

(REFERENCE COPY - Not for submission)

## FCC Form 399: Reimbursement Request

Facility 68851 Service: DTV Call WWNY-TV Channel:

ID: Sign: **8 (High VHF)** File **0000025399** 

Number:

FRN: **0018223693** Date **02/07** 

Submitted: /2018

## Applicant Information

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

Applicant	Address	Phone	Email	Applicant Type
UNITED COMMUNICATIONS CORPORATION Doing Business As: UNITED COMMUNICATIONS CORPORATION	Thomas A. Yunt, COO 5800 7TH AVENUE KENOSHA, WI 53140 United States	+1 (703) 465- 2361	tyunt@ucclocalmedia. com	Corporation

## Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email	
[Confidential]				

### Preparer Contact Information

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

Applicant	Address	Phone	Email
James C Corbin , Corbin .  Program Director  United Communications Corp -  WWNY-TV	James Corbin 120 Arcade St Watertown, NY 13601 United States	+1 (315) 788- 3800	Jcorbin@wwnytv. net

### 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	(Per attached plan) Station will operate one of its 2 transmitter amplifiers on channel 7 at 3kw (serving 95% of the population) while retuning the other to channel 8. It will then switch to channel 8 and retune and combine the other amplifier.

### **Transmitters**

s	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	Retune Existing
	Use	Primary (Main)
	Ownership	Owned
	Owner	N/A
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
Existing Transmitter	Manufacturer	Larcan
Manufacturer and Type	Model	DTT4M

Year	2008
Туре	Solid State
Solid State Cooling	Air Cooled
Solid State Power capacity	6.5 kW

### Primary Transmitter

### **Retuning Transmitter Costs**

Section	Question	Response
New IOT Tubes	Number of Tubes (including accessories) needed	N/A
New Mask Filter	Power	Other
	Other Power	7.5 kW
New Exciter	Is a new exciter needed?	No

### 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	No
	Size	N/A
	Length	N/A
	Other Electrical Service	No
	Description	N/A
HVAC Service	Does the replacement transmitter require HVAC Service?	No
	Туре	N/A

	Size	N/A
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leashold improvement?	No
	Size	N/A
Channel 14 Costs	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

### Primary Transmitter

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

Name	Description
Retune Transmitter	(Per Attached Plan) Services per quote to retune transmitter.

#### **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	Retune Existing
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	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	Class	Full Power
Manufacturer and Type	Mounting	Top Mount
	Antenna position in stack	Тор
	Polarization	Horizontal
	Туре	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	12-Bay Batwing
ERP: (Effective Radiated Power)	42.0 kW
Manufacturer	Harris
Model	TAB-12HS
Year	2008

### Primary Antenna

### **Adjustment to Existing Antenna**

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

### Primary Antenna

### **Other Antenna Costs**

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

### Primary Antenna

#### **Other Antenna Cost Not Listed**

Name	Description
Fine Matching Antenna	(Per attached plan) Fine matching power divider, antenna.

Transmission <sup>ବୁଲାନ୍ତନ</sup>	Question	Response
Transmission Line Related Expenses	Do you have transmission line related expenses?	No

Tower
Equipment
And
Rigging
Costs

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

Outside
Professional

	Section	Question	Response
	Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
		Number of Hours	40
		Explanation	A project manager was retained to assist with developing the transition plan, keeping the project on schedule and assisting with antenna matching and the proof of performance documentation. 40hrs @ \$150 /hr.
	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
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	No
FAA Consultation (including preparation of FAA Form 7460)	No
Negotiation of Lease and other Matter for Shared Locations	No
Prepare or Review FCC Form 399 for Reimbursement	No

Attorney and Other Outside Consulting

**Services** 

	Address transition timing and coordination issues w/ other stations and wireless providers	No
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 Expenses Not Listed
Professional Services © pstsided.

## 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?	No
	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
Inside RF System	Splitting amplifiers for operation on both channel 7 and retuning to channel 8. Then combining retuned channel 8 amplifiers.
Site Survey- Transition Assessment	Site Survey to determine transition plan.

## **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 DTT4M	\$139,800.00	\$55,000.00		\$0.00	
Retune Transmitter	\$24,000.00	\$24,000.00	N/A	N/A	N/A
Other 7.5 kW mask filter	\$10,600.00	\$10,600.00	N/A	N/A	N/A
UHF and VHF - minor banding issues	\$105,200.00	\$20,400.00	N/A	N/A	N/A
Sub-total	\$139,800.00	\$55,000.00	N/A	\$0.00	N/A
Total for all systems	\$224,830.50	\$124,295.50	N/A	\$15,000.50	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
Primary Antenna TAB- 12HS	\$12,730.00	\$12,400.00		\$0.00	
Fine Matching Antenna	\$6,000.00	\$6,000.00	Estimate for a 2 man tower crew to assist with fine tuning lines and antenna.	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
High VHF - High Power Top Mount One Station horizontally polarized	\$0.00	\$0.00	N/A	N/A	N/A
Sub-total	\$12,730.00	\$12,400.00	N/A	\$0.00	N/A
Total for all systems	\$224,830.50	\$124,295.50	N/A	\$15,000.50	N/A

### Components

Information not provided.

