



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **37101** | Service: **DTV** | Call **KETD** | Channel: **15 (UHF)**
ID: | Sign:
File **0000028706**
Number:
FRN: **0001529247** | Date **07/16**
Submitted: **/2019**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
KRCA LICENSE LLC, DEBTOR-IN-POSSESSION Doing Business As: KRCA LICENSE LLC, DEBTOR-IN- POSSESSION	1845 EMPIRE AVENUE BURBANK, CA 91504 United States	+1 (818) 729- 5300	kzeldin@lbimedia. com	Limited Liability Company

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
Samuel Hariton <i>Widely, Inc.</i>	4031 University Drive Fairfax, VA 22030 United States	+1 (339) 222- 8107	sam.hariton@widely. com

**Broadcaster
Information
and
Transition
Plan**

Question	Response
Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information.	Yes
Briefly describe transition plan	The plan is for KETD to replace the existing channel 45 system with a new channel 15 antenna, new 3-1/8" line and new transmitter. KETD will need to use an interim antenna and line in order to facilitate transition. See attached narrative statement.

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 and Type	Manufacturer	
	Model	UAX- 4000AT
	Year	2011
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	4.2 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	UAXTE-6R44
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	3.6 kW
	Justification for New Transmitter	Retuning requires replacing the mask filter and extensive testing. This cannot be completed in an overnight maintenance and would result in a prolonged outage. An interim transmitter would be needed during this time to ensure continuous broadcast.

**Primary
Transmitter**

Other Transmitter Costs

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	Yes
	Power	150 kVA
	Rigid Conduit and Wiring	No
	Size	N/A
	Length	N/A
	Other Electrical Service	Yes
	Description	The new main 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?	Yes
	Type	Cooling Only
	Size	10 tons
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
Channel 14 Costs	Is an RF Consulting Engineer needed?	N/A

Is a channel 14 Mask Filer needed?	N/A
Is additional field engineering time needed?	N/A
Number of Days	N/A

**Primary
Transmitter**

Other Transmitter Cost Not Listed

Name	Description
4 Port Switch	A 4 port switch is necessary to allow switching from the interim antenna to the new main antenna.
Internal Transmission Line	Internal Transmission Line

Antennas

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

**Primary
Antenna**

Existing Antenna Information

Section	Question	Response
Existing Antenna Description	Type of change	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?	Yes
Existing Antenna Manufacturer and Type	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	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)	100.0 kW

Manufacturer	
Model	AL12M-45- PM
Year	2011

**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
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	Yes
New Antenna Manufacturer and Types	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	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)	200.0 kW
Manufacturer		

Model	TFU-12DSB-F/VP
Year	2017
Justification for New Antenna	The existing antenna is not capable of supporting the new channel and will need to be replaced.

Primary Antenna

Other Antenna Costs

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	
	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
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Broadband
	Feed Line Size	3 1/8 inches inches
Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	Yes

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

**Primary
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
Existing Transmission Line Description	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
Existing Transmission Line Manufacturer and Type	Manufacturer	
	Type	Flexible Air
	Diameter	3 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	100 feet per run

**Primary
Transmission
Line**

New Transmission Line

Section	Question	Response
<p>New Transmission Line Costs</p>	Use	Primary (Main)
	Description of Use	N/A
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Flexible Air
	Diameter	3 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	100 feet per run
	Justification for New Transmission Line	<p>New primary antenna will be placed at the same height but on opposite side of tower from existing main. This tower is shared so the station's placement is constrained by the tower owner.</p>

Primary **Other Transmission Line Expenses Not Listed**
Transmission information not provided.
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?	Terrain Constrained
	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?	No
	Is tower compliant with Rev G?	Unknown
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1023484
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	39° 40' 17.4" N-
	Longitude (NAD83)	105° 13' 08.0" W-
	Overall Structure Height	273.95 feet
	Support Structure Height	271.98 feet

Ground Elevation Above Mean Sea Level (AMSL)	7685.60 feet
Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	Bear Creek Development Corporation
Date Constructed	11/08/1988

**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
26929	KQMT	FM
57219	KCEC	DTV
14040	KRMA-TV	DTV
35574	KQKS	FM

Other Types of Users

Users
Fire
Denver Water
County Denver
Civil Air Ptrl
City Denver
Police
West Metro Fire

**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	Terrain constrained
Helicopter Services Required	Are helicopter services required?	No

**Primary
Tower**

Other Tower Expenses Not Listed

Name	Description
Structural Analysis	After the mapping is complete, a structural analysis will need to be run.

