

(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

28155 Service: DTV Call **WSWG** Channel: 31 (UHF) Facility

10/08

ID:

Sign:

File 0000028741

Number:

FRN: 0024469108 Date

> Submitted: /2018

#### **Applicant** Information

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

Applicant	Address	Phone	Email	Applicant Type
GRAY TELEVISION LICENSEE, LLC Doing Business As: GRAY TELEVISION LICENSEE, LLC	Robert Folliard 4370 Peachtree Road Atlanta, GA 30319 United States	+1 (202) 750- 1585	Robert. Folliard@gray. tv	Limited Liability Company

# 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
Samuel Hariton Widelity	Samuel Hariton 4031 University Dr Suite 100 Fairfax, VA 22030 United States	+1 (339) 222-8107	sam.hariton@widelity.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.	No
Briefly describe transition plan	WSWG is replacing its existing non- retunable transmitter, antenna, and utilizing the existing transmission line. The station will not be installing any interim equipment.

#### **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	Ultimate
	Year	2006
	Туре	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power Capacity	3 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?	No
	Manufacturer	
	Model	ULXTE-12
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	8.5 kW
	Justification for New Transmitter	The existing Ultimate series Transmitter cannot be re-tuned to the new frequency.

## 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	The new transmitter will require reconfiguration of the electrical service on site. The electrical work cost has been estimated based on verbal guidance from local electrical contractors.
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	Does the Transmitter Building require an addition, modification, other leashold improvement?	No
Improvement	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 Transmittor

**Other Transmitter Cost Not Listed** 

Transmitter Information not provided.

#### **Antennas**

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

## **Existing Antenna Information**

Section	Question	Response
Existing Antenna Description	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?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
Existing Antenna	Class	Full Power
Manufacturer and Type	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Туре	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)	50.0 kW

Manufacturer	
Model	TLP 16J
Year	2006

#### **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?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	No
New Antenna	Class	Full Power
Manufacturer and Types	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	Туре	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)	39.5 kW
	Manufacturer	
	Model	TLP-16J/VP

Year	2018
Justification for New Antenna	The existing antenna is a single channel antenna and cannot be used on the newly assigned channel.

#### **Other Antenna Costs**

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	No
	Туре	
	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
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	No
	Broadband or Single Channel?	N/A
	Feed Line Size	N/A
Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	No
Pattern Scatter Analysis	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
Sweep Test	Do you require the sweep testing of transmission line and antenna?	Yes

**Other Antenna Cost Not Listed** 

Information not provided.

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

# Primary Transmission

# **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?	No
	Is Transmission Line in operating condition?	Yes
Existing Transmission Line Manufacturer and Type	Manufacturer	Dielectric
	Туре	Rigid
	Diameter	3 1/8 inches
	Other Diameter	N/A
	Segment Length	20 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	960 feet per run

#### **Primary**

# Other Transmission Line Expenses Not Listed

Transmission	n Laine	Description
	Sweep Test	Sweep test of existing transmission 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	Leased
	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?	Yes
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1017424
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	31° 10' 18.7" N-
	Longitude (NAD83)	083° 21' 56.6" W-
	Overall Structure Height	955.04 feet
	Support Structure Height	898.94 feet
	Ground Elevation Above Mean Sea Level (AMSL)	227.03 feet

Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	Pinnacle Towers LLC
Date Constructed	10/28/1994

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
71343	WKAA	FM
67098	WVKV	FM

#### 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

Name	Description	
Move Equipment	Replace existing antenna with new antenna	

## Outside Professional

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	900
	Explanation	Strategic Support
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	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
Other Professional Services Expenses Not Listed
Professional Services ©qstsided.

