



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **13594** | Service: **DTV** | Call **WEDW** | Channel: **21 (UHF)** |
ID: | Sign:
File **0000027937**
Number:
FRN: **0003574662** | Date **04/01**
Submitted: **/2018**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
CONNECTICUT PUBLIC BROADCASTING, INC.	Meg Sakellarides	+1 (860) 278-5310	msakellarides@cptv.org	Not-for-Profit
Doing Business As:	1049 ASYLUM AVENUE HARTFORD, CT 06105 United States			

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	Purchase of a new transmitter, new transmission line, and new antenna. Current transmitter cannot be retuned to the new channel. Interim antenna and interim transmission line are planned during transition to main antenna.

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	Ultimate TDU2 5K00LV
	Year	2002
	Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power Capacity	5 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	Parallax 6.5 kW UHF Cooled
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	6.5 kW
	Justification for New Transmitter	Comark, the manufacturer, has indicated that the existing transmitter cannot be retuned to meet the new channel requirement. The existing transmitter is channel-specific.

**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	4 inches
	Length	100.0 feet
	Other Electrical Service	Yes
	Description	Labor and materials to accomplish either modification of existing electrical service or new electrical service and new wiring for new transmitter and 3-phase 208V and wiring for 480 3-phase.
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
--	----------------	-----

Primary Transmitter **Other Transmitter Cost Not Listed**

Name	Description
Mask Filter	8-Pole Mask Filter

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	Top Mount
	Antenna position in stack	Top
	Polarization	Horizontal
	Type	Slotted Coaxial
	Number of Stations Supported	N/A
	Number of Panels	N/A
	Design power capacity in use	N/A
	Lower Limit	N/A
	Upper Limit	N/A
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	170.0 kW

Manufacturer	
Model	TFU-20JDAS/P
Year	1980

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	Top Mount
	Antenna position in stack	Top
	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)	96.6 kW
	Manufacturer	

Model	TFU-15JTH-R P230
Year	2019
Justification for New Antenna	Existing antenna is single channel and is channel-specific. Per Dielectric, the quoted antenna (see quote) is a high-power top-mount antenna and Dielectric does not make an antenna lower than 200kw that is top mounted. This is a like for like exchange.

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?	Yes
	Broadband or Single Channel?	Single Channel
	Feed Line Size	4 1/16 inches inches
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

Name	Description
Project Expenses	Other services
Reducer	Reducer 4-50 EIA X 3-50 STD QS
Spring Assy Watch Band	Spring Assy Watch Band Assy 1.38 ID QS
Rubbing Shoe	4-50/6 CONN QS
Screw Shoulder	1/4-20 5/16 DIA

**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?	No
	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)	170.0 kW
	Manufacturer	
	Model	TFU-8WB
	Year	2019

	Justification for New Antenna	In order to complete the project, an interim antenna is necessary while the main antenna is being replaced.
--	-------------------------------	---

**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	Rigid
	Diameter	4 1/16 inches
	Other Diameter	N/A
	Segment Length	19 3/4 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	600 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	Rigid
	Diameter	4 1/16 inches
	Other Diameter	N/A
	Segment Length	19 1/2 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	600 feet per run

	Justification for New Transmission Line	Dielectric has indicated that the existing WR1500 motorized four-port switch and the existing WR1500 waveguides and adapters used both inside and outside to the horizontal run to the tower base will not work on channel 21.
--	---	--

Primary
Transmission Line

Other Transmission Line Expenses Not Listed

Name	Description
Project Expenses	Other services

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	3 inches
	Segment Length	N/A
	Other Segment Length	
	Number of parallel runs	1
	Length	600 feet per run
	Justification for New Transmission Line	In order to complete the project, an interim transmission line is necessary while the main antenna is being replaced.

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

Primary Tower

Existing Tower

Section	Question	Response
Existing Tower Description	Type of change	Move Equipment
	Tower Use	Primary (Main)
	Description of Use	N/A
	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	Yes
	Is tower documented for structural analysis?	Unknown
	Is tower compliant with Rev G?	Unknown
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1205267
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	41° 16' 44.3" N-
	Longitude (NAD83)	073° 11' 06.4" W-
	Overall Structure Height	491.14 feet
	Support Structure Height	459.97 feet
	Ground Elevation Above Mean Sea Level (AMSL)	520.01 feet

	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	Pinnacle Towers LLC
	Date Constructed	06/01/1953

**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
48721	WEZN-FM	FM
58515	WSHU-FM	FM

Other Types of Users

Users
Cell Providers

Primary Tower

Tower Rigging Costs

Section	Question	Response
Tower Rigging Costs	Complex Tower	N/A
Helicopter Services Required	Are helicopter services required?	No

Primary Tower

Other Tower Expenses Not Listed

Name	Description
Tower Lease	Additional tower rent expense for interim antenna and transmission line necessary during transition.

