

(REFERENCE COPY - Not for submission)

#### FCC Form 399: Reimbursement Request

Facility 53930-35 Service: DRT Call WGAL Channel: 35 (UHF)

Sign:

ID:

File **0000088290** 

Number:

FRN: 0002538445 Eligibility Eligible Date 04/19

Status: Submitted: /2021

## Applicant Information

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

Applicant	Address	Phone	Email	Applicant Type
Hearst Properties Inc. Doing Business As: Hearst Properties Inc.	PO Box 1800 Raleigh, NC 27602 United States	+1 (919) 839- 0300	cramsey@brookspierce. com	Corporation

### Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

#### Preparer Contact Information

#### **Preparer Contact Name and Information**

Applicant	Address	Phone	Email

The Preparer is same as the reimbursement contact.

Broadcaster Information and Transition Plan Question Response

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 existing transmitter and antenna.

#### **Transmitters**

3	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)
	Ownership	Owned
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
Existing Transmitter  Manufacturer and Type	Manufacturer	
	Model	DTT3. 3KSWUSP1
	Year	2011
	Туре	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power Capacity	3.3 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-4R37
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	2.4 kW
	Justification for New Transmitter	Original Larcan manufacturer closed. Transmitter support by 3rd parties marginal.

#### Primary Transmitter

#### **Other Transmitter Costs**

Section	Question	Response
Other Transmitter Costs	Does the transmitter installation require a Transmitter Building Site Survey /Installation?	Yes
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No
	Rigid Conduit and Wiring	No
	Other Electrical Service	Yes

	Description	transmitter electrical installation
HVAC Service	Does the replacement transmitter require HVAC Service?	Yes
	Туре	Heating and Cooling
	Size	5 tons
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leashold improvement?	No

#### Primary Transmitter

#### **Other Transmitter Cost Not Listed**

Name	Description
Shipping	transmitter freight charges
Change Orders	additional equipment, hardware and services to complete installation
Transmitter de-install	removal and disposal of old transmitter
Electrical Accessories	Manufacturer required surge suppressor

#### **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)
	Ownership	Owned
	Is the existing antenna shared with another station or stations?	No
	Is the existing antenna directional?	No
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
Existing Antenna	Mounting	Side Mount
Manufacturer and Type	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Туре	Slotted Coaxial
	ERP: (Effective Radiated Power)	15.0 kW
	Manufacturer	
	Model	DLP-8H
	Year	2011

#### Primary Antenna

#### **New Antenna Costs**

Section	Question	Response
New Antenna Description	Use	Primary (Main)
	Change Type	Purchase New
	Ownership	Owned
	Is antenna shared?	No
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	No
New Antenna	Mounting	Side Mount
Manufacturer and Types	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Туре	Slotted Coaxial
	ERP: (Effective Radiated Power)	15.0 kW
	Manufacturer	
	Model	TLP-8H
	Year	2019
	Justification for New Antenna	existing antenna channel specific and will not operate on new channel

#### Primary Antenna

#### **Other Antenna Costs**

Section	Question	Response
		•

Elbow Complex	Do you require the separate purchase of the Elbow Complex?	No
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**

Name	Description
Shipping	freight charges for antenna delivery

Transmission	effien	Question	Response
	Transmission Line Related Expenses	Do you have transmission line related expenses?	No

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)
	Ownership	Leased
	Is this tower consider Complex?	No
	Is this tower currently shared with any other stations?	Yes
	One or more FM, AM or TV radio broadcaster(s)	Yes
	Others Types of Users	No
	Is tower documented for structural analysis?	Yes
	Is tower compliant with Rev G?	No
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1040042
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	40° 20' 43.6" N-
	Longitude (NAD83)	076° 52' 07.6" W-
	Overall Structure Height	723.09 feet

Support Structure Height	671.58 feet
Ground Elevation Above Mean Sea Level (AMSL)	1310.02 feet
Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	WITF, INC.
Date Constructed	09/01/1977

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
73084	WITF-FM	FM
73083	WITF-TV	DTV
10213	WPMT	DTV

#### Primary Tower

#### **Tower Modification Costs**

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	Study need for guyed or free-standing tower
Tower Reinforcements	Please select whether tower reinforcements are needed:	No reinforcements needed

#### Primary Tower

#### **Tower Rigging Costs**

Section	Question	Response
Tower Rigging Costs	Complex Tower	N/A

Helicopter Services	Are helicopter services required?	No
Required		

#### Primary Tower

#### Other Tower Expenses Not Listed

Information not provided.

