

Federal Communications Commission

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

| | | | - | | | |
|-----------------|----------|--------------|-------|---------|-------------------|--|
| Facility | 131 | Service: DTV | Call | WOTF-TV | Channel: 15 (UHF) | |
| ID: | | | Sign: | | | |
| File | 0000 | 028355 | | | | |
| Number: | | | | | | |
| FRN: 000 | 01529627 | Date | 07/30 | | | |
| | | Submitted: | /2018 | | | |

Applicant Name, Type, and Contact Information

Applicant Information

| n | Applicant | Address | Phone | Email | Applicant Type |
|---|------------------------------|--|----------------------|-----------------------------|---------------------------------|
| | ENTRAVISION HOLDINGS, LLC | Mark Boelke Suite 6000 West 2425 Olympic Boulevard Santa Monica, CA 90404 United States | +1 (310) 447-3896 | mboelke@entravision. com | Limited Liability Company |

Reimbursement Contact Name and Information Reimbursement Contact Information

| Applicant | Address | Phone | Email |
|----------------|---------|-------|-------|
| [Confidential] | | | |

Preparer Contact Name and Information

| Samuel Hariton+1 (339) 222-8107sam.hariton@widelity.comWidelity4031 University Dr | Contact Information | Applicant | Address | Phone | Email |
|---|------------------------|-----------|--|-------------------|--------------------------|
| Suite 100 Fairfax, VA 22030 United States | | | 4031 University Dr Suite 100 Fairfax, VA 22030 | +1 (339) 222-8107 | sam.hariton@widelity.com |

| Broadcaster | Question | Response |
|--|--|---|
| Information and Transition Plan | Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information. | Yes |
| | Briefly describe transition plan | The plan is for WVEN-TV to replace the existing Channel 49 system with a new Channel 15 antenna, new 4-1/16" line, and a new transmitter. |

| Transmitters | Section | Question | Response |
|--------------|---------------------------------|---|----------|
| | Transmitter Related Expenses | Do you have transmitter related expenses? | Yes |

| Primary Transmitter | Existing Transmitter Information | | | | |
|------------------------|-------------------------------------|--|-------------------|--|--|
| Transmitter | 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 | | | |
| | Manufacturer and Type | Model | DHD60P2 | | |
| | | Year | 2005 | | |
| | | Туре | Solid State | | |
| | | Solid State Cooling | Air Cooled | | |
| | | Solid State Power Capacity | 14 kW | | |

Existing Transmitter Information

| Primary | New Transmitter Costs | | |
|-------------|-----------------------|---|--|
| Transmitter | Section | Question | Response |
| | New Transmitter | Use | Primary (Main) |
| | | Change Type | Purchase New |
| | | Is this a request for upgraded equipment? | No |
| | | Manufacturer | |
| | | Model | UAXTE- 12R44 |
| | | Transmitter Type | Solid State |
| | | Solid State Cooling | Air Cooled |
| | | Solid State Power capacity | 12 kW |
| | | Justification for New Transmitter | New transmitter is necessary because the existing transmitter is not capable of being retuned as the manufacturer has stated in attached letter. The Power level for this transmitter accounts for the lower gain new main antenna. |

Primary Other Transmitter Costs Transmitter Section

Question

| Electrical Service | Service Entrance (3 phases 800A 208V) | Yes |
|---|--|-----|
| | 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 Other Transmitter Cost Not Listed

Transmitter Information not provided.

| Antennas Section | | Question | Response |
|------------------|---------------|---------------------------------------|----------|
| Antenna Rela | ated 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 | Class | Full Power | | | |
| | Manufacturer and Type | Mounting | Side Mount | | | |
| | | Antenna position in stack | Not in Stack | | | |
| | | Polarization | Horizontal | | | |
| | | Туре | 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) | 120.0 kW | | | |
| | | | | | | |

| Manufacturer | |
|--------------|-----------------|
| Model | TFU- 24DSB-A |
| Year | 2005 |

| Primary | New Antenna Costs | | | | |
|---------|---------------------------------------|--|--------------------|--|--|
| Antenna | 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? | Yes | | |
| | | 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 | Side Mount | | |
| | | Antenna position in stack | Not in Stack | | |
| | | Polarization | Horizontal | | |
| | | Туре | 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) | 59.0 kW | | |
| | | Manufacturer | | | |
| | | | | | |

| Model | TFU-12DSE A-R |
|-------------------------------|---|
| Year | 2017 |
| Justification for New Antenna | A new antenna is necessary because the existing antenna cannot be retuned to the new channel and is not capable of broadcastin on channel 15. |

Primary Other Antenna Costs

| Antenna | 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 |
| Elbow Complex | | 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? | Yes |
|--------------------------|---|-----|
| Pattern Scatter Analysis | Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna? | No |
| Sweep Test | Do you require the sweep testing of transmission line and antenna? | Yes |

Primary Other Antenna Cost Not Listed

Antenna Information not provided.

