

Federal Communications Commission

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

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Facility	18267	Service: DTV	Call	WKOP-TV	Channel: 29 (UHF)
ID:			Sign:		
File	00000	25313			
Number:					
FRN: 000	01773852	Date	10/11		
		Submitted:	/2019		

Applicant Name, Type, and Contact Information

Information

Applicant	Address	Phone	Email	Applicant Type
EAST TENNESSEE PUBLIC COMMUNICATIONS CORP. Doing Business As: EAST TENNESSEE PUBLIC COMMUNICATIONS CORP.	Tony Poole 1611 E. MAGNOLIA AVENUE KNOXVILLE, TN 37917 United States	+1 (865) 595- 0220	tony@easttennesseepbs. org	Not-for- Profit

Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

Preparer Ontact Name and Information

Contact Information	Applicant	Address	Phone	Email
	Robert Gehman ConsultingEngineer Kessler and Gehman Associates, Inc.	Robert Gehman 507 NW 60 Street Suite D Gainesville, FL 32607 United States	+1 (352) 332-3157	bob@kesslerandgehman. com

Broadcaster	Question	Response
Information and Transition Plan	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	Replace transmitter using existing antenna and line.

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	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	Diamond			
		Year	2007			
		Туре	Solid State			
		Solid State Cooling	Air Cooled			
		Solid State Power Capacity	10 kW			

Existing Transmitter Information

Primary	New Transmitter Costs					
Transmitter	Section	Question	Response			
	New Transmitter	Use	Primary (Main)			
		Change Type	Purchase New			
		Is this a request for upgraded equipment?	Yes			
		Manufacturer				
		Model	EC712HP-BB			
		Transmitter Type	Solid State			
		Solid State Cooling	Liquid Cooled			
		Solid State Power capacity	10 kW			
		Justification for New Transmitter	The manufacturer of the existing transmitter advises that the transmitter cannot be retuned to the assigned channel. See attachment.			

Primary	Other Transmitter Costs					
Transmitter	Section	Question	Response			
	Electrical Service	Service Entrance (3 phases 800A 208V)	No			
		Switchgear (industrial 800 amp)	Yes			
		Transformer (480V)	Yes			
		Power	150 kVA			
		Rigid Conduit and Wiring	Yes			

	Size	3 inches
	Length	100.0 feet
	Other Electrical Service	No
	Description	N/A
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

Primary	Other Transmitter Cost Not Listed			
Transmitter	Name	Description		
	Additional Interior RF System	Interior RF System Existing Transmitter to Interim Transmission line		
	Standby Exciter and Switch	Standby Exciter with Automatic Change Over Switch		

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

Existing Antenna Information

Primary	Existing Antenna Information			
Antenna	Section	Question	Response	
	Existing Antenna Description	Type of change	Retune Existing	
		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 in operating condition? Is antenna located on or in close proximity to an antenna farm?	Yes	
	Existing Antenna Manufacturer and Type	Class	Full Power	
		Mounting	Top Mount	
		Antenna position in stack	Not in Stack	
		Polarization	Horizontal	
		Туре	Slotted Coaxial	
		Number of Stations Supported	N/A	
		Number of Panels	N/A	
		Design power capacity in use	N/A	
		Lower Limit	N/A	

Upper Limit	N/A
Other Antenna Type	N/A
ERP: (Effective Radiated Power)	100.0 kW
Manufacturer	Andrew
Model	ABBP16H3- HTO5-17 /30H
Year	2007

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

Facility ID	Call Sign
35908	WVLT-TV

Primary Adjustment to Existing Antenna

Section	Question	Response
Sweep Test of Existing Antenna	Do you need a sweep test of existing antenna?	Yes

Primary Other Antenna Costs

Antenna

Antenna

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	No
	Туре	
	Number of channels supported	N/A
	Frequencies of channels supported	N/A
	Frequency	-

