



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **68581** | Service: **DTV** | Call **KTVD** | Channel: **31 (UHF)** |  
ID: | Sign:  
File **0000027983**  
Number:  
FRN: **0001887363** | Date **05/15**  
Submitted: **/2018**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>MULTIMEDIA HOLDINGS CORPORATION</b>	Law Department TEGNA Inc. 7950 Jones Branch Drive McLean, VA 22107 United States	+1 (703) 873-6600	lawdept@tegna.com	Corporation

## 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
<b>Jeffrey Johnson , Johnson .</b> <i>Vice President Projects</i> <i>TEGNA</i>	Jeffrey Johnson 7950 Jones Branch Drive McLean, VA 22102 United States	+1 (703) 873-6736	jsjohnson@tegna.com

**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	KTVD will be moving to channel 31 from channel 19. It plans to repurpose the current broadband antenna and transmission line. It requires a new combiner port and a new transmitter. It would cost more to re-tune the existing TX than to purchase a new.

**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	Low Power Backup transmitter
	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	Ranger
	Year	2003
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	1 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?	No
	Manufacturer	
	Model	UAXTE 2R37
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	1.2 kW
	Justification for New Transmitter	The old transmitter cannot be re-tuned.

**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	Yes
	Size	2 inches
	Length	100.0 feet
	Other Electrical Service	Yes

	Description	Additional electrical services required for transmitter installation.
<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	PWR 60 P2
	Year	2007
	Type	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	ULXT 60
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	51 kW
	Justification for New Transmitter	It will cost more to re-tune the old transmitter with interim transmitter lease pricing than purchasing a new one.

**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	Yes
	Size	3 inches

	Length	100.0 feet
	Other Electrical Service	Yes
	Description	Additional electrical services required for transmitter installation, including heat exchangers, transformers, cooling pumps, etc.
<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?	Yes
	Size	100.0 square feet
<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**  
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	Owned
	Owner	N/A
	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?	No
Existing Antenna Manufacturer and Type	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Top
	Polarization	Horizontal
	Type	Broadband Panel
	Number of Stations Supported	2
	Number of Panels	48
	Design power capacity in use	50.0 %
	Lower Limit	470.00 MHz

Upper Limit	860.00 MHz
Other Antenna Type	N/A
ERP: (Effective Radiated Power) .....	1000.0 kW
Manufacturer	Dielectric
Model	TUC-C4SP-12/48U-4-T
Year	2008

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

Facility ID	Call Sign
47903	KCNC-TV

**Primary Antenna**

**Adjustment to Existing Antenna**

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

**Primary Antenna**

**Other Antenna Costs**

Section	Question	Response
<b>Combiner for Shared Antenna</b>	Do you need a Combiner for a Shared Antenna?	Yes
	Type	Additional Module
	Number of channels supported	3
	Frequencies of channels supported	RF channel
	Frequency	N/A

**Enter a list of RF channel numbers.**

RF Channel Number
19
31
35

## Primary Antenna

### Other Antenna Cost Not Listed

Name	Description
Mask Filter	New mask filter required for new channel.

## Auxiliary Antenna

### Existing Antenna Information

Section	Question	Response
Existing Antenna Description	Type of change	Retune Existing
	Antenna Use	Auxiliary (Backup)
	Description of Use	AUX Antenna
	Ownership	Owned
	Owner	N/A
	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?	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	2
Number of Panels	36
Design power capacity in use	50.0 %
Lower Limit	470.00 MHz
Upper Limit	860.00 MHz
Other Antenna Type	N/A
ERP: (Effective Radiated Power)	987.0 kW
Manufacturer	Dielectric
Model	TUA-C3-12 /36-1-S
Year	2008

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

Facility ID	Call Sign
47903	KCNC-TV

### Auxiliary Antenna

#### Adjustment to Existing Antenna

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

### Auxiliary Antenna

#### Other Antenna Costs

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	Yes

	Type	Additional Module
	Number of channels supported	3
	Frequencies of channels supported	RF channel
	Frequency	N/A

Enter a list of RF channel numbers.

RF Channel Number
19
31
35

Auxiliary Antenna

Other Antenna Cost Not Listed

Name	Description
Mask Filter	New mask filter required for new channel.