Outside Professional Services Costs

Section	Question	Response
<p>Outside Project Management Services</p>	<p>Do you require outside project management services?</p>	<p>Yes</p>
	<p>Number of Hours</p>	<p>712</p>
	<p>Explanation</p>	<p>KETD 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.</p>
<p>Outside RF consulting Engineering Services</p>	<p>Perform engineering study for new channel assignment and antenna development</p>	<p>Yes</p>
	<p>Prepare engineering section of Form FCC Construction Permit Application</p>	<p>Yes</p>
	<p>For Auxiliary Facility</p>	<p>No</p>
	<p>For Main Facility</p>	<p>Yes</p>
	<p>Prepare engineering section of Form FCC License to Cover Application</p>	<p>Yes</p>
	<p>For Auxiliary Facility</p>	<p>No</p>
	<p>For Main Facility</p>	<p>Yes</p>
	<p>Prepare request for Special Temporary Authority</p>	<p>Yes</p>
	<p>Quantity</p>	<p>2</p>

	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
Attorney and Other Outside Consulting Services	Prepare and file Form FCC Construction Permit Application	Yes
	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	Yes
	Environmental Assessment	Yes
	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	
RF Field Engineering Services	Comprehensive coverage verification via field study	Yes
	RF exposure measurements	Yes
	Additional Field Engineering Service	Yes
	Number of Days	10

Justification	Supervision and inspection of work completed
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**Outside
Professional
Services
Costs**

Other Professional Services Expenses Not Listed

Information not provided.

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	Yes
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?	No
	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

Information not provided.

Cost Information

Transmitters

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Transmitter UAXTE-6R44	\$349,404.95	\$346,254.95		\$154,254.06	
Internal Transmission Line	<i>\$3,954.95</i>	\$3,954.95	Dielectric Quote CLE 084 RevB	N/A	N/A
4 Port Switch	<i>\$16,000.00</i>	\$16,000.00	N/A	N/A	N/A
10 Ton system	\$38,900.00	\$37,000.00	N/A	N/A	N/A
Other Electrical Service: The new main 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.	<i>\$40,000.00</i>	\$40,000.00	N/A	N/A	N/A
Transformer 3 phase/480v - 150 KVA	\$25,550.00	\$24,300.00	N/A	\$1,981.33	N/A
UHF - Air Cooled Solid State Transmitter 3.6 kW	<i>\$225,000.00</i>	\$225,000.00	Per GatesAir Quote Q-79399 + shipping and taxes	\$152,272.73	N/A

Sub-total	\$349,404.95	\$346,254.95	N/A	\$154,254.06	N/A
Total for all systems	\$1,613,450.95	\$1,370,465.65	N/A	\$174,234.61	N/A

Components

Actual Information Description	File Name
Internal Transmission Line	Information not provided.
4 Port Switch	Information not provided.
10 Ton system	Information not provided.
Other Electrical Service: The new main 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.
Transformer 3 phase/480v - 150 KVA	<p>Component Description: KETD-110-1st Primary Transmitter - 3 Phase, 480 V, 150 KVA Transformer</p> <p>Amount: \$1,981.33</p>
UHF - Air Cooled Solid State Transmitter 3.6 kW	<p>Component Description: UAXTE-6R44 Transmitter</p> <p>Amount: \$152,272.73</p>

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 TFU-12DSB-F/VP	\$266,220.00	\$73,970.00		\$0.00	
UHF - Lower Power Side Mount, One station antenna -- 200-500 kW, elliptically or circularly polarized	\$227,000.00	\$39,885.00	Please see attached Dielectric Quote CLE084RevB and Invoice MAN01020. Cost of antenna plus \$5,670.00 for freight	N/A	N/A
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$22,000.00	N/A	N/A	N/A
Elbow complex, broadband, at antenna input, per 3 1/8. feedline (if needed)	\$9,340.00	\$5,685.00	Please see attached Dielectric Quote CLE084 Rev B and invoice MAN01020	N/A	N/A

Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
Sub-total	\$266,220.00	\$73,970.00	N/A	\$0.00	N/A
Total for all systems	\$1,613,450.95	\$1,370,465.65	N/A	\$174,234.61	N/A

Components

Information not provided.

**Cost
Information**

Transmission Line

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Transmission Line	\$5,900.00	\$4,105.70		\$0.00	
Flexible Air Transmission Line - dielectric, 3"	\$5,900.00	\$4,105.70	Dielectric quote CLE084RevB; 3" Flexline plus gassing kit	N/A	N/A
Sub-total	\$5,900.00	\$4,105.70	N/A	\$0.00	N/A
Total for all systems	\$1,613,450.95	\$1,370,465.65	N/A	\$174,234.61	N/A

Components

Information not provided.