Other Antenna Cost Not Listed

Primary Antenna

Name	Description
Rigging	Rigging to replace and/or retune the elbow complex
RF System Test	RF System Test
New Combiner	New Combiner
Combiner Installation	Combiner Installation
Combiner Interconnect parts	Combiner Interconnect parts

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

Existing Transmission Line Primary Existing Transmission

ssion	Section	Question	Response
	Existing Transmission Line Description	Type of change	Utilize Existing
		Use	Primary (Main)
		Description of Use	N/A
		Ownership	Owned
		Owner	N/A
		Site	N/A
		Is the existing transmission line shared with another station or stations?	No
		Is Transmission Line in operating condition?	Yes
	Existing Transmission	Manufacturer	Dielectric
	Line Manufacturer and Type	Туре	Rigid
		Diameter	8 3/16 inches
		Other Diameter	N/A
		Segment Length	Broadband
		Other Segment Length	N/A
		Number of parallel runs	1
		Length	1450 feet per run

Primary	Other Transmission Line Expenses Not Listed			
Transmissio	n Line	Description		
	Sweep Tests	Sweep tests associated with the elbow complex tuning or replacement with the		

assistance of a rigger

Tower	Section	Question	Response
Equipment And Rigging Costs	Tower Equipment or Rigging Costs Changes	Do you have tower equipment or rigging costs changes?	No

Outside	Section	Question	Response
Professional	Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
		Number of Hours	34
		Explanation	Fewer Project Management "PM" tasks are required & Other Engineering Services "OES" are required, therefore the PM total has been reduced to 34 hrs (\$5,100 at \$150/hr), & a new OES category has been created & funded with the money removed from PM.
	Outside RF consulting Engineering Services	Perform engineering study for new channel assignment and antenna development	Yes
		Prepare engineering section of Form FCC Construction Permit Application	Yes
		For Auxiliary Facility	No
		For Main Facility	Yes

	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	No
	Quantity	N/A
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
Attorney and Other Outside Consulting	Prepare and file Form FCC Construction Permit Application	Yes
Services	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	No
	Quantity	N/A
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	No
	FAA Consultation (including preparation of FAA Form 7460)	No
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	Yes

	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
RF Field Engineering Services	Comprehensive coverage verification via field study	Yes
	RF exposure measurements	Yes
	Additional Field Engineering Service	Yes
	Number of Days	9
	Justification	It will be necessary to survey the site, plan the equipment, develop specifications for purchasing, and oversee multiple vendor RF projects. Station does not have available personnel or personnel trained in such services.

Outside	Other Professional Services Expenses Not Listed
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Professional	Services Costs	Description	
	Other Engineering Services	Fewer Project Management "PM" tasks are required & Other Engineering Services "OES" are required, therefore the PM total has been reduced to 34 hrs (\$5,100 at \$150 /hr), & a new OES category has been created & funded with the money removed from PM.	

Other	Section	Question	Response
Expenses	AM Pattern Disturbance	Is an Impact Study needed?	Yes
		Is Remediation needed?	Yes
	Facility Expenses	Name	N/A
		Other Distributed Transmission System Expenses Not listed	N/A
		Name	N/A
		Is Notification of a Medical Facility required as a result of DTV broadcasting?	Yes
	Permit and Filing Costs	Local Zoning	No
		Non-zoning permits	No
		BLM or NFS Coordination	No
		FCC Construction Permit Minor Change	No
		FCC License to Cover Application	No
		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?	No
		Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	No
		Does this relocation require MVPD Notification of a Channel Change?	Yes

Other Expenses Not Listed

Expenses Information not provided.