**Outside
Professional**

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	100
	Explanation	The transmitter manufacturer will project manage the project.
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	2
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A
	Terrain-Shielded Facility	N/A
Attorney and Other Outside Consulting Services	Prepare and file Form FCC Construction Permit Application	Yes
	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes

	For Auxiliary Facility	No
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	2
	NEPA Section 106 environmental review	No
	Environmental Assessment	No
	ASR Modification	Yes
	FAA Consultation (including preparation of FAA Form 7460)	Yes
	Negotiation of Lease and other Matter for Shared Locations	Yes
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
RF Field Engineering Services	Comprehensive coverage verification via field study	Yes
	RF exposure measurements	Yes
	Additional Field Engineering Service	No
	Number of Days	N/A
	Justification	N/A

Outside Professional Services Costs

Other Professional Services Expenses Not Listed

Name	Description
Project Expenses	See attached detailed estimate

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	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?	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
Engineering and Administrative	Internal Project management

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 Parallax 6.5 kW UHF Cooled	\$313,600.00	\$299,600.00		\$0.00	
Other Electrical Service: Labor and materials to accomplish either modification of existing electrical service or new electrical service and new wiring for new transmitter and 3-phase 208V and wiring for 480 3-phase.	<i>\$15,000.00</i>	\$15,000.00	See attached quote for electrical service.	\$0.00	N/A
4" Rigid Conduit and Wiring (Cost per foot)	\$10,100.00	\$9,600.00	N/A	N/A	N/A
Mask Filter	<i>\$15,000.00</i>	\$15,000.00	N/A	N/A	N/A

UHF - Liquid Cooled Solid State Transmitter 4.9 . 6.5 kW	\$273,500.00	\$260,000.00	N/A	N/A	N/A
Sub-total	\$313,600.00	\$299,600.00	N/A	\$0.00	N/A
Total for all systems	\$1,362,953.19	\$1,204,729.19	N/A	\$14,900.00	N/A

Components

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 TFU-8WB	\$96,130.00	\$91,400.00		\$0.00	
UHF - Lower Power Side Mount, One station antenna - medium power (50- 200 kW), horizontally polarized	\$89,400.00	\$85,000.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
Primary Antenna TFU-15JTH- R P230	\$283,738.19	\$194,423.19		\$0.00	
Spring Assy Watch Band	\$1,076.25	\$1,076.25	N/A	N/A	N/A
Project Expenses	\$17,134.44	\$17,134.44	N/A	N/A	N/A

UHF - High Power Top Mount (200-1000 kW), One station antenna, horizontally polarized	\$247,000.00	\$161,000.00	See Attached quote from Dielectric, the antenna manufacturer.	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
Elbow complex, single channel, at antenna input, per 4 1/16. feedline (if needed)	\$9,570.00	\$6,585.00	N/A	N/A	N/A
Reducer	\$1,860.00	\$1,860.00	N/A	N/A	N/A
Screw Shoulder	\$78.75	\$78.75	N/A	N/A	N/A
Rubbing Shoe	\$288.75	\$288.75	N/A	N/A	N/A
Sub-total	\$379,868.19	\$285,823.19	N/A	\$0.00	N/A
Total for all systems	\$1,362,953.19	\$1,204,729.19	N/A	\$14,900.00	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	\$35,400.00	\$33,600.00		\$0.00	
Flexible Air Transmission Line - dielectric, 3"	\$35,400.00	\$33,600.00	N/A	N/A	N/A
Primary Transmission Line	\$90,930.00	\$50,461.00		\$0.00	
Rigid Transmission Line - copper, 4 1/16"	\$85,200.00	\$44,731.00	See attached quote for transmission line.	N/A	N/A
Project Expenses	\$5,730.00	\$5,730.00	N/A	N/A	N/A
Sub-total	\$126,330.00	\$84,061.00	N/A	\$0.00	N/A
Total for all systems	\$1,362,953.19	\$1,204,729.19	N/A	\$14,900.00	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	\$155,715.00	\$151,515.00		\$0.00	
Tower Lease	<i>\$71,515.00</i>	\$71,515.00	N/A	N/A	N/A
Short Tower (less than 500')	\$84,200.00	\$80,000.00	N/A	N/A	N/A
Sub-total	\$155,715.00	\$151,515.00	N/A	\$0.00	N/A
Total for all systems	\$1,362,953.19	\$1,204,729.19	N/A	\$14,900.00	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	\$180,890.00	\$177,730.00		\$14,900.00	
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A	\$0.00	N/A
FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase	\$2,105.00	\$2,000.00	N/A	N/A	N/A
ASR modification (prepare FCC Form 854)	\$2,105.00	\$2,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$7,360.00	\$7,000.00	N/A	N/A	N/A

