	\$13,900.00	\$14,632.50	see attached proposal	N/A	N/A
UHF - High Power Top Mount (200-1000 kW), One station antenna , elliptically or circularly polarized	\$289,500.00	\$200,760.00	N/A	N/A	N/A
<b>Auxiliary Antenna PHP36L</b>	<b>\$196,230.00</b>	<b>\$6,400.00</b>		<b>\$0.00</b>	
UHF - Lower Power Side Mount, One station - 200-500 kW, horizontally polarized	\$189,500.00	\$0.00	N/A	N/A	N/A

UHF – Broadband Panel, Side Mount Auxiliary /Interim, 291 horizontally polarized	<b>\$0.00</b>	\$0.00	Not required	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
<b>Sub-total</b>	\$499,630.00	\$221,792.50	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$4,950,192.75	\$3,445,975.27	N/A	\$55,872.27	N/A

### Components

Information not provided.

Cost  
Information

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	\$222,158.75	\$184,293.00		\$0.00	
Antenna Adapter Section	<i>\$18,330.00</i>	\$18,330.00	required to sweep line and antenna	N/A	N/A
Feed Through Complex	<i>\$22,578.75</i>	\$22,578.75	necessary to get line from tower into the top mount antenna	N/A	N/A
Rigid Transmission Line - copper, 7 3 /16"	\$181,250.00	\$143,384.25	N/A	N/A	N/A
Sub-total	\$222,158.75	\$184,293.00	N/A	\$0.00	N/A
Total for all systems	\$4,950,192.75	\$3,445,975.27	N/A	\$55,872.27	N/A

Components

Information not provided.

Cost  
Information

Tower Equipment and Rigging Costs

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Auxiliary Tower LTOWER	\$0.00	\$0.00		\$0.00	
Primary Tower TOWER	\$421,000.00	\$400,000.00		\$0.00	
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	\$421,000.00	\$400,000.00	N/A	N/A	N/A
Sub-total	\$421,000.00	\$400,000.00	N/A	\$0.00	N/A
Total for all systems	\$4,950,192.75	\$3,445,975.27	N/A	\$55,872.27	N/A

Components

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
<b>Outside Professional Services</b>	<b>\$331,665.00</b>	<b>\$287,250.00</b>		<b>\$55,872.27</b>	
Additional Field Engineering Service, 40 Days	<i>\$45,000.00</i>	\$45,000.00	N/A	\$39,049.81	N/A
Project management of the transition	\$164,320.00	\$156,000.00	N/A	\$14,880.35	N/A
RF Exposure Measurements	\$21,050.00	\$20,000.00	N/A	N/A	N/A
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$50,000.00	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 - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	\$4,210.00	\$4,000.00	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	\$453.60	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	\$1,488.51	N/A
<b>Sub-total</b>	\$331,665.00	\$287,250.00	N/A	\$55,872.27	N/A
<b>Total for all systems</b>	\$4,950,192.75	\$3,445,975.27	N/A	\$55,872.27	N/A