**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
Existing Transmission Line Description	Type of change	Utilize Existing
	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?	Yes
	Is Transmission Line in operating condition?	Yes
Existing Transmission Line Manufacturer and Type	Manufacturer	Dielectric
	Type	Rigid
	Diameter	8 3/16 inches
	Other Diameter	N/A
	Segment Length	Broadband
	Other Segment Length	N/A
	Number of parallel runs	2
	Length	1000 feet per run

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

Facility ID	Call Sign
47903	KCNC-TV

Primary  
Transmission Line

Other Transmission Line Expenses Not Listed

Name	Description
TX Line Sweep	Sweep required to verify post-transition channel measures well on existing line.

Auxiliary  
Transmission Line

Existing Transmission Line

Section	Question	Response
Existing Transmission Line Description	Type of change	Utilize Existing
	Use	Auxiliary (Backup)
	Description of Use	AUX Line
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing transmission line shared with another station or stations?	Yes
	Is Transmission Line in operating condition?	Yes
Existing Transmission Line Manufacturer and Type	Manufacturer	Dielectric
	Type	Rigid
	Diameter	8 3/16 inches
	Other Diameter	N/A
	Segment Length	Broadband
	Other Segment Length	N/A
	Number of parallel runs	2

	Length	1000 feet per run
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Facility ID's and Call Signs of  
all stations with whom the  
transmission line is shared.

Facility ID	Call Sign
47903	KCNC-TV

**Auxiliary**      **Other Transmission Line Expenses Not Listed**  
**Transmission Line**

Name	Description
TX Line Sweep	Sweep required to verify post-transition channel measures well on existing line.



**Tower Equipment And Rigging Costs**

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

**Primary Tower**

**Existing Tower**

Section	Question	Response
Existing Tower Description	Type of change	Modify Existing
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Is this tower consider Complex?	No
	Is this tower currently shared with any other stations?	Yes
	One or more FM, AM or TV radio broadcaster(s)	Yes
	Others Types of Users	No
	Is tower documented for structural analysis?	No
	Is tower compliant with Rev G?	Unknown
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1058328
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	39° 43' 50.6" N-
	Longitude (NAD83)	105° 13' 55.6" W-
	Overall Structure Height	734.24 feet
	Support Structure Height	620.40 feet
	Ground Elevation Above Mean Sea Level (AMSL)	7115.40 feet

	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	LAKE CEDAR GROUP, L. L.C.
	Date Constructed	06/01/2009

**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
47903	KCNC-TV	DTV

## Primary Tower

### Tower Modification Costs

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	Study needed for undocumented /poorly documented tower
Tower Reinforcements	Please select whether tower reinforcements are needed:	Minor Reinforcements needed

## Primary Tower

### Tower Rigging Costs

Section	Question	Response
Tower Rigging Costs	Complex Tower	N/A
Helicopter Services Required	Are helicopter services required?	No

**Primary  
Tower**

**Other Tower Expenses Not Listed**

Information not provided.

**Outside  
Professional**

Section	Question	Response
<b>Services Costs Outside Project Management Services</b>	Do you require outside project management services?	Yes
	Number of Hours	400
	Explanation	It will be necessary to schedule and coordinate multiple vendors, complete progress reports, and update Schedule 399s. Station does not have available personnel or personnel trained in project management for such complex projects.
<b>Outside RF consulting Engineering Services</b>	Perform engineering study for new channel assignment and antenna development	Yes
	Prepare engineering section of Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	Yes
	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
<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	Yes
	Quantity	2
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	Yes
	FAA Consultation (including preparation of FAA Form 7460)	Yes
	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	10
Justification	\$2,500 per site visit including expenses x 10 days. It is necessary to survey the site, plan the equipment, develop specifications for purchasing, & oversee multiple vendor RF projects. Station does not have available personnel trained in such services.

Outside Professional Services Costs

Other Professional Services Expenses Not Listed

Name	Description
Pre filing site review	outside engineering to review all facilities

## 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 Cost Justification
Primary Transmitter ULXT 60	\$904,745.01	\$904,445.01		\$1,020,854.58	
UHF - Liquid Cooled Solid State Transmitter 51 kW	<i>\$781,596.01</i>	\$781,596.01	See GatesAir quote	\$1,020,854.58	The Actual Cost exceeds the Estimated Cost due in part to the inclusion of the Combiner & RF System in this category.
Other -- Building Addition Size: 100.0	<i>\$25,000.00</i>	\$25,000.00	New pad required for heat exchangers, transformers, pumps, etc. Equipment must also be shielded.	N/A	N/A

