



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **13594** | Service: **DTV** | Call **WEDW** | Channel: **21 (UHF)**  
 ID: | Sign:  
 File **0000027937**  
 Number:  
 FRN: **0003574662** | Date **11/23**  
 Submitted: **/2018**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>CONNECTICUT PUBLIC BROADCASTING, INC.</b>	Meg Sakellarides	+1 (860) 278-5310	msakellarides@cptv.org	Not-for-Profit
Doing Business As: <b>CONNECTICUT PUBLIC TELEVISION</b>	ASYLUM AVENUE HARTFORD, CT 06105 United States			

## 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
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<p>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.</p>	<p>No</p>
<p>Briefly describe transition plan</p>	<p>Purchase of a new transmitter, new transmission line, and new antenna. Current transmitter cannot be retuned to the new channel. Interim antenna and interim transmission line are planned during transition to main antenna.</p>

<b>Transmitters</b>	<b>Section</b>	<b>Question</b>	<b>Response</b>
		<p><b>Transmitter Related Expenses</b></p>	<p>Do you have transmitter related expenses?</p>

**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	Ultimate TDU2 5K00LV
	Year	2002
	Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power Capacity	5 kW

**Primary  
Transmitter**

**New Transmitter Costs**

Section	Question	Response
<b>New Transmitter</b>	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Manufacturer	
	Model	Parallax 6.5 kW UHF Cooled
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	6.5 kW
	Justification for New Transmitter	Comark, the manufacturer, has indicated that the existing transmitter cannot be retuned to meet the new channel requirement. The existing transmitter is channel-specific.

**Primary  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
<b>Electrical Service</b>	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No

	Power	N/A
	Rigid Conduit and Wiring	Yes
	Size	4 inches
	Length	100.0 feet
	Other Electrical Service	Yes
	Description	Labor and materials to accomplish either modification of existing electrical service or new electrical service and new wiring for new transmitter and 3-phase 208V and wiring for 480 3-phase.
<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
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N/A
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**Primary  
Transmitter**

**Other Transmitter Cost Not Listed**

Name	Description
Mask Filter	8-Pole Mask Filter

**Antennas**

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

**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?	Yes
	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) .....	170.0 kW



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Manufacturer	
Model	TFU-20JDAS/P
Year	1980

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**Primary  
Antenna**

**New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	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
<b>New Antenna Manufacturer and Types</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/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) .....	96.6 kW
Manufacturer		

Model	TFU-15JTH-R P230
Year	2019
Justification for New Antenna	Existing antenna is single channel and is channel-specific. Per Dielectric, the quoted antenna (see quote) is a high-power top-mount antenna and Dielectric does not make an antenna lower than 200kw that is top mounted. This is a like for like exchange.

**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	4 1/16 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?	Yes

**Primary Antenna**

**Other Antenna Cost Not Listed**

<b>Name</b>	<b>Description</b>
<b>Screw Shoulder</b>	1/4-20 5/16 DIA
<b>Spring Assy Watch Band</b>	Spring Assy Watch Band Assy 1.38 ID QS
<b>Rubbing Shoe</b>	4-50/6 CONN QS
<b>Project Expenses</b>	Other services
<b>Reducer</b>	Reducer 4-50 EIA X 3-50 STD QS

**Interim  
Antenna**

**New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	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
<b>New Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	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)	170.0 kW
	Manufacturer	
	Model	TFU-8WB
Year	2019	

Justification for New Antenna	In order to complete the project, an interim antenna is necessary while the main antenna is being replaced.
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**Interim Antenna**

**Other Antenna Costs**

Section	Question	Response
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	No
	Broadband or Single Channel?	N/A
	Feed Line Size	N/A
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for an 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?	Yes

**Interim 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	4 1/16 inches
	Other Diameter	N/A
	Segment Length	19 3/4 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	600 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	4 1/16 inches
	Other Diameter	N/A
	Segment Length	19 1/2 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	600 feet per run

Justification for New Transmission Line

Dielectric has indicated that the existing WR1500 motorized four-port switch and the existing WR1500 waveguides and adapters used both inside and outside to the horizontal run to the tower base will not work on channel 21.

**Primary Transmission Line**      **Other Transmission Line Expenses Not Listed**

Name	Description
Project Expenses	Other services

**Interim  
Transmission  
Line**

**New Transmission Line**

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Type	Flexible Air
	Diameter	3 inches
	Segment Length	N/A
	Other Segment Length	
	Number of parallel runs	1
	Length	600 feet per run
	Justification for New Transmission Line	In order to complete the project, an interim transmission line is necessary while the main antenna is being replaced.