## Components

**Actual Information**  
**Description**

**File Name**

<p>Additional Field Engineering Service, 40 Days</p>	<table> <tr> <td data-bbox="710 168 1013 212"><b>Component Description:</b></td><td data-bbox="1149 168 1380 526"> Repack Engineering Site Survey, see attached site survey report for supporting documentation and cover letter for justification. </td></tr> <tr> <td data-bbox="710 526 821 571"><b>Amount:</b></td><td data-bbox="1149 526 1268 571">\$5,074.81</td></tr> <tr> <td data-bbox="710 660 1013 705"><b>Component Description:</b></td><td data-bbox="1149 660 1380 795"> Deposit on upcoming review of tower rigging plan. </td></tr> <tr> <td data-bbox="710 795 821 840"><b>Amount:</b></td><td data-bbox="1149 795 1268 840">\$3,500.00</td></tr> <tr> <td data-bbox="710 929 1013 974"><b>Component Description:</b></td><td data-bbox="1149 929 1348 1008"> Engineering Site Survey </td></tr> <tr> <td data-bbox="710 1008 821 1052"><b>Amount:</b></td><td data-bbox="1149 1008 1284 1052">\$30,475.00</td></tr> </table>	<b>Component Description:</b>	Repack Engineering Site Survey, see attached site survey report for supporting documentation and cover letter for justification.	<b>Amount:</b>	\$5,074.81	<b>Component Description:</b>	Deposit on upcoming review of tower rigging plan.	<b>Amount:</b>	\$3,500.00	<b>Component Description:</b>	Engineering Site Survey	<b>Amount:</b>	\$30,475.00
<b>Component Description:</b>	Repack Engineering Site Survey, see attached site survey report for supporting documentation and cover letter for justification.												
<b>Amount:</b>	\$5,074.81												
<b>Component Description:</b>	Deposit on upcoming review of tower rigging plan.												
<b>Amount:</b>	\$3,500.00												
<b>Component Description:</b>	Engineering Site Survey												
<b>Amount:</b>	\$30,475.00												
<p>Project management of the transition</p>	<table> <tr> <td data-bbox="710 1176 1013 1220"><b>Component Description:</b></td><td data-bbox="1149 1176 1308 1299"> Project Management Services </td></tr> <tr> <td data-bbox="710 1299 821 1344"><b>Amount:</b></td><td data-bbox="1149 1299 1268 1344">\$1,365.00</td></tr> <tr> <td data-bbox="710 1433 1013 1478"><b>Component Description:</b></td><td data-bbox="1149 1433 1356 1680"> Coordination with Vertical Tower Systems on antenna replacement cost estimate </td></tr> <tr> <td data-bbox="710 1680 821 1724"><b>Amount:</b></td><td data-bbox="1149 1680 1252 1724">\$374.30</td></tr> <tr> <td data-bbox="710 1814 1013 1859"><b>Component Description:</b></td><td data-bbox="1149 1814 1380 1937"> Structural assessment project management </td></tr> <tr> <td data-bbox="710 1937 821 1982"><b>Amount:</b></td><td data-bbox="1149 1937 1252 1982">\$349.60</td></tr> </table>	<b>Component Description:</b>	Project Management Services	<b>Amount:</b>	\$1,365.00	<b>Component Description:</b>	Coordination with Vertical Tower Systems on antenna replacement cost estimate	<b>Amount:</b>	\$374.30	<b>Component Description:</b>	Structural assessment project management	<b>Amount:</b>	\$349.60
<b>Component Description:</b>	Project Management Services												
<b>Amount:</b>	\$1,365.00												
<b>Component Description:</b>	Coordination with Vertical Tower Systems on antenna replacement cost estimate												
<b>Amount:</b>	\$374.30												
<b>Component Description:</b>	Structural assessment project management												
<b>Amount:</b>	\$349.60												

	<b>Component Description:</b> <b>Amount:</b>	Project management \$8,250.00
	<b>Component Description:</b> <b>Amount:</b>	Project Management Services \$975.00
	<b>Component Description:</b> <b>Amount:</b>	Project Management Services \$1,072.50
	<b>Component Description:</b> <b>Amount:</b>	Project Management Services \$348.95
	<b>Component Description:</b> <b>Amount:</b>	Project Management Services \$2,145.00
RF Exposure Measurements	Information not provided.	
Comprehensive coverage verification via field study, if needed	Information not provided.	
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.	
Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	Information not provided.	

