

Federal Communications Commission

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

| Facility | 68395 | Service: DCA | Call | WBYD-CD | Channel: 19 (UHF) |
|----------|----------|--------------|-------|---------|-------------------|
| ID: | | | Sign: | | |
| File | 000002 | 8546 | | | |
| Number: | | | | | |
| FRN: 003 | 32881088 | Date | 12/12 | | |
| | | Submitted: | /2018 | | |

Applicant Name, Type, and Contact Information

Information

| Applicant | Address | Phone | Email | Applicant Type |
|--|---------|-----------------------------|----------------------------|---------------------------------|
| FIFTH STREET ENTERPRISES, LLC Doing Business As: FIFTH STREET ENTERPRISES, LLC | | +1 (412) 921- 7577 | dawn@thevideohouse. com | Limited Liability Company |

Reimbursement Contact Name and Information Reimbursement Contact Information

| Applicant | Address | Phone | Email |
|----------------|---------|-------|-------|
| [Confidential] | | | |

| Preparer | Preparer Contact Name and Information | | | | |
|------------------------|--|---------|-------|-------|--|
| Contact 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 plan is to replace the existing channel 39 system with a retuned transmitter, a new channel 30 antenna, new 3" flex air line, and new filter. |

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

Primary Existing Transmitter Information

| Transmitter | Section | Question | Response |
|-------------|---|--|--------------------|
| | Existing Transmitter Description | Type of change | Retune Existing |
| | | Use | Primary (Main) |
| | | Ownership | Owned |
| | | Owner | N/A |
| | | Is this transmitter currently shared with another station? | No |
| | | Is this transmitter currently in operating condition? | Yes |
| | Existing Transmitter Manufacturer and Type | Manufacturer | Rohde & Schwarz |
| | | Model | NV8605 |
| | | | |

| Year | 2012 |
|----------------------------|------------------|
| Туре | Solid State |
| Solid State Cooling | Liquid Cooled |
| Solid State Power capacity | 3.5 kW |

Primary Transmitter Costs

| er | Section | Question | Response | |
|----|-----------------|--|----------|--|
| | New IOT Tubes | Number of Tubes (including accessories) needed | N/A | |
| | New Mask Filter | Power | Other | |
| | | Other Power | 4 kW | |
| | New Exciter | Is a new exciter needed? | No | |

Other Transmitter Costs

Primary Transmitter

| Section | | Question | Response |
|----------|--------------------|--|----------|
| Electric | 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 | No |
| | | Description | N/A |
| HVAC | 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 |

Other Transmitter Cost Not Listed Primarv

| Transmitter | |
|-------------|------|
| mansimiller | Name |

| Name | Description |
|---------------------------|-----------------------------|
| Transmitter Retuning Cost | Retune existing transmitter |

| Antennas Section | | Question | Response |
|------------------|---------------|---------------------------------------|----------|
| Antenna Rela | ated Expenses | Do you have antenna related expenses? | Yes |

| Primary Antenna | 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? | Yes | |
| | | Is the existing antenna directional? | No | |
| | | Is antenna in operating condition? | Yes | |
| | | Is antenna located on or in close proximity to an antenna farm? | Yes | |
| | Existing Antenna Manufacturer and Type | Class | Class A | |
| | | Mounting | Side Mount | |
| | | Antenna position in stack | Not in Stack | |
| | | 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 | Omni- directional | |
| | | ERP: (Effective Radiated Power) | 15.0 kW | |

| Manufacturer | |
|--------------|-------------------|
| Model | KAT 750- 10068 |
| Year | 2014 |

