



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **65667** | Service: **DTV** | Call **WTCI** | Channel: **35 (UHF)** |
ID: | Sign:
File **0000025653**
Number:
FRN: **0001774595** | Date **04/16**
Submitted: **/2019**

Applicant Information

Applicant Name, Type, and Contact Information

| Applicant | Address | Phone | Email | Applicant Type |
|---|--|-------------------|-------------------|----------------|
| THE GREATER CHATTANOOGA PUBLIC TELEVISION CORP | Bryan Fuqua 7540 BONNYSHIRE DRIVE CHATTANOOGA, TN 37416 United States | +1 (423) 702-7800 | BFUQUA@WTCITV.ORG | Not-for-Profit |
| Doing Business As: THE GREATER CHATTANOOGA PUBLIC TELEVISION CORP | | | | |

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 | | Build new tower adjacent to the old tower. Install new transmitter / new transmission line / new antenna. Remove old antenna /line from existing tower so WUTC-FM can continue to operate without expenses on old tower. |

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 | Diamond DHD-60 P2 |
| | Year | 2002 |
| | Type | Solid State |
| | Solid State Cooling | Air Cooled |
| | Solid State Power Capacity | 14 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 | Maxiva ULXTE-20 |
| | Transmitter Type | Solid State |
| | Solid State Cooling | Liquid Cooled |
| | Solid State Power capacity | 12.9 kW |
| | Justification for New Transmitter | GatesAir issued a letter to all Diamond CD (as well as other model) transmitter owners dated January 1, 2017 that they would no longer offer channel change services or support in-field channel changes. |

**Primary
Transmitter**

Other Transmitter Costs

| Section | Question | Response |
|--|---|--|
| Electrical Service | Service Entrance (3 phases 800A 208V) | No |
| | Switchgear (industrial 800 amp) | No |
| | Transformer (480V) | Yes |
| | Power | 150 kVA |
| | Rigid Conduit and Wiring | Yes |
| | Size | 3 inches |
| | Length | 100.0 feet |
| | Other Electrical Service | Yes |
| | Description | Installation /wiring of 75 KVA transformer and 200 amp switch panel /breakers for GatesAir ULXTE-20 transmitter |
| 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 **Other Transmitter Cost Not Listed**
Transmitter 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? | No |
| | 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 | Not in Stack |
| | 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) | 160.0 kW |
| | | |

| | |
|--------------|---------------------|
| Manufacturer | |
| Model | ATW18H6- HTO-29H |
| Year | 2014 |

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? | No |
| | 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 | 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) | 181.0 kW |
| | Manufacturer | |
| | | |

| | |
|-------------------------------|---|
| Model | ATW22H4- HTO10-35L |
| Year | 2019 |
| Justification for New Antenna | Main licensed antenna for WTCI. Slotted coaxial antenna can not be re-tuned to re-pack channel. |

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.

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 | 6 1/8 inches |
| | Other Diameter | N/A |
| | Segment Length | Broadband |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 500 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 | 6 1/8 inches |
| | Other Diameter | N/A |
| | Segment Length | Broadband |
| | Other Segment Length | N/A |
| | Number of parallel runs | 1 |
| | Length | 500 feet per run |
| | Justification for New Transmission Line | Need to install new rigid coax in a new tower in order to repack station. Current tower will not pass EIA-222-G codes and can't be modified to meet new codes. |

| Primary 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 | Construct New |
| | Tower Use | Primary (Main) |
| | Description of Use | N/A |
| | Ownership | Owned |
| | Is this tower consider Complex? | Terrain Constrained |
| | 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 | 1042763 |
| Coordinates (NAD83 (North American Datum of 1983)) | Latitude (NAD83) | 35° 12' 26.0" N- |
| | Longitude (NAD83) | 085° 16' 52.0" W- |
| | Overall Structure Height | 493.00 feet |
| | Support Structure Height | 448.00 feet |
| | | |

| | |
|--|--|
| Ground Elevation Above Mean Sea Level (AMSL) | 2012.00 feet |
| Structure Type | TOWER - Free Standing or Guyed Structure |
| Tower Owner | The Greater Chattanooga Public TV Corp |
| Date Constructed | 08/15/1993 |

**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 |
|-------------|-----------|---------|
| 69325 | WUTC | FM |

**Primary
Tower**

Tower Construction Costs

| Section | Question | Response |
|----------------------------|---|--|
| Construct New Tower | Use | Primary (Main) |
| | Description of Use | N/A |
| | Is this a request for upgraded equipment? | No |
| | Height | 445.00 feet |
| | Justification for New Tower | Tower will not meet current EIA-222-G standard with the repack antenna and can't be modified to meet the EIA-222-G standard. |

**Primary
Tower**

Tower Rigging Costs

| Section | Question | Response |
|-------------------------------------|-----------------------------------|---------------------|
| Tower Rigging Costs | Complex Tower | Terrain constrained |
| Helicopter Services Required | Are helicopter services required? | No |

**Primary
Tower**

Other Tower Expenses Not Listed

Information not provided.

