

Federal Communications Commission

### (REFERENCE COPY - Not for submission)

## FCC Form 399: Reimbursement Request

Facility	68395	Service: DCA	Call	WBYD-CD	Channel: 19 (UHF)
ID:	1		Sign:		
File	00000	28546			
Number:					
FRN: <b>00</b> :	32881088	Date	07/03		
		Submitted:	/2019		

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

#### Applicant Information

Applicant	Address	Phone	Email	Applicant Type
FIFTH STREET ENTERPRISES, LLC Doing Business As: FIFTH STREET ENTERPRISES, LLC	RON BRUNO 975 Greentree Rd. Pittsburgh, PA 15220 United States	+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

Information not provided.

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

#### Other Types of Users

Users

WQMA386

KA2208

W244CU 139106

W271CW 158245

WQGN429

WIIC-LD 68411

WPDN-LD 68062

WPPQ574

WQBT460

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 Angel State Not Listed

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

Outside	Section	Question	Response
Professional	I 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	
UHF and VHF - minor banding issues	\$105,200.00	\$0.00	N/A	N/A	N/A
Other 4 kW mask filter	\$5,690.00	\$5,690.00	N/A	N/A	N/A
Transmitter Retuning Cost	\$8,596.00	\$8,596.00	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	\$46,261.81	N/A

#### Components

Information not provided.

#### 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		\$371.00	
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$371.00	N/A
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
Sub-total	\$33,030.00	\$30,843.00	N/A	\$371.00	N/A
Total for all systems	\$1,349,621.00	\$1,188,278.92	N/A	\$46,261.81	N/A

#### Components

Actual Information Description	File Name	
Sweep test of existing antenna	Component Description: Amount:	Sweep Kathrein antenna for quality \$371.00
UHF - Lower Power Side Mount, Class A One Station antenna basic	Information not provided.	

#### **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	\$46,261.81	N/A

#### Components

Information not provided.

#### **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	\$46,261.81	N/A

#### Components

Information not provided.

#### **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		\$34,958.81	
NEPA Section 106 environmental review, if needed	\$6,310.00	\$6,000.00	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	N/A	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
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	\$0.00	N/A
Project management of the transition	\$316,000.00	\$300,000.00	N/A	\$30,808.81	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
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
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	N/A	N/A	N/A
RF Exposure Measurements	\$21,050.00	\$20,000.00	N/A	N/A	N/A
Additional Field Engineering Service, 8 Days	\$16,000.00	\$16,000.00	N/A	N/A	N/A
Sub-total	\$478,010.00	\$454,750.00	N/A	\$34,958.81	N/A
Total for all systems	\$1,349,621.00	\$1,188,278.92	N/A	\$46,261.81	N/A

#### Components

Actual Information Description	File Name	
NEPA Section 106 environmental review, if needed	Information not provided.	
Attorney Fees - Negotiation of lease and other matters for shared locations	Information not provided.	
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.	
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.	
Project management of the transition	Component Description: Amount:	Re-pack consulting and updating \$75.00
	Component Description: Amount:	Project Management \$2,723.45
	Component Description: Amount:	Project Management \$1,414.15
	Component Description: Amount:	Project Management \$1,450.85
	Component Description: Amount:	Project Management \$2,204.70

Component Description: Amount:	Project Management - June 2019 \$1,087.50
Component Description: Amount:	Project Management - 7-3- 19 \$353.94
Component Description: Amount:	Project Management - WBYD - June 11- 13 2019 \$340.32
Component Description: Amount:	Technical , Consultation and Planning Services \$75.00
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 \$1,855.90
Component Description: Amount:	Project Management \$1,582.05

Component Description: Amount:	Project Management \$4,287.60
Component Description: Amount:	Project Management - April 2019 \$1,597.50
Component Description: Amount:	Project Management \$1,397.30
Component Description: Amount:	Project Management \$1,912.50
Component Description:	Technical , Consultation and Planning Services. Review and answering technical questions through a telephone conference call for the follow up report for the Re-pack
Amount:	\$75.00
Component Description: Amount:	Project Management \$1,109.85
Component Description: Amount:	Project Management \$1,733.70

	Component Description: Amount:	Project Management \$2,457.65
	Component Description:	Technical , Consultation and
	Amount:	Planning Services \$75.00
	Component Description:	Project
	Amount:	Management \$1,724.85
	Component Description:	Project Management - Ma 2019
	Amount:	\$1,200.00
Prepare and or review reimbursement form	Information not provided.	
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.	
Perform engineering study for new channel		
assignment and antenna development	Component Description:	Interference study of repack Ch 30
·	Amount:	\$2,400.00
Prepare engineering section of FCC Form 2100 (main), Construction Permit	Component Description:	Preparation of
Application		engineering portio of initial FCC Application for
		Construction Permit for repack
	Amount:	facility; e-filing \$1,750.00

Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet	Information not provided.
Comprehensive coverage verification via field study, if needed	Information not provided.
RF Exposure Measurements	Information not provided.
Additional Field Engineering Service, 8 Days	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		\$10,932.00	
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	\$10,932.00	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	\$10,932.00	N/A
Total for all systems	\$1,349,621.00	\$1,188,278.92	N/A	\$46,261.81	N/A

#### Components

Actual Information Description	File Name	
DTV Medical Facility Notification	Component Description: Amount:	DTV Notification \$6,932.00
	Component Description:	DTV Notification - Revised estiamte attached with invoice to cover the difference between 1st invoice and this one. Additional work was completed after 1st invoice submitted, therefore revising the estimate. \$4,000.00
FCC Filing Fees - Form 2100 minor change CP application	Information not provided.	

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

Cost Information	Grand Total					
		Predetermined Cost Estimate	Estimated Cost	Actual Cost		
	Total for all systems	\$1,349,621.00	\$1,188,278.92	\$46,261.81		

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

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.	
		<ol> <li>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>The above-named</li> </ol>	
		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 07/03/2019

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).	
		<ol> <li>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> </ol>	
		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. are, under penalty of perjury, that I am thorized representative of the above-	Dawn Azua
d applicant for the Authorization(s) ied above.	Production Manager 07/03/2019

### Attachments