Attorney Fees - Negotiation of lease and other matters for shared locations	\$4,210.00	\$10,000.00	Lease negotiations with Crown castle protracted and complicated given shared operation under Channel Share Agreement.	\$9,000.00	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	N/A	N/A
Prepare request for Special Temporary Authorization	\$4,100.00	\$3,000.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	N/A	N/A

Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$4,625.00	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	\$1,275.00	N/A
RF Exposure Measurements	\$21,050.00	\$20,000.00	N/A	N/A	N/A
Project management of the transition	\$15,800.00	\$15,000.00	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
Project Expenses	\$14,980.00	\$14,980.00	See attached detailed estimate	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
Sub-total	\$180,890.00	\$177,730.00	N/A	\$14,900.00	N/A
Total for all systems	\$1,362,953.19	\$1,204,729.19	N/A	\$14,900.00	N/A

Components

Actual Information
Description

File Name

<p>Address transition timing and coordination issues w/ other stations and wireless</p>	<table> <tr> <td data-bbox="697 100 1011 409"> <p>Component Description:</p> <p>Amount:</p> </td><td data-bbox="1011 100 1428 409"> <p>Address transition timing and coordination.</p> <p>\$39.00</p> </td></tr> <tr> <td data-bbox="697 409 1011 678"> <p>Component Description:</p> <p>Amount:</p> </td><td data-bbox="1011 409 1428 678"> <p>Address transition timing and coordination.</p> <p>\$172.50</p> </td></tr> <tr> <td data-bbox="697 678 1011 902"> <p>Component Description:</p> <p>Amount:</p> </td><td data-bbox="1011 678 1428 902"> <p>Address transition timing and coordination.</p> <p>\$39.00</p> </td></tr> </table>	<p>Component Description:</p> <p>Amount:</p>	<p>Address transition timing and coordination.</p> <p>\$39.00</p>	<p>Component Description:</p> <p>Amount:</p>	<p>Address transition timing and coordination.</p> <p>\$172.50</p>	<p>Component Description:</p> <p>Amount:</p>	<p>Address transition timing and coordination.</p> <p>\$39.00</p>
<p>Component Description:</p> <p>Amount:</p>	<p>Address transition timing and coordination.</p> <p>\$39.00</p>						
<p>Component Description:</p> <p>Amount:</p>	<p>Address transition timing and coordination.</p> <p>\$172.50</p>						
<p>Component Description:</p> <p>Amount:</p>	<p>Address transition timing and coordination.</p> <p>\$39.00</p>						
<p>FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase</p>	<p>Information not provided.</p>						
<p>ASR modification (prepare FCC Form 854)</p>	<p>Information not provided.</p>						
<p>Attorney Fees - Prepare and File request for Special Temporary Authorization</p>	<p>Information not provided.</p>						