**Outside
Professional Services Costs**

| Section | Question | Response |
|---|--|----------|
| Outside Project Management Services | Do you require outside project management services? | No |
| | Number of Hours | N/A |
| | Explanation | N/A |
| Outside RF consulting Engineering Services | Perform engineering study for new channel assignment and antenna development | No |
| | Prepare engineering section of Form FCC Construction Permit Application | No |
| | For Auxiliary Facility | N/A |
| | For Main Facility | N/A |
| | Prepare engineering section of Form FCC License to Cover Application | No |
| | For Auxiliary Facility | N/A |
| | For Main Facility | N/A |
| | 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 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 | No |
| | Quantity | N/A |
| | 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 | 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 | No |
| | RF exposure measurements | No |
| | Additional Field Engineering Service | No |
| | Number of Days | N/A |
| | Justification | N/A |

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

If wireless is not provided.

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)? | No |
| | 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**

Other Expenses Not Listed

| Name | Description |
|-------------------------------------|--|
| MVPD Notifications | Notification of cable and Satellite MVPD providers of new RF channel and TS stream parameters. |
| Mask Filter | New Dielectric mask filter on CH 35 to replace CH 29 filter. |
| Tower foundation and anchors | Tower foundations and installation. Drilled pier design in rock. |

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 Maxiva ULXTE-20 | \$534,480.00 | \$479,289.03 | | \$476,573.48 | |
| Other Electrical Service: Installation /wiring of 75 KVA transformer and 200 amp switch panel /breakers for GatesAir ULXTE-20 transmitter | <i>\$9,230.00</i> | \$9,230.00 | Electrical installation costs for transformer, panels and breakers power GatesAir ULXTE-20 transmitter | \$9,230.00 | N/A |
| 3" Rigid Conduit and Wiring (Cost per foot) | \$5,200.00 | \$0.00 | Removing this item - can't figure out how to delete from Form 399 | N/A | N/A |
| Transformer 3 phase /480v - 150 KVA | \$25,550.00 | \$2,715.55 | Only need 75 KVA transformer. Priced from GatesAir transmitter quote. | N/A | N/A |

| | | | | | |
|--|----------------|----------------|--|--------------|--|
| UHF - Liquid Cooled Solid State Transmitter 8.2 - 13 kW | \$494,500.00 | \$467,343.48 | Updated quote estimate with change orders and actual shipping costs raised total cost from \$456,290.47 to \$467,343.48. | \$467,343.48 | Change order Q- 77238 and Q-78300 added \$5,140.15. Also freight was estimated at \$5,400 and was finally billed at \$8,597.32. |
| Sub-total | \$534,480.00 | \$479,289.03 | N/A | \$476,573.48 | N/A |
| Total for all systems | \$1,727,690.50 | \$1,385,124.13 | N/A | \$996,808.27 | N/A |

Components

| Actual Information | |
|--|--|
| Description | File Name |
| Other Electrical Service: Installation/wiring of 75 KVA transformer and 200 amp switch panel/breakers for GatesAir ULXTE-20 transmitter | <p>Component Description: Electrical work to install GatesAir ULXTE-20 UHF Transmitter for repack.</p> <p>Amount: \$9,230.00</p> |
| 3" Rigid Conduit and Wiring (Cost per foot) | Information not provided. |
| Transformer 3 phase/480v - 150 KVA | Information not provided. |

UHF - Liquid Cooled Solid
State Transmitter 8.2 - 13
kW

Component Description: Second payment
for ULXTE-20
transmitter to re-
pack WTCI to
channel 35.
Amount: \$152,397.90

Component Description: Third payment for
transmitter due
upon shipment
Amount: \$123,530.26

Component Description: Final transmitter
payment -
Installation, proof
and freight.
Amount: \$40,213.32

Component Description: Downpayment for
re-pack transmitter
for Channel 35.
Amount: \$151,202.00

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 ATW22H4-HTO10-35L | \$253,730.00 | \$203,125.00 | | \$53,455.00 | |
| Sweep test of existing antenna | \$6,730.00 | \$0.00 | Removing this item - can't figure out how to delete from Form 399 | \$0.00 | Removing this item - can't figure out how to delete from Form 399 |
| UHF - High Power Top Mount (200-1000 kW), One station antenna, horizontally polarized | \$247,000.00 | \$203,125.00 | N/A | \$53,455.00 | N/A |
| Sub-total | \$253,730.00 | \$203,125.00 | N/A | \$53,455.00 | N/A |
| Total for all systems | \$1,727,690.50 | \$1,385,124.13 | N/A | \$996,808.27 | N/A |