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 EC712HP-BB	\$728,450.00	\$539,229.00		\$308,729.00	
UHF - Liquid Cooled Solid State Transmitter 8.2 - 13 kW	\$494,500.00	\$308,729.00	N/A	\$308,729.00	N/A
Switchgear - industrial 800 amp	\$38,200.00	\$36,300.00	N/A	N/A	N/A
Transformer 3 phase /480v - 150 KVA	\$25,550.00	\$24,300.00	N/A	N/A	N/A
3" Rigid Conduit and Wiring (Cost per foot)	\$5,200.00	\$4,900.00	N/A	N/A	N/A
Additional Interior RF System	\$140,000.00	\$140,000.00	N/A	N/A	N/A
Standby Exciter and Switch	\$25,000.00	\$25,000.00	N/A	N/A	N/A
Sub-total	\$728,450.00	\$539,229.00	N/A	\$308,729.00	N/A
Total for all systems	\$1,071,322.00	\$873,359.00	N/A	\$416,067.44	N/A

Actual Information	
Description	File Name

UHF - Liquid Cooled Solid State Transmitter 8.2 - 13		
kW	Component Description:	Comark 12101-3A
	Amount:	v190612jgv2 \$114,641.43
	Component Description:	Comark inv #12101
		B Primary transmitter pmt 1
		UL20190208jgv2
	Amount:	\$194,087.57
Switchgear - industrial 800 amp	Information not provided.	
Transformer 3 phase/480v - 150 KVA	Information not provided.	
3" Rigid Conduit and Wiring (Cost per foot)	Information not provided.	
Additional Interior RF System	Information not provided.	
Standby Exciter and Switch	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 ABBP16H3- HTO5-17/30H	\$98,630.00	\$96,200.00		\$63,200.00	
Combiner Interconnect parts	\$5,000.00	\$5,000.00	See attached American Tower LLC invoice 460218498	\$5,000.00	N/A
Combiner Installation	\$11,200.00	\$11,200.00	See attached American Tower LLC invoice 460218498	\$11,200.00	N/A
Rigging	\$20,000.00	\$20,000.00	N/A	N/A	N/A
Elbow complex, broadband, at antenna input, per 6 1 /8. feedline (if needed)	\$13,700.00	\$13,000.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$5,000.00	See attached American Tower LLC invoice 460218498	\$5,000.00	N/A
New Combiner	\$37,000.00	\$37,000.00	See attached American Tower LLC invoice 460218498	\$37,000.00	N/A

RF System Test	\$5,000.00	\$5,000.00	See attached American Tower LLC invoice 460218498	\$5,000.00	N/A
Sub-total	\$98,630.00	\$96,200.00	N/A	\$63,200.00	N/A
Total for all systems	\$1,071,322.00	\$873,359.00	N/A	\$416,067.44	N/A

Actual Information Description	File Name	
Combiner Interconnect parts	Component Description: Amount:	Am Twr 460218498 v190827jgv1 \$5,000.00
Combiner Installation	Component Description: Amount:	Am Twr 460218498 v190827jgv1 \$11,200.00
Rigging	Information not provided.	
Elbow complex, broadband, at antenna input, per 6 1/8. feedline (if needed)	Information not provided.	
Sweep test of existing antenna	Component Description: Amount:	Am Twr 460218498 v190827jgv1 \$5,000.00

New Combiner		
	Component Description:	Am Twr
		460218498
		v190827jgv1
	Amount:	\$37,000.00
RF System Test		
	Component Description:	Am Twr
		460218498
		v190827jgv1
	Amount:	\$5,000.00

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	\$6,400.00	\$6,400.00		\$0.00	
Sweep Tests	\$6,400.00	\$6,400.00	N/A	N/A	N/A
Sub-total	\$6,400.00	\$6,400.00	N/A	\$0.00	N/A
Total for all systems	\$1,071,322.00	\$873,359.00	N/A	\$416,067.44	N/A

Components

Information not provided.