**Interim  
Transmission  
Line**

**Other Transmission Line Expenses Not Listed**

Information not provided.

**Tower Equipment And Rigging Costs**

Section	Question	Response
Tower Equipment or Rigging Costs Changes	Do you have tower equipment or rigging costs changes?	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	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	Yes
	Is tower documented for structural analysis?	Unknown
	Is tower compliant with Rev G?	Unknown
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1205267
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	41° 16' 44.3" N-
	Longitude (NAD83)	073° 11' 06.4" W-
	Overall Structure Height	491.14 feet
	Support Structure Height	459.97 feet
	Ground Elevation Above Mean Sea Level (AMSL)	520.01 feet

Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	Pinnacle Towers LLC
Date Constructed	06/01/1953

**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
58515	WSHU-FM	FM
48721	WEZN-FM	FM

**Other Types of Users**

Users
Cell Providers

**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
Tower Lease	Additional tower rent expense for interim antenna and transmission line necessary during transition.

**Outside Professional Services Costs**

Section	Question	Response
<b>Outside Project Management Services</b>	Do you require outside project management services?	Yes
	Number of Hours	100
	Explanation	The transmitter manufacturer will project manage the project.
<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	No
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	2
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
<b>Attorney and Other Outside Consulting Services</b>	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes

	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	2
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	Yes
	FAA Consultation (including preparation of FAA Form 7460)	Yes
	Negotiation of Lease and other Matter for Shared Locations	Yes
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
<b>RF Field Engineering Services</b>	Comprehensive coverage verification via field study	Yes
	RF exposure measurements	Yes
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

**Outside Professional Services Costs**

**Other Professional Services Expenses Not Listed**

Name	Description
Project Expenses	See attached detailed estimate

**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	No
	FCC Special Temporary Authority Application	No
<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



**Other  
Expenses**

**Other Expenses Not Listed**

<b>Name</b>	<b>Description</b>
<b>Engineering and Administrative</b>	Internal Project management

**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
<b>Primary Transmitter Parallax 6.5 kW UHF Cooled</b>	<b>\$313,600.00</b>	<b>\$299,600.00</b>		<b>\$5,150.00</b>	
Other Electrical Service: Labor and materials to accomplish either modification of existing electrical service or new electrical service and new wiring for new transmitter and 3-phase 208V and wiring for 480 3-phase.	<i>\$15,000.00</i>	\$15,000.00	See attached quote for electrical service.	\$5,150.00	N/A
UHF - Liquid Cooled Solid State Transmitter 4.9 . 6.5 kW	\$273,500.00	\$260,000.00	N/A	N/A	N/A
4" Rigid Conduit and Wiring (Cost per foot)	\$10,100.00	\$9,600.00	N/A	N/A	N/A

Mask Filter	<i>\$15,000.00</i>	\$15,000.00	N/A	N/A	N/A
<b>Sub-total</b>	\$313,600.00	\$299,600.00	N/A	\$5,150.00	N/A
<b>Total for all systems</b>	\$1,362,953.19	\$1,204,729.19	N/A	\$16,276.40	N/A

## Components

Actual Information	
Description	File Name
Other Electrical Service: Labor and materials to accomplish either modification of existing electrical service or new electrical service and new wiring for new transmitter and 3-phase 208V and wiring for 480 3-phase.	<p><b>Component Description:</b> Work done at the Trumbull location</p> <p><b>Amount:</b> \$5,150.00</p>
UHF - Liquid Cooled Solid State Transmitter 4.9 . 6.5 kW	Information not provided.
4" Rigid Conduit and Wiring (Cost per foot)	Information not provided.
Mask Filter	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>Interim Antenna TFU-8WB</b>	<b>\$96,130.00</b>	<b>\$91,400.00</b>		<b>\$0.00</b>	
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
UHF - Lower Power Side Mount, One station antenna - medium power (50-200 kW), horizontally polarized	\$89,400.00	\$85,000.00	N/A	N/A	N/A
<b>Primary Antenna TFU-15JTH-R P230</b>	<b>\$283,738.19</b>	<b>\$194,423.19</b>		<b>\$0.00</b>	
Rubbing Shoe	<i>\$288.75</i>	\$288.75	N/A	N/A	N/A
Spring Assy Watch Band	<i>\$1,076.25</i>	\$1,076.25	N/A	N/A	N/A
Screw Shoulder	<i>\$78.75</i>	\$78.75	N/A	N/A	N/A
Reducer	<i>\$1,860.00</i>	\$1,860.00	N/A	N/A	N/A

