



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **54938** | Service: **DTV** | Call **WAWD** | Channel: **25 (UHF)** |
ID: | Sign:
File **0000027964**
Number:
FRN: **0004941621** | Date **12/01**
Submitted: **/2017**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
BEACH TV PROPERTIES, INC. Doing Business As: BEACH TV PROPERTIES, INC.	Byron J. Colley, Jr. 8317 Front Beach Road Suite 23 PANAMA CITY, FL 32407 United States	+1 (850) 276- 9552	jud. colley@tripsmarter. com	Corporation

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
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.		No
Briefly describe transition plan		See updated project Summary PDF attachment attached dated August 15, 2017 which also includes structural analysis of existing tower and supporting cost data. This supersedes prior August and original 399 data.

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	AT72-1KO
	Year	2013
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	1 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?	Yes
	Manufacturer	
	Model	TMx9
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	1.2 kW
	Justification for New Transmitter	The old transmitter cannot be retuned.

**Primary
Transmitter**

Other Transmitter Costs

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	No
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No
	Power	N/A
	Rigid Conduit and Wiring	Yes
	Size	2 inches
	Length	200.0 feet
	Other Electrical Service	Yes
	Description	120/240
HVAC Service	Does the replacement transmitter require HVAC Service?	Yes

	Type	Cooling Only
	Size	5 tons
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leasehold improvement?	Yes
	Size	200.0 square feet
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

Information not provided.

**Interim
Transmitter**

New Transmitter Costs

Section	Question	Response
New Transmitter	Use	Interim
	Description of Use	N/A
	Change Type	Purchase
	Manufacturer	
	Model	UAXTE-4R37
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	2.4 kW
	Justification for New Transmitter	This transmitter will become the main transmitter.

**Interim
Transmitter**

Other Transmitter Costs

Section	Question	Response
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	Yes
	Description	120/240
HVAC Service	Does the replacement transmitter require HVAC Service?	No

	Type	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 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
Inside RF System	Is an additional interior RF system required to support this interim transmitter?	No

Interim Transmitter **Other Transmitter Cost Not Listed**
Information not provided.

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?	No
Existing Antenna Manufacturer and Type	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	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	Directional Custom
	ERP: (Effective Radiated Power)	32.0 kW

Manufacturer	
Model	PSILP16AH-49
Year	2000

**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?	No
	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?	No
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)	19.9 kW
	Manufacturer	

Model	PSILPD16AH-25-EP
Year	2017
Justification for New Antenna	Changing channels. Station understands that it will be reimbursed only for the cost of the upgrade of the horizontal polarization antenna. Please see attached Exhibit for further explanation and cost justification

Primary Antenna

Other Antenna Costs

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	No
	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?	No
	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?	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.

**Interim
Antenna**

New Antenna Costs

Section	Question	Response
New Antenna Description	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	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?	No
New 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/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)	19.9 kW
	Manufacturer	
	Model	PSILP8AH-49
	Year	2017

	Justification for New Antenna	The Interim antenna will only be an 8 bay antenna for the present channel TO MINIMIZE STRENGTHENING COSTS. This requires twice as much TPO as the present transmitter. This antenna will be mounted a little below the present antenna.
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Interim Antenna

Other Antenna Costs

Section	Question	Response
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	No
	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 an antenna?	No
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

Interim 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 Foam
	Diameter	1 5/8 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	160 feet per run

Primary
Transmission Line

New Transmission 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
	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	175 feet per run
	Justification for New Transmission Line	Need new transmission line.

Primary
Transmission Line

Other Transmission Line Expenses Not Listed

Information not provided.

Interim
Transmission Line

New Transmission Line

Section	Question	Response
New Transmission Line Costs	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Type	Flexible Air
	Diameter	1 5/8 inches
	Segment Length	N/A
	Other Segment Length	
	Number of parallel runs	1
	Length	175 feet per run
	Justification for New Transmission Line	Connect to 8 bay antenna.

Interim
Transmission Line

Other Transmission Line Expenses Not Listed

Information not provided.