#### Outside Professional

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	No
Outside RF consulting Engineering Services	Perform engineering study for displacement application	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
	Prepare Form 601	No
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
	Negotiation of Lease and other Matter for Shared Locations	No
	Prepare or Review FCC Form 399 for Reimbursement	No
	Form 399 assistance or other program management costs	No

RF Field Engineering Services	Comprehensive coverage verification via field study  RF exposure measurements  No	No
	RF exposure measurements	No
	Additional Field Engineering Service	No

#### Outside Professional

#### Other Professional Services Expenses Not Listed

Services Costs	Description
Non-Catalog legal expenses	Non-Catalog expenses for legal advice and services, including financial/reimbursement review, transition reporting, transition procedures, and other transition-related issues

## Other Expenses

Section	Question	Response
AM Pattern Disturbance	Is an Impact Study needed?	No
	Is Remediation needed?	No
Permit and Filing Costs	FCC Construction Permit Major Change	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)?	No
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	No
	Does this relocation require Equipment Storage?	No
Point to Point Microwave (STL/ICR)	Frequency Coordination for Unidirection System	No
	Frequency Coordination for Bi-Direction System	No
	New Point to Point Microwave System	No

## Other Expenses

#### Other Expenses Not Listed

Name	Description
in-house labor	in-house labor directly related to station's repack

## **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-4R37	\$115,619.79	\$103,671.58		\$93,671.58	oustinoution.
Transmitter Building Site Survey /Installation	\$10,000.00	\$10,000.00	N/A	N/A	N/A
Other HVAC Service Type: H Size:5 (Other)	\$0.00	\$0.00	per quote	N/A	N/A
Other Electrical Service: transmitter electrical installation	\$5,275.00	\$5,275.00	per quote	\$5,275.00	N/A
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	\$84,000.00	\$72,051.79	N/A	\$72,051.79	-
Shipping	\$2,755.26	\$2,755.26	per GatesAir invoice	\$2,755.26	N/A
Change Orders	\$8,307.79	\$8,307.79	per GatesAir quote	\$8,307.79	N/A
Transmitter de-install	\$3,663.00	\$3,663.00	per G.R. Sponaugle invoice 35283	\$3,663.00	N/A

Electrical Accessories	\$1,618.74	\$1,618.74	per quote	\$1,618.74	N/A
Sub-total	\$115,619.79	\$103,671.58	N/A	\$93,671.58	N/A
Total for all systems	\$317,057.50	\$147,124.79	N/A	\$122,514.79	N/A

Actual Information Description	File Name	
Transmitter Building Site Survey/Installation	Information not provided.	
Other HVAC Service Type: H Size:5 (Other)	Information not provided.	
Other Electrical Service: transmitter electrical installation	Component Description: Amount:	WGAL transmitter electrical installation \$5,275.00
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	Component Description: Amount:	WGAL transmitter and mask filter \$59,689.30
	Component Description: Amount:	WGAL transmitter installation \$12,362.49
Shipping	Component Description: Amount:	WGAL transmitter shipping \$2,755.26

Change Orders		
	Component Description:	WGAL transmitter
		change order Q-
		81594
	Amount:	\$8,307.79
Transmitter de-install		
	Component Description:	WGAL transmitter
		de-install
	Amount:	\$3,663.00
Electrical Accessories		
	Component Description:	WGAL transmitter
		surge suppressor
	Amount:	\$1,618.74

## **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 TLP-8H	\$23,353.00	\$19,701.00		\$14,701.00	
Sweep test of transmission line and antenna	\$5,730.00	\$5,000.00	N/A	N/A	N/A
Side Mount antenna brackets	\$4,625.00	\$1,703.00	N/A	\$1,703.00	N/A
UHF-Low Power, Side Mount, Slotted Coaxial, 15.0 kW input, Horizontal	\$11,513.00	\$11,513.00	per quote	\$11,513.00	N/A
Shipping	\$1,485.00	\$1,485.00	per Dielectric invoice	\$1,485.00	N/A
Sub-total	\$23,353.00	\$19,701.00	N/A	\$14,701.00	N/A
Total for all systems	\$317,057.50	\$147,124.79	N/A	\$122,514.79	N/A

Actual Information Description	File Name
Sweep test of transmission line and antenna	Information not provided.