Cost Information

Tower Equipment and Rigging Costs

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Tower TOWER	\$617,300.00	\$587,000.00		\$0.00	
Structural Analysis	<i>\$12,000.00</i>	\$12,000.00	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
Minor tower reinforcement /modifications	\$158,000.00	\$150,000.00	N/A	N/A	N/A
Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study	\$26,300.00	\$25,000.00	N/A	N/A	N/A
Sub-total	\$617,300.00	\$587,000.00	N/A	\$0.00	N/A
Total for all systems	\$1,613,450.95	\$1,370,465.65	N/A	\$174,234.61	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	\$299,436.00	\$284,550.00		\$19,834.30	
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	\$351.00	N/A
Project management of the transition	\$112,496.00	\$106,800.00	N/A	\$17,166.70	N/A
Additional Field Engineering Service, 10 Days	<i>\$20,000.00</i>	\$20,000.00	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
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

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
NEPA Section 106 environmental review, if needed	\$6,310.00	\$6,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$7,360.00	\$7,000.00	N/A	N/A	N/A
Attorney Fees - Negotiation of lease and other matters for shared locations	\$4,210.00	\$4,000.00	N/A	\$2,316.60	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	N/A	N/A
Prepare request for Special Temporary Authorization	\$4,100.00	\$3,000.00	N/A	N/A	N/A

Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	N/A	N/A
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A	N/A	N/A
ASR modification (prepare FCC Form 854)	\$2,105.00	\$2,000.00	N/A	N/A	N/A
Sub-total	\$299,436.00	\$284,550.00	N/A	\$19,834.30	N/A
Total for all systems	\$1,613,450.95	\$1,370,465.65	N/A	\$174,234.61	N/A

Components

Actual Information	
Description	File Name

Prepare and or review reimbursement form	<table> <tr> <td data-bbox="699 91 1145 309">Component Description:</td> <td data-bbox="1145 91 1428 309">Legal Services</td> </tr> <tr> <td data-bbox="699 309 1145 309">Amount:</td> <td data-bbox="1145 309 1428 309">\$351.00</td> </tr> </table>	Component Description:	Legal Services	Amount:	\$351.00																												
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Project management of the transition	<table> <tr> <td data-bbox="699 309 1145 488">Component Description:</td> <td data-bbox="1145 309 1428 488">Project Management</td> </tr> <tr> <td data-bbox="699 488 1145 488">Amount:</td> <td data-bbox="1145 488 1428 488">\$1,208.35</td> </tr> <tr> <td data-bbox="699 488 1145 667">Component Description:</td> <td data-bbox="1145 488 1428 667">Project Management</td> </tr> <tr> <td data-bbox="699 667 1145 667">Amount:</td> <td data-bbox="1145 667 1428 667">\$1,843.05</td> </tr> <tr> <td data-bbox="699 667 1145 846">Component Description:</td> <td data-bbox="1145 667 1428 846">Project Management</td> </tr> <tr> <td data-bbox="699 846 1145 846">Amount:</td> <td data-bbox="1145 846 1428 846">\$4,533.60</td> </tr> <tr> <td data-bbox="699 846 1145 1025">Component Description:</td> <td data-bbox="1145 846 1428 1025">Project Management</td> </tr> <tr> <td data-bbox="699 1025 1145 1025">Amount:</td> <td data-bbox="1145 1025 1428 1025">\$994.50</td> </tr> <tr> <td data-bbox="699 1025 1145 1205">Component Description:</td> <td data-bbox="1145 1025 1428 1205">Project Management</td> </tr> <tr> <td data-bbox="699 1205 1145 1205">Amount:</td> <td data-bbox="1145 1205 1428 1205">\$1,259.55</td> </tr> <tr> <td data-bbox="699 1205 1145 1384">Component Description:</td> <td data-bbox="1145 1205 1428 1384">Project Management</td> </tr> <tr> <td data-bbox="699 1384 1145 1384">Amount:</td> <td data-bbox="1145 1384 1428 1384">\$1,394.00</td> </tr> <tr> <td data-bbox="699 1384 1145 1563">Component Description:</td> <td data-bbox="1145 1384 1428 1563">Project Management</td> </tr> <tr> <td data-bbox="699 1563 1145 1563">Amount:</td> <td data-bbox="1145 1563 1428 1563">\$1,814.40</td> </tr> <tr> <td data-bbox="699 1563 1145 1742">Component Description:</td> <td data-bbox="1145 1563 1428 1742">Project Management</td> </tr> <tr> <td data-bbox="699 1742 1145 1742">Amount:</td> <td data-bbox="1145 1742 1428 1742">\$2,200.55</td> </tr> </table>	Component Description:	Project Management	Amount:	\$1,208.35	Component Description:	Project Management	Amount:	\$1,843.05	Component Description:	Project Management	Amount:	\$4,533.60	Component Description:	Project Management	Amount:	\$994.50	Component Description:	Project Management	Amount:	\$1,259.55	Component Description:	Project Management	Amount:	\$1,394.00	Component Description:	Project Management	Amount:	\$1,814.40	Component Description:	Project Management	Amount:	\$2,200.55
Component Description:	Project Management																																
Amount:	\$1,208.35																																
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	<p>Component Description: Project Management</p> <p>Amount: \$2,202.80</p> <p>Component Description: Project Management</p> <p>Amount: \$1,865.70</p> <p>Component Description: Project Management</p> <p>Amount: \$2,383.80</p>
Additional Field Engineering Service, 10 Days	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.
Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet	Information not provided.
NEPA Section 106 environmental review, if needed	Information not provided.
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.