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

| Facility ID | Call Sign |
|-------------|-----------|
| 272 | WPTG-CD |
| 68411 | WIIC-LD |

| Primary Antenna | New Antenna Costs | | | |
|---------------------------------------|-------------------------|--|-------------------|--|
| | Section | Question | Response | |
| | New Antenna Description | Use | Primary (Main) | |
| | | Description of Use | N/A | |
| | | Change Type | Purchase New | |
| | | Is this a request for upgraded equipment? | Yes | |
| | | Ownership | Owned | |
| | | Owner | N/A | |
| | | Is antenna shared? | No | |
| New Antenna Manufacturer and Types | | Is antenna directional? | No | |
| | | Will antenna be located on or in close proximity to an antenna farm? | No | |
| | | Class | Class A | |
| | Mounting | Side Mount | | |
| | | Antenna position in stack | Not in Stack | |
| | | Polarization | Circular | |
| | | Туре | Broadband Slot | |
| | | Number of Stations Supported | 1 | |
| | | Number of Panels/Bays | 1 | |
| | | Lower Limit | 560.00 MHz | |
| | | Upper Limit | 626.00 MHz | |
| | | Design power capacity in use | 47.0 % | |
| | | Other Antenna Type | N/A | |
| | | ERP: (Effective Radiated Power) | 12.5 kW | |
| | | Manufacturer | | |
| | | | | |

| Model | TLP-12B BB C/P |
|-------------------------------|--|
| Year | 2017 |
| Justification for New Antenna | The existing antenna and combiner are used by station on channel 31 that is first adjacent to our newly assigned channel 30. The existing antenna and combiner will not work with first adjacent channels. |

Other Antenna Costs Primary

Antenna

| Antenna | 0031 |
|---------|------|
| | |
| | |

Section Question Response **Combiner for Shared** Do you need a Combiner for a Shared No Antenna Antenna? Туре N/A Number of channels supported Frequencies of channels supported N/A Frequency N/A Do you need a combiner output splitter N/A /switcher for dual feed lines? **Elbow Complex** Do you require the separate purchase of No the Elbow Complex?

| | 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? | Yes |
| Sweep Test | Do you require the sweep testing of transmission line and antenna? | Yes |

Other Antenna Cost Not Listed

Primary Antenna

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

| Transmission Line Existing Transmission Line Description | n Section | Question | Response |
|--|-----------|--|---------------------|
| | - | Type of change | Purchase New |
| | | Use | Primary (Main) |
| | | Description of Use | N/A |
| | | Ownership | Owned |
| | | Owner | N/A |
| Existing Transmission Line Manufacturer and Type | | Site | N/A |
| | | Is the existing transmission line shared with another station or stations? | Yes |
| | | Is Transmission Line in operating condition? | Yes |
| | - | Manufacturer | |
| | | Туре | Flexible Ai |
| | | Diameter | 3 inches |
| | | Other Diameter | N/A |
| | | Segment Length | N/A |
| | | Other Segment Length | N/A |
| | | Number of parallel runs | 1 |
| | | Length | 400 feet per run |

Primary Existing Transmission Line

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

| Facility ID | Call Sign |
|-------------|-----------|
| 272 | WPTG-CD |
| 68411 | WIIC-LD |

| Primary | New Transmission Line | | | |
|-------------|--------------------------------|---|---|--|
| Transmissio | n Line Section | Question | Response | |
| | New Transmission Line Costs | Use | Primary (Main) | |
| | | Description of Use | N/A | |
| | | Change Type | Purchase New | |
| | | Is this a request for upgraded equipment? | No | |
| | | Туре | Flexible Air | |
| | | Diameter | 3 inches | |
| | | Other Diameter | N/A | |
| | | Segment Length | N/A | |
| | | Other Segment Length | N/A | |
| | | Number of parallel runs | 1 | |
| | | Length | 400 feet per run | |
| | | Justification for New Transmission Line | A new transmission line will be necessary to support the new antenna, as the existing transmission line will continue to remain in use by the existing other stations on the existing antenna. | |