Side Mount antenna brackets		
	Component Description:	WGAL antenna
		side mount
		brackets
	Amount:	\$1,703.00
UHF-Low Power, Side		
Mount, Slotted Coaxial, 15.0 kW input, Horizontal	Component Description:	WGAL antenna
KVV IIIput, Florizomai	Amount:	\$11,513.00
Shipping		
	Component Description:	WGAL antenna
		shipping

#### Cost

#### **Transmission Line**

**Information** 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	\$166,450.00	\$13,340.00		\$13,340.00	
Study needed for guyed or free- standing tower	\$8,700.00	\$6,840.00	N/A	\$6,840.00	N/A
Tower Rigging Tall Tower (greater than 500')	\$157,750.00	\$6,500.00	per quote	\$6,500.00	N/A
Sub-total	\$166,450.00	\$13,340.00	N/A	\$13,340.00	N/A
Total for all systems	\$317,057.50	\$147,124.79	N/A	\$122,514.79	N/A

Actual Information	
Description	File Name

9. Ca. C	Component Description:  Amount:	WGAL antenna replacement labor \$6,500.00
ower Rigging Tall Tower greater than 500')		
	Amount:	\$3,420.00
		completion payment
		structural analysis
	Component Description:	WGAL tower
	Amount:	\$3,420.00
		down payment
ee-standing tower	Component Description:	WGAL tower structural analysis

## **Cost** Information

#### **Outside Professional Services**

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

			Estimated		
Description	Predetermined Cost Estimate	Estimated Cost	Cost	Actual Cost	Actual Cost Justification
Outside Professional Services	\$9,557.50	\$8,500.00		\$0.00	
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$3,025.00	\$2,500.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$1,577.50	\$1,500.00	N/A	N/A	N/A
Perform engineering study for displacement application	\$1,800.00	\$1,500.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,052.50	\$1,000.00	N/A	N/A	N/A

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$2,102.50	\$2,000.00	N/A	N/A	N/A
Non-Catalog legal expenses	\$0.00	\$0.00	N/A	N/A	N/A
Sub-total	\$9,557.50	\$8,500.00	N/A	\$0.00	N/A
Total for all systems	\$317,057.50	\$147,124.79	N/A	\$122,514.79	N/A

#### Components

Information not provided.

## **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	\$2,077.21	\$1,912.21		\$802.21	
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$170.00	N/A	\$170.00	N/A
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,110.00	N/A	N/A	N/A
in-house labor	\$632.21	\$632.21	per invoices	\$632.21	N/A
Sub-total	\$2,077.21	\$1,912.21	N/A	\$802.21	N/A
Total for all systems	\$317,057.50	\$147,124.79	N/A	\$122,514.79	N/A

Actual Information Description	File Name	
FCC Filing Fees - Form 2100 license to cover application	Component Description: Amount:	WGAL DRT license to cover application fee \$170.00
FCC Filing Fees - Form 2100 minor change CP application	Information not provided.	

in-house labor		
	Component Description:	WESH DRT in-
		house labor 1
	Amount:	\$632.21

## Cost Information

#### **Grand Total**

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$317,057.50	\$147,124.79	\$122,514.79

Reimbursem	entestatus	Response
	The facility has ceased operating on its pre- auction channel.	Yes
	Construction of final facilities or all necessary modifications are complete.	Yes
	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

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.

- 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.
- 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 abovenamed applicant for the Authorization(s) specified above. John Drain Hearst Television SVP Chief Financial Officer

04/19/2021

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).

- 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.
- The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.
- 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 abovenamed applicant for the Authorization(s) specified above.

# Douglas Durkee Hearst Television Manager of Spectrum Repack

04/19/2021

Section Question Response

#### Submission of Final Allocation or Accounting Information 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.

- 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. The abovenamed entity acknowledges that all certifications and attached documentation are considered material representations.
- 2. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.

- 3. The above-named entity certifies that all costs identified as "actual costs" herein accurately represent the costs actually paid by the above-named entity, including any discounts, refunds, or rebates.
- 4. 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.
- 5. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.
- 6. 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 abovenamed applicant for the Authorization(s) specified above.

## Douglas Durkee

Hearst
Television
Manager of
Spectrum
Repack

04/19/2021

#### **Attachments**