| Transmissior | n Seffien | Question | Response |
|--------------|---------------------------------------|---|----------|
| | Transmission Line Related Expenses | Do you have transmission line related expenses? | Yes |

| ransmissio | n 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 | Manufacturer | |
| | Line Manufacturer and Type | Туре | Rigid |
| | | Diameter | 4 1/16 inches |
| | | Other Diameter | N/A |
| | | Segment Length | 20 inches |
| | | Other Segment Length | N/A |
| | | Number of parallel runs | 1 |
| | | Length | 1560 feet per run |

Primary Existing Transmission Line

| Primary Transmissio | n Linen | 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 |
| | | Туре | Rigid |
| | | Diameter | 4 1/16 inches |
| | | Other Diameter | N/A |
| | | Segment Length | 20 inches |
| | | Other Segment Length | N/A |
| | | Number of parallel runs | 1 |
| | | Length | 1560 feet per run |

Other Transmission Line Expenses Not Listed Transmission

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

Primary Existing Tower

| • | | •• | • | | • • |
|---|---|----|---|----|-----|
| Т | C |)V | V | er | • |

| Section | Question | Response |
|-----------------------------------|---|-------------------|
| Existing Tower | Type of change | Modify Existing |
| Description | 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? | No |
| | Is tower compliant with Rev G? | Yes |
| Existing Tower | Do you have a tower registration number? | Yes |
| Structure Registration | ASR Number | 1020781 |
| Coordinates (NAD83 (| Latitude (NAD83) | 28° 55' 11.1" N- |
| North American Datum of 1983)) | Longitude (NAD83) | 081° 19' 06.6" W- |
| | Overall Structure Height | 1682.07 feet |
| | Support Structure Height | 1631.87 feet |
| | Ground Elevation Above Mean Sea Level (AMSL) | 58.07 feet |
| | | |

| Structure Type | GTOWER - Guyed Structure Used for Communication Purposes |
|------------------|---|
| Tower Owner | SpectraSite Communications LLC. through American Towers, LLC. |
| Date Constructed | 07/01/2008 |

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 |
|-------------|-----------|---------|
| 41225 | WOFL | DTV |
| 51981 | WMGF | FM |
| 10138 | WOCL | FM |
| 73137 | WQMP | FM |
| 70651 | WOGX | DTV |
| 71293 | WKMG-TV | DTV |

Other Types of Users

Users

6 msc Microwave

Tower Modification Costs Primary Tower Section

Question

Response

| Engineering Study | Please what type of engineering study is required, if any: | Study needed for undocumented /poorly documented tower |
|----------------------|--|---|
| Tower Reinforcements | Please select whether tower reinforcements are needed: | Minor Reinforcements needed |

Primary Tower Section

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

rimony Other Tower Expenses Not Listed

Primary Tower

| Name | Description |
|--------------------|---|
| Structural Analyis | A Structural Analysis is required once the Mapping is complete. |

| Outside | Section | Question | Response |
|--------------|--|--|---|
| Professional | Services Costs Outside Project Management Services | Do you require outside project management services? | Yes |
| | | Number of Hours | 712 |
| | | Explanation | WVEN-TV does not have sufficient resource capacity and expertise in house to handle all of the reimbursement filing by the Phase 7 Construction Date of May 1, 2020. WVEN- TV will hire an outside firm to ensure a timely and well managed transition. |
| | 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 | 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 | Prepare and file Form FCC Construction Permit Application | Yes |
| Services | For Auxiliary Facility | No |
| | For Main Facility | Yes |
| | Prepare and file Form FCC License to Cover Application | Yes |
| | For Auxiliary Facility | No |
| | For Main Facility | Yes |
| | Prepare request for Special Temporary Authority | No |
| | Quantity | N/A |
| | NEPA Section 106 environmental review | Yes |
| | Environmental Assessment | Yes |
| | 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 | No |
| | RF exposure measurements | Yes |
| | Additional Field Engineering Service | No |
| | Number of Days | N/A |
| | | |

Other Professional Services Expenses Not Listed Professional Services roostsided.

| Other | Section | Question | Response |
|----------|---------------------------------|--|----------|
| Expenses | 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 | 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 Not Listed

Expenses Information not provided.

Transmitters

Cost Information

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

| Description | Predetermined Cost Estimate | Estimated Cost | Estimated Cost Justification | Actual Cost | Actual Cost Justification |
|---|--------------------------------|-------------------|------------------------------------|----------------|------------------------------|
| Primary Transmitter UAXTE- 12R44 | \$350,900.00 | \$333,700.00 | | \$0.00 | |
| UHF - Air Cooled Solid State Transmitter 10 - 12 kW | \$336,500.00 | \$320,000.00 | N/A | N/A | N/A |
| Service entrance 3 phase/800 amp/208 volt | \$14,400.00 | \$13,700.00 | N/A | N/A | N/A |
| Sub-total | \$350,900.00 | \$333,700.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$1,367,176.00 | \$1,256,994.00 | N/A | \$42,717.93 | N/A |

Components

Information not provided.