Primary Other Transmission Line Expenses Not Listed

Primary Other Transmission Transmission

| Tower | Section | Question | Response |
|--------------------------------------|---|---|----------|
| Equipment And Rigging Costs | 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? | Candelabra | |
| | | 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? | Yes | |
| | | Is tower compliant with Rev G? | Yes | |
| | Existing Tower Structure Registration | Do you have a tower registration number? | Yes | |
| | | ASR Number | 1022324 | |
| | Coordinates (<u>NAD83</u> (North American Datum of 1983)) | Latitude (NAD83) | 40° 26' 46.2" N- | |
| | | Longitude (NAD83) | 079° 57' 50.2" W- | |
| | | Overall Structure Height | 594.15 feet | |
| | | Support Structure Height | 516.07 feet | |

(AMSL)

Ground Elevation Above Mean Sea Level

1164.68 feet

| | Structure Type | LTOWER - Lattice Tower |
|--|------------------|---------------------------|
| | Tower Owner | WQED MULTIMEDIA |
| | Date Constructed | 08/01/1972 |

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 |
|-------------|-----------|---------|
| 65681 | WTAE-TV | DTV |
| 41315 | WQED | DTV |
| 54002 | WQED-FM | FM |
| 66636 | WOSC-CD | DTV |
| 272 | WPTG-CD | DTV |
| 41314 | WINP-TV | DTV |
| 68405 | WEPA-CD | DTV |
| 7622 | WNNB-CD | DTV |

Other Types of Users

Users

WQBT460

WPPQ574

WPDN-LD 68062

WIIC-LD 68411

WQGN429

W271CW 158245

W244CU 139106

KA2208

WQMA386

| Primary Tower | Tower Modification Costs | | | |
|------------------|--------------------------|--|--|--|
| | Section | Question | Response | |
| | Engineering Study | Please what type of engineering study is required, if any: | Study needed for tower with candelabra | |
| | Tower Reinforcements | Please select whether tower reinforcements are needed: | Minor Reinforcements needed | |

Primary Tower Section

| Section | Question | Response |
|---------------------------------|-----------------------------------|------------|
| Tower Rigging Costs | Complex Tower | Candelabra |
| Helicopter Services Required | Are helicopter services required? | No |

Primary Tower Name

| Name | Description |
|---------------------|--|
| Structural Analysis | Once the mapping is complete, a Structural analysis will need to be completed. |

| Outside | Section | Question | Response |
|--------------|--|--|---|
| Professional | Services Costs Outside Project Management Services | Do you require outside project management services? | Yes |
| | | Number of Hours | 2000 |
| | | Explanation | WBYD does not have sufficient resource capacity and expertise in house to handle all of the Project Management related tasks necessary to facility on- time completion of the station's build by the Construction Deadline |
| | 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 | No |
| Services | For Auxiliary Facility | N/A |
| | For Main Facility | N/A |
| | 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 | Yes |
| | Environmental Assessment | Yes |
| | ASR Modification | No |
| | FAA Consultation (including preparation of FAA Form 7460) | No |
| | 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 |
| RF Field Engineering Services | Comprehensive coverage verification via field study | Yes |
| | RF exposure measurements | Yes |
| | Additional Field Engineering Service | Yes |
| | Number of Days | 8 |

Justification

RF Project management of tower and transmitter installs

Outside Other Professional Services Expenses Not Listed

Professional Services Costsided.

| 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 | Yes |
| | | Non-zoning permits | Yes |
| | | 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

| Other Expenses | Other Expenses Not Listed | | |
|-------------------|---------------------------|----------------------------------|--|
| | Name | Description | |
| | Vehicle Rentals | Required for equipment delivery. | |

Transmitters

Cost Information

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 NV8605 | \$119,486.00 | \$14,286.00 | | \$0.00 | |
| Transmitter Retuning Cost | \$8,596.00 | \$8,596.00 | N/A | N/A | N/A |
| Other 4 kW mask filter | \$5,690.00 | \$5,690.00 | N/A | N/A | N/A |
| UHF and VHF - minor banding issues | \$105,200.00 | \$0.00 | N/A | N/A | N/A |
| Sub-total | \$119,486.00 | \$14,286.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$1,349,621.00 | \$1,188,278.92 | N/A | \$9,826.20 | N/A |