Cost Tower Equipment and Rigging Costs

Information 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	\$175,352.00	\$171,030.00		\$38,963.44	
Other Engineering Services	\$21,750.00	\$21,750.00	N/A	\$1,883.00	N/A
Additional Field Engineering Service, 9 Days	\$18,000.00	\$18,000.00	N/A	\$2,986.94	Additional Fi Engineerin Service, on- equip invent and facilitit survey for p trans planni WKOP
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	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

Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$397.50	Attorney section of F FCC Constructi Permit Applicatio Main Facility WKOP
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	\$2,000.00	Engineeri section of F FCC Construct Permit Applicatio Main Facilit WKOP
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$8,750.00	See attached American Tower LLC invoice 460218498 and Kessler and Gehman invoice 950-02	\$8,750.00	Engineeri study for r channe assignment antenna developm for WKC
Project management of the transition	\$5,372.00	\$16,280.00	See attached American Tower LLC invoice 460218498 and various Kessler and Gehman invoices	\$16,280.00	Outside Pro Managem Services, F 387 Progro Report

Prepare and or review reimbursement form	\$2,630.00	\$10,000.00	The Estimated Cost shown is to cover the expense of having Actual Cost invoices prepared and submitted into this 399 Reimbursement Form.	\$6,666.00	Prepare o Review FC Form 399 f Reimburserr for WKOF
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A	N/A	N/A
RF Exposure Measurements	\$21,050.00	\$2,000.00	N/A	N/A	N/A
Sub-total	\$175,352.00	\$171,030.00	N/A	\$38,963.44	N/A
Total for all systems	\$1,071,322.00	\$873,359.00	N/A	\$416,067.44	N/A

Actual Information	
Description	File Name

Component Description:	KGA inv #950-22
Component Description:	KGA inv #950-22
	Actual Cost invs
	181130-190119
	UL20190201jgv1
Amount:	\$575.00
Component Description:	KGA 950-47
	v191011jgv1
Amount:	\$75.00
Component Description:	KGA 950-35
	v190702jgv1
Amount:	\$325.00
	÷==0.00
Component Description	KGA inv #950-20
	Actual Cost invoice
	Nov 2018
	UL20190117jgv1
Amount:	\$450.50
Component Description:	KGA inv #950-26
	Actual Cost invs
	190110-190131
	UL20190228jgv1
Amount:	\$325.00
Component Description:	KGA inv #950-21
	RF Design and
	calcs
	UL20190117jgv1
Amount:	\$132.50
Component Description:	KGA inv #950-01
	Facility Elec Surve
	and Condition
	Assessment
	UL20181130jgv1
The second se	\$2,986.94
	Component Description: Amount: Component Description: Amount: Component Description: Amount: Component Description:

Comprehensive coverage verification via field study, if needed	Information not provided.	
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.	
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Component Description:	Attorney section of Form FCC Construction Permi Application Main Facility for WKOP
	Amount:	\$360.00
	Component Description:	Attorney section of Form FCC Construction Permi Application Main
	Amount:	Facility \$37.50
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.	
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Component Description:	Engineering sectior of Form FCC Construction Permi
	Amount:	Application Main Facility for WKOP \$2,000.00
	Component Description:	CP Application for Main Facility

Perform engineering study for new channel assignment and antenna development	Component Description: Amount:	Am Twr 460218498 v190827jgv1 \$5,000.00
	Component Description:	Engineering study for new channel assignment and antenna development for WKOP \$3,750.00
	Component Description:	Engineering study for new channel assignment and antenna development
	Amount:	\$3,750.00
Project management of the transition	Component Description:	Am Twr 460218498
	Amount:	v190827jgv1 \$9,480.00
	Component Description: Amount:	KGA 950-33 v190702jgv1 \$150.00
	Component Description:	KGA 950-41 v191011jgv1
	Amount:	\$150.00
	Component Description:	Am Twr 460218498 v190827jgv1
	Amount:	\$5,000.00