<p>Attorney Fees - Negotiation of lease and other matters for shared locations</p>	<p>Component Description: Legal services Amount: \$351.00</p> <p>Component Description: Total Professional Services Amount: \$1,965.60</p>
<p>Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application</p>	<p>Information not provided.</p>
<p>Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application</p>	<p>Information not provided.</p>
<p>Prepare request for Special Temporary Authorization</p>	<p>Information not provided.</p>
<p>Prepare engineering section of FCC Form 2100 (main), License to Cover Application</p>	<p>Information not provided.</p>
<p>Prepare engineering section of FCC Form 2100 (main), Construction Permit Application</p>	<p>Information not provided.</p>
<p>Perform engineering study for new channel assignment and antenna development</p>	<p>Information not provided.</p>
<p>Address transition timing and coordination issues w/ other stations and wireless</p>	<p>Information not provided.</p>
<p>ASR modification (prepare FCC Form 854)</p>	<p>Information not provided.</p>

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
Other Expenses	\$75,190.00	\$74,585.00		\$146.25	
MVPD Notification of Channel Change	<i>\$2,000.00</i>	\$2,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$15,000.00</i>	\$15,000.00	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
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
Non-zoning permits	<i>\$5,000.00</i>	\$5,000.00	N/A	N/A	N/A
Local Zoning	<i>\$5,000.00</i>	\$5,000.00	N/A	N/A	N/A
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	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
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	\$146.25	N/A
Sub-total	\$75,190.00	\$74,585.00	N/A	\$146.25	N/A
Total for all systems	\$1,613,450.95	\$1,370,465.65	N/A	\$174,234.61	N/A

Components

Actual Information	
Description	File Name
MVPD Notification of Channel Change	Information not provided.
Develop and air announcement of upcoming channel change	Information not provided.
Equipment Delivery and Handling Charges	Information not provided.
Disposal Costs (for equipment and other waste, net of any salvage value)	Information not provided.
Non-zoning permits	Information not provided.
Local Zoning	Information not provided.
FCC Filing Fees - Special Temporary Authorization request	Information not provided.
FCC Filing Fees - Form 2100 license to cover application	Information not provided.

DTV Medical Facility Notification	Information not provided.				
FCC Filing Fees - Form 2100 minor change CP application	<table><tr><td data-bbox="721 210 1157 403">Component Description:</td><td data-bbox="1157 210 1433 403">KETD, Castle Rock, CO Channel Repack</td></tr><tr><td data-bbox="721 403 1157 504">Amount:</td><td data-bbox="1157 403 1433 504">\$146.25</td></tr></table>	Component Description:	KETD, Castle Rock, CO Channel Repack	Amount:	\$146.25
Component Description:	KETD, Castle Rock, CO Channel Repack				
Amount:	\$146.25				

Cost Information **Grand Total**

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$1,613,450.95	\$1,370,465.65	\$174,234.61

Reimbursement Status

Question	Response
The facility has ceased operating on its pre-auction channel.	No
Construction of final facilities or all necessary modifications are complete.	No
All receipts for reimbursement have been submitted no further costs are expected to be incurred. Note this will lock the Form 399 from further editing and begin close-out procedures with the Fund Administrator.	No

Certification	Section	Question	Response
	<p>Submission of Estimated Expenses Statements</p>	<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="758 772 1061 1176">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 data-bbox="758 1198 1045 1444">2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations. <li data-bbox="758 1467 1061 1758">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 above-named applicant for the Authorization(s) specified above.

**Michael
Everett
Todd**
*Chief
Engineer*

07/16/2019

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

**Michael
Everett
Todd**
*Chief
Engineer*

07/16/2019

Attachments