Components

Antennas

Cost Information

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- 12B BB C/P | \$33,030.00 | \$30,843.00 | | \$0.00 | |
| UHF - Lower Power Side Mount, Class A One Station antenna basic | \$26,300.00 | \$24,443.00 | Cost for H- pole and mounting equipment. 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 |
| Sub-total | \$33,030.00 | \$30,843.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$1,349,621.00 | \$1,188,278.92 | N/A | \$9,826.20 | N/A |

Components

Transmission Line

Cost Information

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 | \$23,600.00 | \$23,504.92 | | \$0.00 | |
| Flexible Air Transmission Line - dielectric, 3" | \$23,600.00 | \$23,504.92 | See attached Rohde & Schwarz quote. | N/A | N/A |
| Sub-total | \$23,600.00 | \$23,504.92 | N/A | \$0.00 | N/A |
| Total for all systems | \$1,349,621.00 | \$1,188,278.92 | N/A | \$9,826.20 | N/A |

Components

Tower Equipment and Rigging Costs

Cost Information

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 LTOWER | \$618,000.00 | \$588,000.00 | | \$0.00 | |
| Structural Analysis | \$19,000.00 | \$19,000.00 | N/A | N/A | N/A |
| Minor tower reinforcement /modifications | \$158,000.00 | \$150,000.00 | N/A | N/A | N/A |
| Structural engineering tower load study for a documented tower with candelabra | \$20,000.00 | \$19,000.00 | N/A | N/A | N/A |
| Complex Tower (includes, for example, those with candelabras and/or stacked antennas) | \$421,000.00 | \$400,000.00 | N/A | N/A | N/A |
| Sub-total | \$618,000.00 | \$588,000.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$1,349,621.00 | \$1,188,278.92 | N/A | \$9,826.20 | N/A |

Components

Outside Professional Services

Cost Information

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 | \$478,010.00 | \$454,750.00 | | \$9,826.20 | |
| Project management of the transition | \$316,000.00 | \$300,000.00 | N/A | \$5,676.20 | N/A |
| Additional Field Engineering Service, 8 Days | \$16,000.00 | \$16,000.00 | N/A | 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 |
| Prepare and or review reimbursement form | \$2,630.00 | \$2,500.00 | 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 |
| Perform engineering study for new channel assignment and antenna development | \$7,360.00 | \$7,000.00 | N/A | \$2,400.00 | N/A |

| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | \$3,155.00 | \$3,000.00 | N/A | \$1,750.00 | N/A |
|--|----------------|----------------|-----|------------|-----|
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | \$1,580.00 | \$1,500.00 | 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 | \$4,000.00 | N/A | N/A | N/A |
| NEPA Section 106 environmental review, if needed | \$6,310.00 | \$6,000.00 | N/A | N/A | N/A |
| Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet | \$10,520.00 | \$10,000.00 | N/A | N/A | N/A |
| Sub-total | \$478,010.00 | \$454,750.00 | N/A | \$9,826.20 | N/A |
| Total for all | \$1,349,621.00 | \$1,188,278.92 | N/A | \$9,826.20 | N/A |