	Component Description:	KGA inv #950-25 2018 Q4 387 UL20190201jgv1
	Amount:	\$150.00
	Component Description:	KGA inv #950-11 2017 Q4 387 UL20181210jgv1
	Amount:	\$225.00
	Component Description:	KGA inv #950-14 2018 Q2 387 UL20190201jgv1
	Amount:	\$150.00
	Component Description:	KGA inv #950-18 2018 Q3 387 UL20190201jgv1
	Amount:	\$150.00
	Component Description:	Outside Project Management Services, Form 387 Progress Report for
	Amount:	WKOP \$300.00
	Component Description:	KGA inv #950-13 2018 Q1 387 UL20190201jgv1
	Amount:	\$225.00
	Component Description:	KGA inv #950-09 Actual Cost invoices UL20181210jgv1
	Amount:	\$300.00
review		

Prepare and or review reimbursement form

Component Description: Amount:	Attorney Review FCC Form 399 for Reimbursement for WKOP \$435.00
Component Description: Amount:	KGA 950-49 v191011jgv1 \$700.00
Component Description: Amount:	KGA 950-44 v191011jgv1 \$825.00
Component Description: Amount:	KGA 950-40 v190702jgv1 \$800.00
Component Description: Amount:	KGA 950-30 v190702jgv1 \$50.00
Component Description: Amount:	KGA 950-29 v190702jgv1 \$975.00
Component Description: Amount:	KGA 950-34 v190702jgv1 \$381.00

	Component Description:	Prepare or Review FCC Form 399 for Reimbursement for WKOP. See attached KGA Repack Services Proposal to justify fixed fee.
	Amount:	\$2,500.00
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.	
RF Exposure Measurements	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	\$62,490.00	\$60,500.00		\$5,175.00	
MVPD Notification of Channel Change	\$2,000.00	\$2,000.00	N/A	\$1,755.00	N/A
Equipment Delivery and Handling Charges	\$10,000.00	\$10,000.00	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
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	\$3,420.00	N/A
AM Pattern Disturbance Remedy	\$21,050.00	\$20,000.00	N/A	N/A	N/A
AM Pattern Disturbance Impact study	\$7,890.00	\$7,500.00	N/A	N/A	N/A
Sub-total	\$62,490.00	\$60,500.00	N/A	\$5,175.00	N/A
Total for all systems	\$1,071,322.00	\$873,359.00	N/A	\$416,067.44	N/A

Actual Information Description	File Name	
MVPD Notification of Channel Change	Component Description: Amount:	KGA 950-37 v190703jgv1 \$1,755.00
Equipment Delivery and Handling Charges	Information not provided.	
Disposal Costs (for equipment and other waste, net of any salvage value)	Information not provided.	
DTV Medical Facility Notification	Component Description: Amount:	KGA 950-38 v190703jgv1 \$3,420.00
AM Pattern Disturbance Remedy	Information not provided.	
AM Pattern Disturbance Impact study	Information not provided.	

Cost Information	Grand Total			
		Predetermined Cost Estimate	Estimated Cost	Actual Cost
	Total for all systems	\$1,071,322.00	\$873,359.00	\$416,067.44

Reimbursem	envestianus	Response
	The facility has ceased operating on its pre- auction channel.	Yes
	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. 	
		2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.	
		3. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.	

- 4. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (broadcasters) or to continue to carry the signal of a broadcaster that changes channels (MVPD).
- 5. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
- 6. The above-named entity certifies that it will maintain and provide to the Commission detailed records, including receipts, of all costs eligible for reimbursement actually incurred.
- 7. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.

8. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.	
I declare, under penalty of perjury, that I am an authorized representative of the above- named applicant for the Authorization(s) specified above.	Jeffrey C Gehman Engineering Associate 10/11/2019

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).	
		 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.

	 B. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission. D. 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 a nam	clare, under penalty of perjury, that I am uthorized representative of the above- ed applicant for the Authorization(s) ified above.	Jeffrey C Gehman Engineering Associate 10/11/2019

Attachments