**Tower
Equipment
And
Rigging
Costs**

Section	Question	Response
Tower Equipment or Rigging Costs Changes	Do you have tower equipment or rigging costs changes?	Yes

**Outside
Professional**

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	200
	Explanation	Permittee /licensee has no ability to perform internally and work includes supervision and coordination by Thomaston Broadcast services, quote attached.
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	Yes
	Quantity	1
	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	1
	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
RF Field Engineering Services	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
	Comprehensive coverage verification via field study	No
	RF exposure measurements	No
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Outside **Other Professional Services Expenses Not Listed****Professional Services Costs**

Name	Description
Thomaston Broadcasting	WPCT 40 hr x \$40/hr. \$3,200.00 INSTALL XMTRS
Thomaston Broadcasting	MVPD cable headends REPLACE ANTENNAS 18 hrs. at \$40/hr. \$720.00
Thomaston Broadcasting	13 hrs at \$40.00 assisting with 399 forms \$520.00
Thomaston Broadcasting	QUOTE WORK FOR STRENGTHENING, ANTENNAS, TRANSMITTER & LINE total 70 hrs. @ \$40.00 \$2,800.00
Thomaston Broadcasting	COMPLETED - WORK WITH KM ENGR. ON TOWER ANALYSIS 12 hr. @ \$40 \$480.00

**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	No
	Non-zoning permits	No
	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?	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**

Other Expenses Not Listed

Name	Description
Mask Filter	Rhode & Swartz UT6E7F
Shelter, foundations, crane to assist crew	KM ENGINEERING QUOTE ATTACHED. ADDITIONAL SERVICES INCLUDE TOWER STRENGTHENING AND CRANE TO LOWER TOWER LABOR AND ALSO TO SET SHELTER IN PLACE
Tower crew	Remove and replace antennas
Patch Bay, Accessories	Myat or equal 4 port manual patch bay with two U links, see Budget Summary

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
Interim Transmitter UAXTE-4R37	\$129,500.00	\$82,900.00		\$25,375.86	
Other Electrical Service: 120 /240	\$3,500.00	\$3,500.00	N/A	N/A	N/A
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	\$126,000.00	\$79,400.00	N/A	\$25,375.86	N/A
Primary Transmitter TMx9	\$199,950.00	\$143,900.00		\$20,200.24	
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	\$126,000.00	\$75,400.00	N/A	\$20,200.24	N/A
2" Rigid Conduit and Wiring (Cost per foot)	\$5,200.00	\$5,000.00	N/A	N/A	N/A
Other Electrical Service: 120 /240	\$13,500.00	\$13,500.00	N/A	N/A	N/A
5 Ton system	\$20,250.00	\$15,000.00	N/A	N/A	N/A

Other -- Building Addition Size: 200.0	\$35,000.00	\$35,000.00	Must replace building as existing building will not accomodate new equipment.	N/A	N/A
Sub-total	\$329,450.00	\$226,800.00	N/A	\$45,576.10	N/A
Total for all systems	\$608,391.00	\$474,646.00	N/A	\$54,789.85	N/A

Components

Actual Information	
Description	File Name
Other Electrical Service: 120 /240	Information not provided.
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	Component Description: 1/3 Down payment. Amount: \$25,375.86
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	Component Description: 1/3 Down Payment. Amount: \$20,200.24
2" Rigid Conduit and Wiring (Cost per foot)	Information not provided.
Other Electrical Service: 120 /240	Information not provided.
5 Ton system	Information not provided.
Other -- Building Addition Size: 200.0	Information not provided.