Other Electrical Service: Additional electrical services required for transmitter installation, including heat exchangers, transformers, cooling pumps, etc.	<b>\$92,949.00</b>	\$92,949.00	See Encore Electric Quote	N/A	N/A
3" Rigid Conduit and Wiring (Cost per foot)	\$5,200.00	\$4,900.00	N/A	N/A	N/A
<b>Auxiliary Transmitter UAXTE 2R37</b>	<b>\$153,600.00</b>	<b>\$115,837.89</b>		<b>\$0.00</b>	
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	\$126,000.00	\$88,337.89	N/A	N/A	N/A
Other Electrical Service: Additional electrical services required for transmitter installation.	<b>\$25,000.00</b>	\$25,000.00	Additional electrical services required for transmitter installation.	N/A	N/A
2" Rigid Conduit and Wiring (Cost per foot)	\$2,600.00	\$2,500.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$1,058,345.01</b>	<b>\$1,020,282.90</b>	<b>N/A</b>	<b>\$1,020,854.58</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$2,721,280.01</b>	<b>\$2,064,990.40</b>	<b>N/A</b>	<b>\$1,020,854.58</b>	<b>N/A</b>

## Components

Actual Information	
Description	File Name
UHF - Liquid Cooled Solid State Transmitter 51 kW	<b>Component Description:</b> Inv GO10004699-1 KTVD ULXT-60 transmitter 50 percent down payment UL20180424jg v1 <b>Amount:</b> \$390,798.01
	<b>Component Description:</b> Inv US0307626 KTVD ULXT-60 TX change order UL20180515jgv1 <b>Amount:</b> \$23,246.71
	<b>Component Description:</b> Inv US0307804 KTVD ULXT-60 transmitter balance due UL20180424jg v1 <b>Amount:</b> \$422,226.60
	<b>Component Description:</b> Transmitter /Components- GatesAir <b>Amount:</b> \$422,226.60
	<b>Component Description:</b> Deposit on Transmitter <b>Amount:</b> \$144,324.64
	<b>Component Description:</b> Inv MAN00386 KTVD Combiner and RF System 45 percent payment 2 UL20180424jg v1 <b>Amount:</b> \$92,291.63

	<p><b>Component Description:</b></p> <p>Inv MAN00269 KTVD Combiner and RF System 45 percent down payment UL20180424jg v1</p> <p><b>Amount:</b></p> <p>\$92,291.63</p>
Other -- Building Addition Size: 100.0	Information not provided.
Other Electrical Service: Additional electrical services required for transmitter installation, including heat exchangers, transformers, cooling pumps, etc.	Information not provided.
3" Rigid Conduit and Wiring (Cost per foot)	Information not provided.
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	Information not provided.
Other Electrical Service: Additional electrical services required for transmitter installation.	Information not provided.
2" Rigid Conduit and Wiring (Cost per foot)	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 TUC-C4SP-12/48U-4-T</b>	<b>\$730,130.00</b>	<b>\$163,571.25</b>		<b>\$0.00</b>	
Elbow complex, broadband, at antenna input, per 8 3/16. feedline (if needed)	\$18,950.00	\$18,000.00	N/A	N/A	N/A
Mask Filter	<i>\$73,250.00</i>	\$73,250.00	New mask filter required for new post-transition channel. See attached Dielectric quote.	N/A	N/A
Adding a module to existing combiner (without antenna)	\$84,200.00	\$65,921.25	3-channel manifold combiner required in order to repurpose existing broadband antenna and broadband transmission line. See attached Dielectric quote.	N/A	N/A

Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
UHF - High Power Top Mount (200-1000 kW), Two Station broadband panel antenna, horizontally polarized	\$547,000.00	\$0.00	Antenna to be repurposed	N/A	N/A
<b>Auxiliary Antenna TUA-C3-12 /36-1-S</b>	<b>\$134,880.00</b>	<b>\$115,321.25</b>		<b>\$0.00</b>	
Adding a module to existing combiner (without antenna)	\$84,200.00	\$65,921.25	3-channel manifold combiner required in order to repurpose existing broadband antenna and broadband transmission line. See attached Dielelctric quote.	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
Mask Filter	<b>\$25,000.00</b>	\$25,000.00	N/A	N/A	N/A
Elbow complex, broadband, at antenna input, per 8 3/16. feedline (if needed)	\$18,950.00	\$18,000.00	N/A	N/A	N/A