<p>Attorney Fees - Negotiation of lease and other matters for shared locations</p>	<table> <tr> <td data-bbox="695 98 1086 405"> <p>Component Description:</p> <p>Amount:</p> </td><td data-bbox="1086 98 1426 405"> <p>Legal services negotiating lease with Crown Castle for shared location. \$4,800.00</p> </td></tr> <tr> <td data-bbox="695 405 1086 712"> <p>Component Description:</p> <p>Amount:</p> </td><td data-bbox="1086 405 1426 712"> <p>Legal services negotiating lease with Crown Castle for shared location. \$2,400.00</p> </td></tr> <tr> <td data-bbox="695 712 1086 1021"> <p>Component Description:</p> <p>Amount:</p> </td><td data-bbox="1086 712 1426 1021"> <p>Legal services negotiating lease with Crown Castle for shared location. \$1,800.00</p> </td></tr> </table>	<p>Component Description:</p> <p>Amount:</p>	<p>Legal services negotiating lease with Crown Castle for shared location. \$4,800.00</p>	<p>Component Description:</p> <p>Amount:</p>	<p>Legal services negotiating lease with Crown Castle for shared location. \$2,400.00</p>	<p>Component Description:</p> <p>Amount:</p>	<p>Legal services negotiating lease with Crown Castle for shared location. \$1,800.00</p>
<p>Component Description:</p> <p>Amount:</p>	<p>Legal services negotiating lease with Crown Castle for shared location. \$4,800.00</p>						
<p>Component Description:</p> <p>Amount:</p>	<p>Legal services negotiating lease with Crown Castle for shared location. \$2,400.00</p>						
<p>Component Description:</p> <p>Amount:</p>	<p>Legal services negotiating lease with Crown Castle for shared location. \$1,800.00</p>						
<p>Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application</p>	<p>Information not provided.</p>						
<p>Prepare request for Special Temporary Authorization</p>	<p>Information not provided.</p>						
<p>Prepare engineering section of FCC Form 2100 (main), License to Cover Application</p>	<p>Information not provided.</p>						
<p>Prepare engineering section of FCC Form 2100 (main), Construction Permit Application</p>	<p>Information not provided.</p>						

Perform engineering study for new channel assignment and antenna development	Component Description:	Engineering study work for new channel assignment and antenna development.
	Amount:	\$875.00
	Component Description:	Engineering study work for new channel assignment and antenna development.
	Amount:	\$1,250.00
	Component Description:	Engineering study work for new channel assignment and antenna development.
	Amount:	\$2,500.00

Prepare and or review reimbursement form	Component Description:		Legal services for preparing, reviewing, and submitting FCC Reimbursement Form 399.
	Amount:		\$900.00
	Component Description:		Legal services for preparing, reviewing, and submitting FCC Reimbursement Form 399.
	Amount:		\$657.00
	Component Description:		Legal services for preparing, reviewing, and submitting FCC Reimbursement Form 399.
	Amount:		\$618.00
RF Exposure Measurements	Information not provided.		
Project management of the transition	Information not provided.		
Comprehensive coverage verification via field study, if needed	Information not provided.		
Project Expenses	Information not provided.		
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	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	\$206,550.00	\$206,000.00		\$0.00	
Engineering and Administrative	<i>\$20,000.00</i>	\$20,000.00	N/A	N/A	N/A
MVPD Notification of Channel Change	<i>\$11,000.00</i>	\$11,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<i>\$69,000.00</i>	\$69,000.00	See attachment for detailed justification.	N/A	N/A
Equipment Storage	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	<i>\$25,000.00</i>	\$25,000.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	<i>\$40,000.00</i>	\$40,000.00	N/A	N/A	N/A
Non-zoning permits	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	N/A	N/A
Local Zoning	<i>\$10,000.00</i>	\$10,000.00	N/A	N/A	N/A

Sub-total	\$206,550.00	\$206,000.00	N/A	\$0.00	N/A
Total for all systems	\$1,362,953.19	\$1,204,729.19	N/A	\$14,900.00	N/A

Components

Information not provided.

Cost Information	Grand Total		
		Predetermined Cost Estimate	Estimated Cost
			Actual Cost
	Total for all systems	\$1,362,953.19	\$1,204,729.19
			\$14,900.00

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

Certification	Section	Question	Response
	Submission of Estimated Expenses Statements	<p>WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.</p>	
		<ol style="list-style-type: none"> 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.

**Meg
Sakellarides**
*Chief
Financial
Officer*

04/01/2018

Certification	Section	Question	Response
	Submission of Actual Cost Documentation Statements	<p>WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).</p>	
		<ol style="list-style-type: none"> 1. The Authorized Person signing below certifies and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity. 2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct. 3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations. 	

4. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.
5. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (full power and Class A stations) and/or otherwise modify a television station's facility as a result of the spectrum repack (LPTV/TV Translator stations); or to minimize service disruption resulting from a repacked television station (FM stations); or to continue to carry the signal of a broadcaster that changes channels (MVPD) .
6. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
7. The above-named entity certifies that the cost information /documents submitted reflect costs actually incurred.

<p>8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.</p> <p>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.</p>	
<p>I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.</p>	<p>Meg Sakellarides <i>Chief Financial Officer</i></p> <p>04/01/2018</p>

Attachments