## Cost Transmission Line

**Information** Information not provided.

## Cost Tower Equipment and Rigging Costs

**Information** 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	\$37,500.00	\$31,250.00		\$15,000.50	
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	\$1,500.00	N/A
Project management of the transition	\$6,320.00	\$6,000.00	40hrs of consultant /project management @ \$150/hr. Hourly rate is noted in Site-survey and Transition Plan Development invoice.	\$2,287.50	N/A

Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$5,823.00	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$5,390.00	Counsel preformed 15.4hrs of consultation, prep and work on and filing of Form 2100 application. 15.4hrs x \$350/hr totaled \$390 more than estimate.
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$7,360.00	\$3,500.00	Attorney fees for the filing of up to 2 STA's.	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	\$4,100.00	\$3,000.00	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
Sub-total	\$37,500.00	\$31,250.00	N/A	\$15,000.50	N/A
Total for all systems	\$224,830.50	\$124,295.50	N/A	\$15,000.50	N/A

## Components

Actual Information Description	File Name	
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Component Description:  Amount:	While invoice is labeled as "Engineering study work for new channel assignment and antenna development", some work performed was putting that information into the Form 2100 application. \$1,500.00
Project management of the transition	Component Description: Amount:	6.25hrs of project mgmt \$937.50
	Component Description: Amount:	Project Mgmt \$1,350.00

Perform engineering study for new channel assignment and antenna development

Component Description: 2nd installment on

Engineering study

for channel assignment and antenna

development.

**Amount:** \$1,500.00

Component Description: First installment

/initial Engineering study for channel assignment and

antenna

development.

**Amount:** \$1,000.00

Component Description: Field study and

line sweeps related to study for new

channel

assignment and

antenna development.

**Amount:** \$3,323.00

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

Component Description: 13.8hrs of legal

work for

preparation and filing of Form 2100

application.

**Amount:** \$4,830.00

Component Description: 1.6hrs of Legal

counsel prep work for Form 2100 application filing.

**Amount:** \$560.00

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), Construction Permit 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	\$34,800.50	\$25,645.50		\$0.00	
MVPD Notification of Channel Change	\$100.00	\$100.00	2 hours @ \$25/hr to compose, compile, print and prepare for mailing 7 MVPD letters, plus Registered mailing of said letters.	N/A	N/A
Develop and air announcement of upcoming channel change	\$7,900.00	\$7,900.00	ROS schedule of 60 spots @ \$150ea and \$400 of production charges to create spots. (Noted in attachments)	N/A	N/A
Equipment Delivery and Handling Charges	\$2,500.00	\$2,500.00	Per attached proposal.	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$2,450.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,070.00	Fee already paid.	N/A	N/A

FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	Anticipated fee, per Legal Counsel's conversation with Joyce Bernstein, filing fees were not waived in the Report & Order.	N/A	N/A
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$350.00	\$350.00	WWNY now estimates minimal disposal costs. A 30cu /ft dumpster and 55ton of rubbish removal costs approximately \$350. (See attached).	N/A	N/A
Site Survey- Transition Assessment	\$4,260.50	\$4,260.50	Site Survey to inspect, test existing equipment and determine a transition plan. Invoice attached.	N/A	N/A

Inside RF	\$6,500.00	\$6,500.00	(Per	N/A	N/A
System			transition		
			plan) split the		
			transmitter to		
			operate one		
			of the 2		
			amplifiers on		
			channel 7		
			while retuning		
			the other		
			amplifier to		
			channel 8.		
			Then to		
			combine the		
			amplifiers		
			after both are		
			retuned to		
			channel 8.		
Sub-total	\$34,800.50	\$25,645.50	N/A	\$0.00	N/A
Total for all systems	\$224,830.50	\$124,295.50	N/A	\$15,000.50	N/A

### Components

Information not provided.

## Cost Information

### **Grand Total**

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$224,830.50	\$124,295.50	\$15,000.50

Reimbursem	envestiatus	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

Section Question Response

# Submission of Actual Cost Documentation Statements

WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISIONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).

- 1. The Authorized
  Person signing
  below certifies and
  represents that he
  /she is authorized to
  submit this TV
  Broadcaster
  Relocation Fund
  Reimbursement
  Form on behalf of
  the above-named
  entity.
- 2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.
- The above-named entity acknowledges that all certifications and attached documentation are considered material representations.

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

- 8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.
- 9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested.

I declare, under penalty of perjury, that I am an authorized representative of the abovenamed applicant for the Authorization(s) specified above. James C Corbin Program Director

02/07/2018

#### **Attachments**