UHF – Broadband Panel, Side Mount Auxiliary /Interim, 987 horizontally polarized	<b>\$0.00</b>	\$0.00	Antenna to be repurposed	N/A	N/A
<b>Sub-total</b>	\$865,010.00	\$278,892.50	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$2,721,280.01	\$2,064,990.40	N/A	\$1,020,854.58	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	\$6,400.00	\$6,400.00		\$0.00	
TX Line Sweep	<i>\$6,400.00</i>	\$6,400.00	N/A	N/A	N/A
Auxiliary Transmission Line	\$6,400.00	\$6,400.00		\$0.00	
TX Line Sweep	<i>\$6,400.00</i>	\$6,400.00	N/A	N/A	N/A
Sub-total	\$12,800.00	\$12,800.00	N/A	\$0.00	N/A
Total for all systems	\$2,721,280.01	\$2,064,990.40	N/A	\$1,020,854.58	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
Primary Tower TOWER	\$394,800.00	\$375,000.00		\$0.00	
Minor tower reinforcement /modifications	\$158,000.00	\$150,000.00	N/A	N/A	N/A
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$25,000.00	N/A	N/A	N/A
Tall Tower (greater than 500')	\$210,500.00	\$200,000.00	N/A	N/A	N/A
Sub-total	\$394,800.00	\$375,000.00	N/A	\$0.00	N/A
Total for all systems	\$2,721,280.01	\$2,064,990.40	N/A	\$1,020,854.58	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
Outside Professional Services	\$265,495.00	\$253,750.00		\$0.00	
Pre filing site review	\$23,500.00	\$23,500.00	N/A	N/A	N/A
Additional Field Engineering Service, 10 Days	\$25,000.00	\$25,000.00	\$2,500 per site visit including expenses x 10 days. It is necessary to survey the site, plan the equipment, develop specifications for purchasing, & oversee multiple vendor RF projects. Station does not have available personnel trained in such services.	N/A	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	\$80,000.00	N/A	N/A	N/A

FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	\$2,105.00	\$2,000.00	N/A	N/A	N/A
ASR modification (prepare FCC Form 854)	\$2,105.00	\$2,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$7,360.00	\$7,000.00	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	N/A	N/A

RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit Application	\$2,105.00	\$2,000.00	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

Project management of the transition	\$63,200.00	\$60,000.00	It will be necessary to schedule and coordinate multiple vendors, complete progress reports, and update Schedule 399s. Station does not have available personnel or personnel trained in project management for such complex projects.	N/A	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	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
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	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 request for Special Temporary Authorization	\$4,100.00	\$3,000.00	N/A	N/A	N/A
<b>Sub-total</b>	\$265,495.00	\$253,750.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$2,721,280.01	\$2,064,990.40	N/A	\$1,020,854.58	N/A

## Components

Information not provided.

## Cost Information

### Other Expenses

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
<b>Other Expenses</b>	<b>\$124,830.00</b>	<b>\$124,265.00</b>		<b>\$0.00</b>	
Equipment Storage	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
Non-zoning permits	<i>\$25,000.00</i>	\$25,000.00	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 - Form 2100 license to cover application	\$335.00	\$325.00	N/A	N/A	N/A
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A	N/A	N/A
Local Zoning	<i>\$750.00</i>	\$750.00	3 cents per \$100 of construction cost.	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$6,000.00</i>	\$6,000.00	40 hours at \$150 per hour to shoot, edit . write and produce promotional information.	N/A	N/A

MVPD Notification of Channel Change	<b>\$6,000.00</b>	\$6,000.00	40 hours at \$150 per hour to shoot, edit . write and produce promotional information.	N/A	N/A
Equipment Delivery and Handling Charges	<b>\$25,000.00</b>	\$25,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<b>\$25,000.00</b>	\$25,000.00	N/A	N/A	N/A
<b>Sub-total</b>	\$124,830.00	\$124,265.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$2,721,280.01	\$2,064,990.40	N/A	\$1,020,854.58	N/A

## Components

Information not provided.



Cost Information	Grand Total			
		Predetermined Cost Estimate	Estimated Cost	Actual Cost
	Total for all systems	\$2,721,280.01	\$2,064,990.40	\$1,020,854.58

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>Jeffrey C Gehman</b>  <i>Engineering Associate</i></p> <p>05/15/2018</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>Jeffrey C Gehman</b>  <i>Engineering Associate</i></p> <p>05/15/2018</p>

## Attachments