Components

| Actual Information | |
|--------------------------------|--|
| Description | File Name |
| Sweep test of existing antenna | <div>Component Description: Removing this item - can't figure out how to delete from Form 399</div> <div>Amount: N/A</div> |

| | | |
|---|---|---|
| UHF - High Power Top Mount (200-1000 kW), One station antenna, horizontally polarized | Component Description: Amount: | Downpayment for ERI ATW22H4-HTO10-35L antenna for CH 35 repack \$53,455.00 |
|---|---|---|

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 |
|--|-----------------------------|----------------|------------------------------|--------------|---|
| Primary Transmission Line | \$116,000.00 | \$95,000.00 | | \$55,922.85 | |
| Rigid Transmission Line - copper, 6 1/8" broadband | \$116,000.00 | \$95,000.00 | N/A | \$55,922.85 | Added 4-1/16" patch panel / air drier / system sweep test to transmission line quote to meets needs of system and new transmitter |
| Sub-total | \$116,000.00 | \$95,000.00 | N/A | \$55,922.85 | N/A |
| Total for all systems | \$1,727,690.50 | \$1,385,124.13 | N/A | \$996,808.27 | N/A |

Components

| Actual Information | |
|--|--|
| Description | File Name |
| Rigid Transmission Line - copper, 6 1/8" broadband | <div>Component Description:Down payment for transmission line system</div> <div>Amount:\$55,922.85</div> |

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 | |
| Primary Tower | \$628,770.00 | \$429,370.00 | | \$274,486.00 | |
| New tower | <i>\$195,170.00</i> | \$195,170.00 | Tower sections, waveguide bridge, guy wire hardware, and red obstruction lighting combined. Updated price after site visit by Quality Tower Services /Rohn. | \$156,136.00 | N/A |

| | | | | | |
|--|----------------|----------------|---|--------------|-----|
| Complex Tower (includes, for example, those with candelabras and/or stacked antennas) | \$421,000.00 | \$231,700.00 | Cost to take down 250 ft tower and install new 440' tower in its old footprint as site is very space constrained. Updated price after site visit by Quality Tower Services /Rohn. | \$115,850.00 | N/A |
| Structural engineering tower load study for well documented tower | \$12,600.00 | \$2,500.00 | ***System Notice: Estimate adjusted and locked because line has been superseded. *** | \$2,500.00 | N/A |
| Sub-total | \$628,770.00 | \$429,370.00 | N/A | \$274,486.00 | N/A |
| Total for all systems | \$1,727,690.50 | \$1,385,124.13 | N/A | \$996,808.27 | N/A |

Components

| Actual Information | |
|--------------------|-----------|
| Description | File Name |

| | |
|---|--|
| New tower | <div data-bbox="707 174 1374 327"> <p>Component Description: 40% downpayment for 440ft Rohn Model 90SR tower</p> <p>Amount: \$78,068.00</p> </div> <div data-bbox="707 434 1374 705"> <p>Component Description: Third payment to Rohn - second 40% progress payment towards tower structure and anchors.</p> <p>Amount: \$78,068.00</p> </div> |
| Complex Tower (includes, for example, those with candelabras and/or stacked antennas) | <div data-bbox="707 846 1353 1037"> <p>Component Description: Down payment of TWR_INSTALL portion of new tower.</p> <p>Amount: \$115,850.00</p> </div> |
| Structural engineering tower load study for well documented tower | <div data-bbox="707 1182 1369 1408"> <p>Component Description: Analysis of Rohn Model 90 tower file number 28494PH utilized by WTCI (65667).</p> <p>Amount: \$2,500.00</p> </div> |

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 | \$17,095.00 | \$9,150.00 | | \$2,521.00 | |
| FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase | \$2,105.00 | \$1,000.00 | N/A | N/A | N/A |
| ASR modification (prepare FCC Form 854) | \$2,105.00 | \$1,000.00 | N/A | N/A | N/A |
| Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application | \$2,365.00 | \$1,150.00 | N/A | N/A | N/A |
| Address transition timing and coordination issues w/ other stations and wireless | \$2,630.00 | \$1,000.00 | N/A | N/A | N/A |
| Prepare and or review reimbursement form | \$2,630.00 | \$1,000.00 | N/A | N/A | N/A |

| | | | | | |
|--|----------------|----------------|-----|--------------|-----|
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | \$5,260.00 | \$4,000.00 | N/A | \$2,521.00 | N/A |
| Sub-total | \$17,095.00 | \$9,150.00 | N/A | \$2,521.00 | N/A |
| Total for all systems | \$1,727,690.50 | \$1,385,124.13 | N/A | \$996,808.27 | N/A |