Components

| Actual Information Description | File Name | |
|--------------------------------------|--|--|
| Project management of the transition | Component Description: | Technical , Consultation and Planning Services. Attended a Conference at Rohde and Schwartz on 3/6 /2017 concerning the 399 re-pack documentation. \$75.00 |
| | Component Description: Amount: | Project Management \$2,457.65 |
| | Component Description: Amount: | Project Management \$1,733.70 |
| | Component Description: | Technical , Consultation and Planning Services |
| | Amount: Component Description: Amount: | \$75.00 Re-pack consulting and updating \$75.00 |
| | Component Description: | Project Management \$1,109.85 |
| | | ¥1,100.00 |

| | Component Description: | Technical , Consultation and Planning Service |
|---|---------------------------|---|
| | | Review and |
| | | answering |
| | | technical question through a |
| | | telephone |
| | | conference call for |
| | | the follow up repo |
| | Amount: | for the Re-pack \$75.00 |
| | | <i><i><i></i></i></i> <i></i> |
| | Component Description: | Technical, |
| | | Consultation and |
| | Amount: | Planning Services \$75.00 |
| | | • • • • • |
| Additional Field | Information not provided. | |
| Engineering Service, 8 Days | | |
| RF Exposure Measurements | Information not provided. | |
| measurements | | |
| Comprehensive coverage | Information not provided. | |
| verification via field study, if needed | | |
| Prepare and or review | Information not provided. | |
| reimbursement form | | |
| Address transition timing | Information not provided. | |
| and coordination issues w/ other stations and wireless | | |
| | | |
| Perform engineering study for new channel | | |
| assignment and antenna | Component Description: | Interference study |
| development | Amount | of repack Ch 30 |
| | Amount: | \$2,400.00 |

| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | Component Description: Amount: | Preparation of engineering portion of initial FCC Application for Construction Permit for repack facility; e-filing \$1,750.00 |
|---|-----------------------------------|---|
| Prepare engineering section of FCC Form 2100 (main), License to Cover 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 | Information not provided. | |
| NEPA Section 106 environmental review, if needed | Information not provided. | |
| Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet | Information not provided. | |

Other Expenses

Cost Information

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 | \$77,495.00 | \$76,895.00 | oustineation | \$0.00 | Ustineation |
| DTV Medical Facility Notification | \$11,550.00 | \$11,000.00 | 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 |
| FCC Filing Fees - Form 2100 license to cover application | \$335.00 | \$325.00 | N/A | N/A | N/A |
| Local Zoning | \$5,000.00 | \$5,000.00 | N/A | N/A | N/A |
| Non-zoning permits | \$2,500.00 | \$2,500.00 | N/A | N/A | N/A |
| Disposal Costs (for equipment and other waste, net of any salvage value) | \$10,000.00 | \$10,000.00 | N/A | N/A | N/A |
| Equipment Delivery and Handling Charges | \$15,000.00 | \$15,000.00 | N/A | N/A | N/A |
| Equipment Storage | \$10,000.00 | \$10,000.00 | N/A | N/A | N/A |

| Develop and air announcement of upcoming channel change | \$15,000.00 | \$15,000.00 | N/A | N/A | N/A |
|--|----------------|----------------|-----|------------|-----|
| MVPD Notification of Channel Change | \$2,000.00 | \$2,000.00 | N/A | N/A | N/A |
| Vehicle Rentals | \$5,000.00 | \$5,000.00 | N/A | N/A | N/A |
| Sub-total | \$77,495.00 | \$76,895.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$1,349,621.00 | \$1,188,278.92 | N/A | \$9,826.20 | N/A |

Components

| Cost Information | Grand Total | | | |
|---------------------|-----------------------|---|----------------|-------------|
| | | Predetermined Cost Estimate Estimated Cost Act | | Actual Cost |
| | Total for all systems | \$1,349,621.00 | \$1,188,278.92 | \$9,826.20 |

| Reimbursem | envestialus | 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 | 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. | |
| | | 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. 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).
- 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. | Dawn Azua Production Manager 12/12/2018 |

| 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 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). | |
| | | 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. | |
| | | 2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct. | |
| | | 3. 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).
- 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.

| | The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission. 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. | |
|---------------|--|---------------------------------------|
| an au name | are, under penalty of perjury, that I am thorized representative of the above- d applicant for the Authorization(s) ied above. | Dawn Azua Production Manager |
| | | 12/12/2018 |

Attachments