UHF - High Power Top Mount (200-1000 kW), One station antenna, horizontally polarized	\$247,000.00	\$161,000.00	See Attached quote from Dielectric, the antenna manufacturer.	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
Elbow complex, single channel, at antenna input, per 4 1/16. feedline (if needed)	\$9,570.00	\$6,585.00	N/A	N/A	N/A
Project Expenses	<b>\$17,134.44</b>	\$17,134.44	N/A	N/A	N/A
<b>Sub-total</b>	\$379,868.19	\$285,823.19	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$1,362,953.19	\$1,204,729.19	N/A	\$16,276.40	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
<b>Interim Transmission Line</b>	<b>\$35,400.00</b>	<b>\$33,600.00</b>		<b>\$0.00</b>	
Flexible Air Transmission Line - dielectric, 3"	\$35,400.00	\$33,600.00	N/A	N/A	N/A
<b>Primary Transmission Line</b>	<b>\$90,930.00</b>	<b>\$50,461.00</b>		<b>\$0.00</b>	
Rigid Transmission Line - copper, 4 1/16"	\$85,200.00	\$44,731.00	See attached quote for transmission line.	N/A	N/A
Project Expenses	<i>\$5,730.00</i>	\$5,730.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$126,330.00</b>	<b>\$84,061.00</b>	<b>N/A</b>	<b>\$0.00</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$1,362,953.19</b>	<b>\$1,204,729.19</b>	<b>N/A</b>	<b>\$16,276.40</b>	<b>N/A</b>

**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
<b>Primary Tower TOWER</b>	<b>\$155,715.00</b>	<b>\$151,515.00</b>		<b>\$0.00</b>	
Tower Lease	<i>\$71,515.00</i>	\$71,515.00	N/A	N/A	N/A
Short Tower (less than 500')	\$84,200.00	\$80,000.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$155,715.00</b>	<b>\$151,515.00</b>	<b>N/A</b>	<b>\$0.00</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$1,362,953.19</b>	<b>\$1,204,729.19</b>	<b>N/A</b>	<b>\$16,276.40</b>	<b>N/A</b>

**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>\$180,890.00</b>	<b>\$177,730.00</b>		<b>\$11,126.40</b>	
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$2,125.00	N/A
Project Expenses	<i>\$14,980.00</i>	\$14,980.00	See attached detailed estimate	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
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$2,000.00	N/A
Project management of the transition	\$15,800.00	\$15,000.00	N/A	\$5,210.40	N/A
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A	\$250.50	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 request for Special Temporary Authorization	\$4,100.00	\$3,000.00	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	\$0.00	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 - Negotiation of lease and other matters for shared locations	\$4,210.00	\$10,000.00	Lease negotiations with Crown castle protracted and complicated given shared operation under Channel Share Agreement.	\$0.00	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	\$1,540.50	N/A
<b>Sub-total</b>	\$180,890.00	\$177,730.00	N/A	\$11,126.40	N/A
<b>Total for all systems</b>	\$1,362,953.19	\$1,204,729.19	N/A	\$16,276.40	N/A

## Components

Actual Information	
Description	File Name
Perform engineering study for new channel assignment and antenna development	<p><b>Component Description:</b> Reversal of initial cost component submitted</p> <p><b>Amount:</b> (\$875.00)</p>

**Component Description:** Engineering study work for new channel assignment and antenna development.  
**Amount:** \$875.00

**Component Description:** Reversal of initial cost component submitted  
**Amount:** (\$1,250.00)

**Component Description:** Engineering study work for new channel assignment and antenna development.  
**Amount:** \$1,250.00

**Component Description:** Engineering study work for new channel assignment and antenna development.  
**Amount:** \$2,500.00

**Component Description:** Reversal of initial cost component submitted  
**Amount:** (\$2,500.00)

**Component Description:** Engineering study work for new channel assignment and antenna development.  
**Amount:** \$1,250.00