# 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	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

# Other Expenses Not Listed

Name	Description	
Taxes	State and Local Taxes	
Security	Site Security during transition	

# **Cost** Information

#### **Transmitters**

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

	Predetermined	Estimated	Estimated Cost		Actual Cost
Description	Cost Estimate	Cost	Justification	<b>Actual Cost</b>	Justification
Primary Transmitter ULXTE-12	\$496,500.00	\$280,513.46		\$190,022.71	
UHF - Liquid Cooled Solid State Transmitter 8.2 - 13 kW	\$494,500.00	\$278,513.46	GA- 00023229	\$190,022.71	N/A
Other Electrical Service: The new transmitter will require reconfiguration of the electrical service on site. The electrical work cost has been estimated based on verbal guidance from local electrical contractors.	\$2,000.00	\$2,000.00	N/A	N/A	N/A
Sub-total	\$496,500.00	\$280,513.46	N/A	\$190,022.71	N/A
Total for all systems	\$1,480,949.58	\$1,233,608.04	N/A	\$256,349.20	N/A

#### Components

<b>Actual Information</b>	
Description	File Name

UHF - Liquid Cooled Solid State Transmitter 8.2 - 13 kW	Component Description: Amount:	ULXTE-12 Transmitter \$190,022.71
Other Electrical Service: The new transmitter will require reconfiguration of the electrical service on site. The electrical work cost has been estimated based on verbal guidance from local electrical contractors.	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
Primary Antenna TLP-16J/VP	\$36,924.58	\$36,594.58		\$21,318.13	
UHF - High Power, Side Mount, basic slot antenna, 40 kW input, directional,, elliptically or circularly polarized	\$30,194.58	\$30,194.58	N/A	\$16,198.13	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$5,120.00	N/A
Sub-total	\$36,924.58	\$36,594.58	N/A	\$21,318.13	N/A
Total for all systems	\$1,480,949.58	\$1,233,608.04	N/A	\$256,349.20	N/A

## Components

<b>Actual Information</b>		
Description	File Name	

UHF - High Power, Side Mount, basic slot antenna, 40 kW input, directional,, elliptically or circularly polarized

Component Description: UHF low power

side mount TV ANT TLP16J/VP

**Amount:** \$6,075.03

Component Description: UHF Low Power

Side Mount

**Amount:** \$5,521.69

Component Description: New Primary

Antenna-UHF Side Mount

**Amount:** \$4,601.41

Sweep test of existing antenna

Component Description: Sweep Test (Pre-

shipment payment)

**Amount:** \$1,600.00

Component Description: Sweep test New

Primary Antenna

**Amount:** \$1,600.00

Component Description: Primary Antenna

Sweep Test

**Amount:** \$1,920.00

# **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		\$4,918.26	
Sweep Test	\$6,400.00	\$6,400.00	N/A	\$4,918.26	N/A
Sub-total	\$6,400.00	\$6,400.00	N/A	\$4,918.26	N/A
Total for all systems	\$1,480,949.58	\$1,233,608.04	N/A	\$256,349.20	N/A

# Components

Actual Information Description	File Name	
Sweep Test		
	Component Description:	Engineering field services to sweep line
	Amount:	\$4,918.26

# **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).

	Predetermined	Estimated	Estimated Cost		Actual Cost
Description	Cost Estimate	Cost	Justification	<b>Actual Cost</b>	Justification
Primary Tower TOWER	\$608,800.00	\$595,500.00		\$0.00	
Move Equipment	\$214,000.00	\$214,000.00	Includes state and local taxes	N/A	N/A
Tall Tower (greater than 500')	\$210,500.00	\$214,000.00	Includes state and local taxes	N/A	N/A
Minor tower reinforcement /modifications	\$158,000.00	\$160,500.00	Includes state and local taxes	N/A	N/A
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$7,000.00	N/A	N/A	N/A
Sub-total	\$608,800.00	\$595,500.00	N/A	\$0.00	N/A
Total for all systems	\$1,480,949.58	\$1,233,608.04	N/A	\$256,349.20	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	\$167,180.00	\$158,750.00		\$40,090.10	
Project management of the transition	\$142,200.00	\$135,000.00	N/A	\$36,568.60	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	\$196.50	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	\$1,400.00	N/A

Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$1,925.00	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
Sub-total	\$167,180.00	\$158,750.00	N/A	\$40,090.10	N/A
Total for all systems	\$1,480,949.58	\$1,233,608.04	N/A	\$256,349.20	N/A