<p>Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application</p>	<table> <tr> <td data-bbox="710 174 1013 208"><b>Component Description:</b></td><td data-bbox="1150 174 1356 286">See line 1 of invoice, less 10% vendor discount.</td></tr> <tr> <td data-bbox="710 297 817 331"><b>Amount:</b></td><td data-bbox="1150 297 1233 331">\$37.80</td></tr> <tr> <td data-bbox="710 432 1013 465"><b>Component Description:</b></td><td data-bbox="1150 432 1356 544">See lines 1 &amp; 2 of invoice, less 10% vendor discount.</td></tr> <tr> <td data-bbox="710 555 817 589"><b>Amount:</b></td><td data-bbox="1150 555 1246 589">\$415.80</td></tr> </table>	<b>Component Description:</b>	See line 1 of invoice, less 10% vendor discount.	<b>Amount:</b>	\$37.80	<b>Component Description:</b>	See lines 1 & 2 of invoice, less 10% vendor discount.	<b>Amount:</b>	\$415.80				
<b>Component Description:</b>	See line 1 of invoice, less 10% vendor discount.												
<b>Amount:</b>	\$37.80												
<b>Component Description:</b>	See lines 1 & 2 of invoice, less 10% vendor discount.												
<b>Amount:</b>	\$415.80												
<p>Address transition timing and coordination issues w/ other stations and wireless</p>	<p>Information not provided.</p>												
<p>Prepare and or review reimbursement form</p>	<table> <tr> <td data-bbox="710 880 1013 913"><b>Component Description:</b></td><td data-bbox="1150 880 1334 947">Review of Form 399</td></tr> <tr> <td data-bbox="710 958 817 992"><b>Amount:</b></td><td data-bbox="1150 958 1233 992">\$43.65</td></tr> <tr> <td data-bbox="710 1104 1013 1137"><b>Component Description:</b></td><td data-bbox="1150 1104 1356 1216">See lines 2-6 of invoice, less 10% vendor discount.</td></tr> <tr> <td data-bbox="710 1227 817 1261"><b>Amount:</b></td><td data-bbox="1150 1227 1270 1261">\$1,331.46</td></tr> <tr> <td data-bbox="710 1361 1013 1395"><b>Component Description:</b></td><td data-bbox="1150 1361 1356 1473">See line 3 of invoice, less 10% vendor discount.</td></tr> <tr> <td data-bbox="710 1485 817 1518"><b>Amount:</b></td><td data-bbox="1150 1485 1246 1518">\$113.40</td></tr> </table>	<b>Component Description:</b>	Review of Form 399	<b>Amount:</b>	\$43.65	<b>Component Description:</b>	See lines 2-6 of invoice, less 10% vendor discount.	<b>Amount:</b>	\$1,331.46	<b>Component Description:</b>	See line 3 of invoice, less 10% vendor discount.	<b>Amount:</b>	\$113.40
<b>Component Description:</b>	Review of Form 399												
<b>Amount:</b>	\$43.65												
<b>Component Description:</b>	See lines 2-6 of invoice, less 10% vendor discount.												
<b>Amount:</b>	\$1,331.46												
<b>Component Description:</b>	See line 3 of invoice, less 10% vendor discount.												
<b>Amount:</b>	\$113.40												

## Cost Information

### Other Expenses

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Other Expenses</b>	<b>\$115,370.00</b>	<b>\$106,755.00</b>		<b>\$0.00</b>	
Equipment Storage	<i>\$15,000.00</i>	\$15,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$12,500.00</i>	\$12,500.00	This covers shipping for required items specified in the R&S main and auxiliary transmitter quotes where shipping is not included -- the RF system (including mask filter) and 400VAC transformers for two transmitters.	N/A	N/A
MVPD Notification of Channel Change	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$15,000.00</i>	\$15,000.00	N/A	N/A	N/A

Disposal Costs (for equipment and other waste, net of any salvage value)	<b>\$20,790.00</b>	\$20,790.00	See attachment "NBC Transmitter Power 2017 8-1-17.pdf" quote from Power Solutions - "Demolition"	N/A	N/A
Non-zoning permits	<b>\$15,000.00</b>	\$15,000.00	N/A	N/A	N/A
Local Zoning	<b>\$15,000.00</b>	\$15,000.00	N/A	N/A	N/A
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$2,950.00	N/A	N/A	N/A
<b>Sub-total</b>	\$115,370.00	\$106,755.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$4,950,192.75	\$3,445,975.27	N/A	\$55,872.27	N/A

## Components

Information not provided.

Cost Information	Grand Total			
		Predetermined Cost Estimate	Estimated Cost	Actual Cost
	Total for all systems	\$4,950,192.75	\$3,445,975.27	\$55,872.27

Reimbursement Status	Question	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

Certification	Section	Question	Response
	Submission of Estimated Expenses Statements	<p>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.</p>	
		<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 all certifications and attached documentation are considered material representations.</li> <li>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.</li> </ol>	



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.

<p>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.</p>	
<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p><b>Margaret L Tobey</b>  <i>Assistant Secretary</i></p> <p>05/03/2018</p>

Certification	Section	Question	Response
	Submission of Actual Cost Documentation Statements	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 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).	
		<ol style="list-style-type: none"> <li>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> <li>2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.</li> <li>3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> </ol>	

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.
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.

<p>8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.</p> <p>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.</p>	
<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p><b>Margaret L Tobey</b>  <i>Assistant Secretary</i></p> <p>05/03/2018</p>

## Attachments