	<p><b>Component Description:</b> Engineering study work for new channel assignment and antenna development.</p> <p><b>Amount:</b> \$875.00</p> <p><b>Component Description:</b> Engineering study work for new channel assignment and antenna development.</p> <p><b>Amount:</b> \$2,500.00</p>
Project Expenses	Information not provided.
RF Exposure Measurements	Information not provided.
Comprehensive coverage verification via field study, if needed	Information not provided.
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	Information not provided.
ASR modification (prepare FCC Form 854)	Information not provided.
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	<p><b>Component Description:</b> Engineering study Construction Permit Application (Main)</p> <p><b>Amount:</b> \$2,000.00</p>

<p>Project management of the transition</p>	<table> <tr> <td data-bbox="703 174 1011 208"><b>Component Description:</b></td> <td data-bbox="1145 174 1302 248">Project Management</td> </tr> <tr> <td data-bbox="703 255 815 288"><b>Amount:</b></td> <td data-bbox="1145 255 1262 288">\$1,344.95</td> </tr> <tr> <td data-bbox="703 394 1011 427"><b>Component Description:</b></td> <td data-bbox="1145 394 1302 468">Project Management</td> </tr> <tr> <td data-bbox="703 474 815 508"><b>Amount:</b></td> <td data-bbox="1145 474 1262 508">\$2,287.95</td> </tr> <tr> <td data-bbox="703 613 1011 647"><b>Component Description:</b></td> <td data-bbox="1145 613 1302 687">Project Management</td> </tr> <tr> <td data-bbox="703 694 815 728"><b>Amount:</b></td> <td data-bbox="1145 694 1262 728">\$1,577.50</td> </tr> </table>	<b>Component Description:</b>	Project Management	<b>Amount:</b>	\$1,344.95	<b>Component Description:</b>	Project Management	<b>Amount:</b>	\$2,287.95	<b>Component Description:</b>	Project Management	<b>Amount:</b>	\$1,577.50								
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<p>Address transition timing and coordination issues w/ other stations and wireless</p>	<table> <tr> <td data-bbox="703 862 1011 896"><b>Component Description:</b></td> <td data-bbox="1145 862 1366 976">Attorney Fees to Address Transition Timing</td> </tr> <tr> <td data-bbox="703 983 815 1016"><b>Amount:</b></td> <td data-bbox="1145 983 1227 1016">\$39.00</td> </tr> <tr> <td data-bbox="703 1122 1011 1155"><b>Component Description:</b></td> <td data-bbox="1145 1122 1366 1236">Attorney Fees to Address Transition Timing</td> </tr> <tr> <td data-bbox="703 1243 815 1276"><b>Amount:</b></td> <td data-bbox="1145 1243 1227 1276">\$39.00</td> </tr> <tr> <td data-bbox="703 1382 1011 1415"><b>Component Description:</b></td> <td data-bbox="1145 1382 1358 1496">Address transition timing and coordination.</td> </tr> <tr> <td data-bbox="703 1503 815 1536"><b>Amount:</b></td> <td data-bbox="1145 1503 1227 1536">\$39.00</td> </tr> <tr> <td data-bbox="703 1641 1011 1675"><b>Component Description:</b></td> <td data-bbox="1145 1641 1347 1756">Reversal of initial cost component submitted</td> </tr> <tr> <td data-bbox="703 1762 815 1796"><b>Amount:</b></td> <td data-bbox="1145 1762 1246 1796">(\$39.00)</td> </tr> <tr> <td data-bbox="703 1901 1011 1935"><b>Component Description:</b></td> <td data-bbox="1145 1901 1347 2016">Reversal of initial cost component submitted</td> </tr> <tr> <td data-bbox="703 2022 815 2056"><b>Amount:</b></td> <td data-bbox="1145 2022 1227 2056">\$39.00</td> </tr> </table>	<b>Component Description:</b>	Attorney Fees to Address Transition Timing	<b>Amount:</b>	\$39.00	<b>Component Description:</b>	Attorney Fees to Address Transition Timing	<b>Amount:</b>	\$39.00	<b>Component Description:</b>	Address transition timing and coordination.	<b>Amount:</b>	\$39.00	<b>Component Description:</b>	Reversal of initial cost component submitted	<b>Amount:</b>	(\$39.00)	<b>Component Description:</b>	Reversal of initial cost component submitted	<b>Amount:</b>	\$39.00
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<b>Amount:</b>	\$39.00																				

	<p><b>Component Description:</b> Reversal of initial cost component submitted</p> <p><b>Amount:</b> (\$172.50)</p>
	<p><b>Component Description:</b> Address transition timing and coordination.</p> <p><b>Amount:</b> \$172.50</p>
	<p><b>Component Description:</b> Address transition timing and coordination.</p> <p><b>Amount:</b> \$39.00</p>
	<p><b>Component Description:</b> Attorney Fees to Address Transition Timing</p> <p><b>Amount:</b> \$172.50</p>
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.
Prepare request for Special Temporary Authorization	Information not provided.
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Information not provided.
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.