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
Interim Antenna PSILP8AH-49	\$19,030.00	\$18,300.00		\$0.00	
Sweep test of existing antenna	\$6,730.00	\$6,000.00	N/A	N/A	N/A
UHF - High Power, Side Mount, basic slot antenna, 20 kW input, directional,, horizontally polarized	<i>\$12,300.00</i>	\$12,300.00	Side Mount 8 slot antenna to maintain service to cable head ends.	N/A	N/A
Primary Antenna PSILPD16AH-25-EP	\$31,332.00	\$30,602.00		\$0.00	
UHF - High Power, Side Mount, basic slot antenna, 20 kW input, directional,, elliptically or circularly polarized	<i>\$24,602.00</i>	\$24,602.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,000.00	N/A	N/A	N/A
Sub-total	\$50,362.00	\$48,902.00	N/A	\$0.00	N/A
Total for all systems	\$608,391.00	\$474,646.00	N/A	\$54,789.85	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
Interim Transmission Line	\$5,775.00	\$5,200.00		\$0.00	
Flexible Air Transmission Line - dielectric, 1 5 /8"	\$5,775.00	\$5,200.00	N/A	N/A	N/A
Primary Transmission Line	\$10,325.00	\$9,500.00		\$0.00	
Flexible Air Transmission Line - dielectric, 3"	\$10,325.00	\$9,500.00	N/A	N/A	N/A
Sub-total	\$16,100.00	\$14,700.00	N/A	\$0.00	N/A
Total for all systems	\$608,391.00	\$474,646.00	N/A	\$54,789.85	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	\$0.00	\$0.00		\$0.00	
Sub-total	\$0.00	\$0.00	N/A	\$0.00	N/A
Total for all systems	\$608,391.00	\$474,646.00	N/A	\$54,789.85	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	\$72,110.00	\$46,550.00		\$9,213.75	
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$1,500.00	N/A
Thomaston Broadcasting	<i>\$9,800.00</i>	\$9,800.00	N/A	\$3,800.00	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	\$337.50	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$5,000.00	N/A	\$3,576.25	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,500.00	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 request for Special Temporary Authorization	\$2,050.00	\$1,500.00	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
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	N/A	N/A
Project management of the transition	\$31,600.00	\$10,000.00	N/A	N/A	N/A
Sub-total	\$72,110.00	\$46,550.00	N/A	\$9,213.75	N/A
Total for all systems	\$608,391.00	\$474,646.00	N/A	\$54,789.85	N/A

Components

Actual Information
Description

File Name

Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Component Description: Engineering for application. Amount: \$1,500.00
Thomaston Broadcasting	Component Description: Consulting services. Amount: \$3,800.00
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Component Description: Form 387 prep. Amount: \$175.00 Component Description: Minor change application including consultation with client and attorney and research. Amount: \$1,555.00 Component Description: Review FCC filing process. Amount: \$337.50

Perform engineering study for new channel assignment and antenna development	Component Description: Structural analysis and report for WAWD tower. Amount: \$1,200.00
	Component Description: Site visit. Amount: \$1,250.00
	Component Description: Prepare transition costs. Amount: \$240.00
	Component Description: Obtain WAWD tower details from Rohn. Amount: \$700.00
	Component Description: Revised Structural Analysis. Amount: \$650.00
	Component Description: Revision to 399 including coordination with client and structural engineer. Amount: \$786.25
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.
Prepare request for Special Temporary Authorization	Information not provided.

Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.
Prepare and or review reimbursement form	Information not provided.
Project management of the transition	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	\$140,369.00	\$137,694.00		\$0.00	
Patch Bay, Accessories	<i>\$3,600.00</i>	\$3,600.00	Required for switching between transmitters and antennas for testing. See justification in Detailed Summary Narrative	N/A	N/A
Tower crew	<i>\$27,030.00</i>	\$27,030.00	QUOTE FOR \$25,500.00 ATTACHED PLUS 6% FLORIDA SALES TAX	N/A	N/A
Mask Filter	<i>\$4,100.00</i>	\$4,100.00	N/A	N/A	N/A
MVPD Notification of Channel Change	<i>\$2,500.00</i>	\$2,500.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$2,500.00</i>	\$2,500.00	N/A	N/A	N/A
Equipment Storage	<i>\$5,000.00</i>	\$5,000.00	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)	\$4,500.00	\$4,500.00	COSTS TO DISPOSE OF OLD ANTENNA AND LINE. SEE PROJECT SUMMARY.	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
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$0.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$10,000.00	N/A	N/A	N/A
Shelter, foundations, crane to assist crew	\$52,949.00	\$52,949.00	SEE QUOTE FROM KM ENGINEERING TOTALING \$87,949.00. \$35,000.00 REMOVED AS SHELTER IS A SEPARATE LINE ITEM IN BUDGET.	N/A	N/A
Sub-total	\$140,369.00	\$137,694.00	N/A	\$0.00	N/A
Total for all systems	\$608,391.00	\$474,646.00	N/A	\$54,789.85	N/A

Components

Information not provided.

Cost Information	Grand Total		
		Predetermined Cost Estimate	Estimated Cost
			Actual Cost
	Total for all systems	\$608,391.00	\$474,646.00
			\$54,789.85

Reimbursement	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
	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 above-named applicant for the Authorization(s) specified above.	Jud Colley <i>Owner</i> 12/01/2017

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 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).	
		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.	Jud Colley <i>Owner</i> 12/01/2017

Attachments