# Components

Actual Information Description	File Name	
Project management of the transition	Component Description: Amount:	Project Mgt \$2,218.55
	Component Description: Amount:	Project Mgt \$733.30
	Component Description: Amount:	Project Management \$2,630.00
	Component Description: Amount:	Project Mgt \$763.95

**Component Description:** 

Amount:

Project Mgt \$28.20

**Component Description:** 

**Project** 

Amount:

Management \$2,314.90

**Component Description:** 

**Project** 

Amount:

management \$3,230.15

**Component Description:** 

**Project** 

Amount:

managment \$2,456.90

**Component Description:** 

Project

Amount:

Management \$1,985.10

**Component Description:** 

**Project** Management

Amount:

\$2,329.00

**Component Description:** 

Amount:

Project Mgt

\$2,701.30

**Component Description:** 

**Project** 

Amount:

Management

\$2,073.75

**Component Description:** 

**Project** 

Amount:

Management

\$802.25

Component Description:

Project

Amount:

Management \$2,414.35

**Component Description:** 

Project

Management \$2,718.10

**Component Description:** 

Project

Amount:

Amount:

Management \$2,079.15

**Component Description:** 

Transition Related

Project

Management

Costs

**Amount:** \$1,800.00

**Component Description:** 

**Project** 

management

Amount:

\$1,328.55

**Component Description:** 

**Project** 

Management

Amount:

\$1,961.10

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),	Component Description:	Professional
Construction Permit		services
Application	Amount:	\$196.50
	Component Description:	FCC Credit Memo
	Amount:	(\$196.50)
	Component Description:	Attorney CP
		Application
	Amount:	\$196.50
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	Component Description:	This invoice covers both
Application		Engineering Study and Construction
		Permit
		preparation. This
		portion is for
		Construction  Permit preparation.
	Amount:	\$1,400.00

Perform engineering study for new channel assignment and antenna development	Component Description:	Engineering Study for New Channel Assignment
	Amount:	\$1,050.00
	Component Description:	This invoice includes both Engineering study and Construction Permit Application. This component is just the Engineering Study.
	Amount:	\$875.00
Address transition timing and coordination issues w/other stations and wireless	Information not provided.	
Prepare and or review reimbursement form	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).

	Predetermined	Estimated	Estimated Cost		Actual Cost
Description	Cost Estimate	Cost	Justification	<b>Actual Cost</b>	Justification
Other Expenses	\$165,145.00	\$155,850.00		\$0.00	
Security	\$12,000.00	\$12,000.00	N/A	N/A	N/A
Taxes	\$102,760.00	\$102,760.00	N/A	N/A	N/A
MVPD Notification of Channel Change	\$1,000.00	\$1,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	\$10,000.00	\$10,000.00	N/A	N/A	N/A
Equipment Storage	\$12,000.00	\$12,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	\$15,000.00	\$15,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$500.00	\$500.00	Based on station estimate	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	\$2,265.00	N/A	N/A	N/A
Sub-total	\$165,145.00	\$155,850.00	N/A	\$0.00	N/A
Total for all systems	\$1,480,949.58	\$1,233,608.04	N/A	\$256,349.20	N/A

## Components

Information not provided.

# Cost Information

#### **Grand Total**

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$1,480,949.58	\$1,233,608.04	\$256,349.20

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. Robert Folliard Assistant Secretary

10/08/2018

Section Question Response

# Submission of Actual Cost Documentation Statements

WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISIONMENT (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).

- 1. The Authorized
  Person signing
  below certifies and
  represents that he
  /she is authorized to
  submit this TV
  Broadcaster
  Relocation Fund
  Reimbursement
  Form on behalf of
  the above-named
  entity.
- The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.
- The above-named entity acknowledges that all certifications and attached documentation are considered material representations.

- 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.

- 8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.
- 9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested.

I declare, under penalty of perjury, that I am an authorized representative of the abovenamed applicant for the Authorization(s) specified above. Robert Folliard Assistant Secretary

10/08/2018

#### **Attachments**