Components

| Actual Information | |
|--|---------------------------|
| Description | File Name |
| FAA consultant, including cost of preparing FAA Form 7460 (Notice of Proposed Construction), if needed for height increase | Information not provided. |
| ASR modification (prepare FCC Form 854) | Information not provided. |
| Attorney Fees -Prepare and File 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. |

Attorney Fees - Prepare and
File FCC Form 2100 (main),
Construction Permit
Application

| | |
|-------------------------------|---|
| Component Description: | Third invoice |
| Amount: | \$56.00 |
| Component Description: | Invoice #7 for Construction Permit |
| Amount: | \$50.50 |
| Component Description: | Invoice #6 for Construction Permit |
| Amount: | \$202.00 |
| Component Description: | Invoice #8 for construction permit |
| Amount: | \$136.00 |
| Component Description: | First bill from lawyers concerning construction permit |
| Amount: | \$1,892.00 |
| Component Description: | Second invoice |
| Amount: | \$78.00 |
| Component Description: | Review Public Notice on re-pack and e-mail same |
| Amount: | \$56.00 |
| Component Description: | Quarterly Transition Progress Report reminder |
| Amount: | \$50.50 |

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 | \$177,615.50 | \$169,190.10 | | \$133,849.94 | |
| Tower foundation and anchors | <i>\$127,800.00</i> | \$127,800.00 | I-beam anchors, pier pin, freight, and installation of of drilled pier foundations. Updated price after site visit by Quality Tower Services /Rohn. | \$102,240.00 | N/A |
| Mask Filter | <i>\$24,830.25</i> | \$24,830.25 | Dielectric UT6E-16W-30K mask filter and couplers | \$26,050.09 | Freight costs were not included in original quote. Additional cost is due to freight charges, |
| MVPD Notifications | <i>\$2,435.25</i> | \$2,435.25 | N/A | \$2,435.25 | Quote has not changed - dated April 19, 2018. Don't know why the amount on Form 399 request was lower. |

| | | | | | |
|---|-------------------|----------------|---|--------------|-----|
| Equipment Delivery and Handling Charges | \$6,000.00 | \$6,000.00 | Delivery charges for antenna and transmission line are unknown at this time. | N/A | N/A |
| DTV Medical Facility Notification | \$11,550.00 | \$3,124.60 | N/A | \$3,124.60 | N/A |
| Local Zoning | \$2,000.00 | \$2,000.00 | Zoning fees are unknown at this time. | N/A | N/A |
| Non-zoning permits | \$2,000.00 | \$2,000.00 | Building permits are based on actual construction costs which are unknown at this time. | N/A | N/A |
| MVPD Notification of Channel Change | \$1,000.00 | \$1,000.00 | N/A | N/A | N/A |
| Sub-total | \$177,615.50 | \$169,190.10 | N/A | \$133,849.94 | N/A |
| Total for all systems | \$1,727,690.50 | \$1,385,124.13 | N/A | \$996,808.27 | N/A |

Components

Actual Information
Description

File Name

| | | |
|---|-------------------------------|---|
| Tower foundation and anchors | Component Description: | Third payment to Rohn - second 40% progress payment towards tower structure and anchors |
| | Amount: | \$51,120.00 |
| | Component Description: | 40% downpayment for Rohn 90SR foundation materials |
| | Amount: | \$51,120.00 |
| Mask Filter | Component Description: | Mask filter to re-pack WTCI from Channel 29 to Channel 35. |
| | Amount: | \$26,050.09 |
| MVPD Notifications | Component Description: | Notification of Cable and Satellite MVPD providers WTCI - 65667 |
| | Amount: | \$2,435.25 |
| Equipment Delivery and Handling Charges | Information not provided. | |
| DTV Medical Facility Notification | Component Description: | Notification of Medical Facilities WTCI - 65667 |
| | Amount: | \$3,124.60 |
| Local Zoning | Information not provided. | |
| Non-zoning permits | Information not provided. | |
| MVPD Notification of Channel Change | Information not provided. | |

| Cost Information | Grand Total | | |
|-----------------------|-----------------------------|----------------|--------------|
| | Predetermined Cost Estimate | Estimated Cost | Actual Cost |
| Total for all systems | \$1,727,690.50 | \$1,385,124.13 | \$996,808.27 |

| 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.

| | |
|---|--|
| <p>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.</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>Bryan D Fuqua , Fuqua . SVP Technical Services</p> <p>04/16/2019</p> |

| 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>Bryan D Fuqua , Fuqua . <i>SVP</i> <i>Technical</i> <i>Services</i></p> <p>04/16/2019</p> |

Attachments