

(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

35464 Service: DCA Channel: 15 (UHF) Facility Call KFXO-CD Sign:

08/24

ID:

File 0000025373

Number:

FRN: 0006885586 Date

> Submitted: /2018

#### **Applicant** Information

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

Applicant	Address	Phone	Email	Applicant Type
NPG OF OREGON, INC. Doing Business As: NPG OF OREGON, INC.	Jim DeChant 825 EDMOND STREET ST. JOSEPH, MO 64501 United States	+1 (816) 271-8505	tim. hannan@npgco. com	Corporation

# Reimbursement Contact Name and Information Reimbursement Contact 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	The existing Transmitter cannot be re-tuned (please see the attached letter from the manufacturer) and a new transmitter will be required

Transmitters	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	Owned
	Owner	N/A
	Site	N/A
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
Existing Transmitter	Manufacturer	
Manufacturer and Type	Model	AT71K2
	Year	2010
	Туре	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	1 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	UAXTE-3R37
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	1 kW
	Justification for New Transmitter	Existing transmitter cannot be re- tuned because it is no longer supported by the manufacturer.

### 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
	5	

	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 Information not provided.

**Other Transmitter Cost Not Listed** 

#### **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?	Yes
Existing Antenna	Class	Class A
Manufacturer and Type	Mounting	Side Mour
	Antenna position in stack	Not in Stac
	Polarization	Horizontal
	Туре	Other
	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	PARPANEL
ERP: (Effective Radiated Power)	15.0 kW
Manufacturer	KATHREIN
Model	K723147
Year	2010

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

Facility ID	Call Sign
34879	K45KM-D
35464	KFXO-CD

#### 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
31	
15	

#### Primary Antenna

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

Transmission	effien	Question	Response
	Transmission Line Related Expenses	Do you have transmission line related expenses?	No

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	
I Services Costs Outside Project Management	Do you require outside project management services?	Yes	
Services	Number of Hours	60	
	Explanation	LOCAL ENGINEERING STAFF IS EXTREMELY LIMITED AND UNABLE TO SUPPORT THIS PROJECT WITHOUT COMPROMISING DAY TO DAY OPERATIONS.	
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	No
	Quantity	N/A
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
Attorney and Other Outside Consulting Services	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	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
RF Field Engineering Services	Comprehensive coverage verification via field study	No

RF exposure measurements	No
Additional Field Engineering Service	No
Number of Days	N/A
Justification	N/A

#### Outside Professional

### Other Professional Services Expenses Not Listed

I Services Costs	Description
Additional Repack Legal Services Not Otherwise Specified in Form 399	NON-CATALOG LEGAL SERVICES SUCH AS REVIEW OF QUARTERLY TRANSITION STATUS REPORTS AND OTHER MISCELLANEOUS NON- CATALOG LEGAL FEES
WIRELESS INFRASTRUCTURE SERVICES	REMOVE OLD COMBINER SYSTEM AND INSTALL NEW COMBINER SYSTEM. MANAGE CUT-OVER. COST INCLUDES TRAVEL AND EXPENSES

# 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	Yes
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	No
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 UAXTE-3R37	\$126,000.00	\$42,192.06		\$0.00	
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	\$126,000.00	\$42,192.06	N/A	N/A	N/A
Sub-total	\$126,000.00	\$42,192.06	N/A	\$0.00	N/A
Total for all systems	\$327,835.00	\$119,400.81	N/A	\$5,806.44	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 K723147	\$117,230.00	\$13,413.75		\$0.00	
New combiner, cost per channel (without antenna)	\$84,200.00	\$8,413.75	Combiner cost is divided between KFXO-CD and K45KM which is a LPTV displaced due to the repack	N/A	N/A
UHF - Lower Power Side Mount, Class A One Station antenna basic	\$26,300.00	\$0.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$5,000.00	N/A	N/A	N/A
Sub-total	\$117,230.00	\$13,413.75	N/A	\$0.00	N/A
Total for all systems	\$327,835.00	\$119,400.81	N/A	\$5,806.44	N/A

#### Components

### Cost Transmission Line

**Information** Information not provided.

## Cost Tower Equipment and Rigging Costs

**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 (
Outside Professional Services	\$66,160.00	\$54,950.00		\$5,806.44	
WIRELESS INFRASTRUCTURE SERVICES	\$26,700.00	\$26,700.00	COMBINER INTEGRATION SERVICES NECESSARY, STATION STAFF RESOURCES ARE EXTREMELY LIMITED AND CANNOT SUPPORT INSTALLATION WITHOUT COMPROMISING DAY TO DAY OPERATIONS.	N/A	N/A
Additional Repack Legal Services Not Otherwise Specified in Form 399	\$5,000.00	\$5,000.00	N/A	\$37.12	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

Total for all	\$327,835.00	\$119,400.81	N/A	\$5,806.44	N/A
Sub-total	\$66,160.00	\$54,950.00	N/A	\$5,806.44	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$2,000.00	N/A	\$687.50	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	\$9,480.00	\$7,500.00	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 engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$1,000.00	N/A	\$1,000.00	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$500.00	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	\$4,081.82	N/A

### Components

Actual Information		
Description	File Name	

WIRELESS INFRASTRUCTURE SERVICES	Information not provided.	
Additional Repack Legal Services Not Otherwise Specified in Form 399	Component Description:  Amount:	Non-Catalog Legal Services such as review of quarterly transition status reports and other miscellaneous non- catalog legal fees. \$37.12
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	Component Description:	Repack services related to filing and tracking of C.P. Feb. 1 to Jan 31
	Amount:	2017 \$1,790.45
	Component Description:	Costs for filing and tracking of KFXO C.P. See attached
	Amount:	cover memo. \$2,291.37
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.	

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Component Description:	Engineering study work for new channel assignment and antenna development.
	Amount:	\$1,000.00
Address transition timing and coordination issues w/other stations and wireless	Information not provided.	
Project management of the transition	Information not provided.	
Prepare and or review reimbursement form	Information not provided.	
Perform engineering study for new channel assignment and antenna development	Component Description:	Engineering study work for new channel assignment and antenna development.
	Amount:	\$62.50
	Component Description:	Engineering study work for new channel assignment and antenna development.
	Amount:	\$625.00

#### **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	\$18,445.00	\$8,845.00		\$0.00	
MVPD Notification of Channel Change	\$1,200.00	\$1,200.00	SEE SIGNAL- WIZ QUOTE ATTACHED	N/A	N/A
Develop and air announcement of upcoming channel change	\$750.00	\$750.00	VIDEO PRODUCTION SERVICES	N/A	N/A
Equipment Storage	\$500.00	\$500.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	\$1,500.00	\$1,500.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$1,500.00	\$1,500.00	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 - Form 2100 minor change CP application	\$1,110.00	\$1,070.00	N/A	N/A	N/A

DTV Medical Facility Notification	\$11,550.00	\$2,000.00	N/A	N/A	N/A
Sub-total	\$18,445.00	\$8,845.00	N/A	\$0.00	N/A
Total for all systems	\$327,835.00	\$119,400.81	N/A	\$5,806.44	N/A

#### Components

#### **Grand Total**

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$327,835.00	\$119,400.81	\$5,806.44

Reimbursem	envestiatus	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. James W.
DeChant
VP of
Technology

08/24/2018

#### **Attachments**