Attorney Fees -  
Negotiation of lease and  
other matters for shared  
locations

**Component Description:** Reversal of initial  
cost component  
submitted in error  
**Amount:** (\$1,800.00)

**Component Description:** Legal services  
negotiating lease  
with Crown Castle  
for shared location.  
**Amount:** \$4,800.00

**Component Description:** Reversal of initial  
cost component  
submitted in error  
**Amount:** (\$4,800.00)

**Component Description:** Reversal of initial  
cost component  
submitted in error  
**Amount:** (\$2,400.00)

**Component Description:** Legal services  
negotiating lease  
with Crown Castle  
for shared location.  
**Amount:** \$1,800.00

**Component Description:** Legal services  
negotiating lease  
with Crown Castle  
for shared location.  
**Amount:** \$2,400.00

Prepare and or review  
reimbursement form

**Component Description:** Legal services preparing, reviewing, and submitting FCC Reimbursement Form 399  
**Amount:** \$900.00

**Component Description:** Legal Services  
**Amount:** \$232.50

**Component Description:** Legal Services  
**Amount:** \$651.00

**Component Description:** Legal services for preparing, reviewing, and submitting FCC Reimbursement Form 399.  
**Amount:** \$900.00

**Component Description:** Attorney Fees to prepare and review resubmitted Reimbursement Form 399  
**Amount:** N/A

**Component Description:** Legal services for preparing, reviewing, and submitting FCC Reimbursement Form 399.  
**Amount:** \$618.00



**Component Description:** Legal services for preparing, reviewing, and submitting FCC Reimbursement Form 399.  
**Amount:** \$657.00

**Component Description:** Reversal of initial cost component submitted  
**Amount:** (\$618.00)

**Component Description:** Attorney Fees to prepare and review Reimbursement Form 399  
**Amount:** \$657.00

**Component Description:** Reversal of initial cost component submitted.  
**Amount:** (\$900.00)

**Component Description:** Reversal of initial cost component submitted  
**Amount:** (\$657.00)

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**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>\$206,550.00</b>	<b>\$206,000.00</b>		<b>\$0.00</b>	
Engineering and Administrative	<i>\$20,000.00</i>	\$20,000.00	N/A	N/A	N/A
MVPD Notification of Channel Change	<i>\$11,000.00</i>	\$11,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$69,000.00</i>	\$69,000.00	See attachment for detailed justification.	N/A	N/A
Equipment Storage	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	<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
Local Zoning	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
Non-zoning permits	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$40,000.00</i>	\$40,000.00	N/A	N/A	N/A

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<b>Sub-total</b>	\$206,550.00	\$206,000.00	N/A	\$0.00	N/A
<b>Total for all systems</b>	\$1,362,953.19	\$1,204,729.19	N/A	\$16,276.40	N/A

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### **Components**

Information not provided.

**Cost Information** **Grand Total**

	<b>Predetermined Cost Estimate</b>	<b>Estimated Cost</b>	<b>Actual Cost</b>
<b>Total for all systems</b>	\$1,362,953.19	\$1,204,729.19	\$16,276.40

**Reimbursement Status**

<b>Question</b>	<b>Response</b>
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
	<b>Submission of Estimated Expenses Statements</b>	<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 data-bbox="751 779 1038 1167">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 data-bbox="751 1196 1023 1435">2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li data-bbox="751 1464 1034 1749">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.

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 above-named applicant for the Authorization(s) specified above.

**Meg Sakellarides**  
*Chief  
Financial  
Officer*

11/23/2018

Certification	Section	Question	Response
	<b>Submission of Actual Cost Documentation Statements</b>	<p>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).</p>	
		<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.

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 above-named applicant for the Authorization(s) specified above.

**Meg Sakellarides**  
*Chief  
Financial  
Officer*

11/23/2018

## Attachments