Antennas

Cost Information

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 TFU- 12DSB-A-R | \$128,850.00 | \$76,379.00 | | \$0.00 | |
| UHF - Lower Power Side Mount, One station antenna - medium power (50- 200 kW), horizontally polarized | \$89,400.00 | \$37,646.00 | Dielectric quote #513324JKT Rev1 | N/A | N/A |
| Sweep test of existing antenna | \$6,730.00 | \$10,000.00 | Chuck Britt quote attached | N/A | N/A |
| Elbow complex, single channel, at antenna input, per 4 1/16. feedline (if needed) | \$9,570.00 | \$6,733.00 | Dielectric quote #513324JKT Rev1 | N/A | N/A |

| power antennas (if not included in | | | | | |
|---|----------------|----------------|-----|-------------|-----|
| antenna base cost) | | | | | |
| Sub-total | \$128,850.00 | \$76,379.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$1,367,176.00 | \$1,256,994.00 | N/A | \$42,717.93 | N/A |

Components

Information not provided.

Transmission Line

Cost Information

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 | \$221,520.00 | \$210,600.00 | | \$0.00 | |
| Rigid Transmission Line - copper, 4 1 /16" | \$221,520.00 | \$210,600.00 | N/A | N/A | N/A |
| Sub-total | \$221,520.00 | \$210,600.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$1,367,176.00 | \$1,256,994.00 | N/A | \$42,717.93 | N/A |

Components

Information not provided.

Tower Equipment and Rigging Costs

Cost Information

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 GTOWER | \$406,800.00 | \$387,000.00 | | \$14,823.68 | |
| Tower mapping for an undocumented /poorly documented tower and preparation of documentation necessary for tower load study | \$26,300.00 | \$25,000.00 | N/A | \$14,823.68 | N/A |
| Tall Tower (greater than 500') | \$210,500.00 | \$200,000.00 | N/A | N/A | N/A |
| Structural Analyis | \$12,000.00 | \$12,000.00 | N/A | N/A | N/A |
| Minor tower reinforcement /modifications | \$158,000.00 | \$150,000.00 | N/A | N/A | N/A |
| Sub-total | \$406,800.00 | \$387,000.00 | N/A | \$14,823.68 | N/A |
| Total for all systems | \$1,367,176.00 | \$1,256,994.00 | N/A | \$42,717.93 | N/A |

Components

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

| Tower mapping for an undocumented/poorly documented tower and preparation of documentation necessary for tower load study | Component Description: Amount: | Mapping Existing Tower \$14,823.68 |
|--|-----------------------------------|--|
| Tall Tower (greater than 500') | Information not provided. | |
| Structural Analyis | Information not provided. | |
| Minor tower reinforcement /modifications | Information not provided. | |

Outside Professional Services

Cost Information

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 | \$183,776.00 | \$174,550.00 | | \$27,894.25 | |
| RF Exposure Measurements | \$21,050.00 | \$20,000.00 | N/A | N/A | 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 |
| Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet | \$10,520.00 | \$10,000.00 | N/A | N/A | N/A |
| NEPA Section 106 environmental review, if needed | \$6,310.00 | \$6,000.00 | N/A | N/A | N/A |

| Attorney Fees - Negotiation of lease and other matters for shared locations | \$4,210.00 | \$4,000.00 | 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 |
| 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 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 | \$2,625.00 | N/A |
| Perform engineering study for new channel assignment and antenna development | \$7,360.00 | \$7,000.00 | N/A | \$437.50 | N/A |

| Project management of the transition | \$112,496.00 | \$106,800.00 | N/A | \$24,831.75 | N/A |
|--|----------------|----------------|-----|-------------|-----|
| Prepare and or review reimbursement form | \$2,630.00 | \$2,500.00 | N/A | N/A | 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 |
| Sub-total | \$183,776.00 | \$174,550.00 | N/A | \$27,894.25 | N/A |
| Total for all systems | \$1,367,176.00 | \$1,256,994.00 | N/A | \$42,717.93 | N/A |

Components

| Actual Information Description | File Name |
|--|---------------------------|
| RF Exposure Measurements | Information not provided. |
| 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. |
| Environmental Assessment, if triggered by NEPA Section 106 review or for certain structures over 450 feet | Information not provided. |
| NEPA Section 106 environmental review, if needed | Information not provided. |
| Attorney Fees - Negotiation of lease and other matters for shared locations | Information not provided. |

| Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application | Information not provided. | |
|---|---------------------------|--|
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | Information not provided. | |
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application | Information not provided. | |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | Component Description: | Preparation of the engineering section of FCC Form 2100 |
| | Amount: | \$625.00 |
| | Component Description: | Preparation of the engineering section of FCC Form 2100 |
| | Amount: | \$2,000.00 |
| Perform engineering study for new channel assignment and antenna development | Component Description: | Engineering study work for new channel assignment |
| | Amount: | including antenna development. \$437.50 |
| | | |
| Project management of the transition | Component Description: | Project |
| | Amount: | management \$3,390.40 |
| | | |
| | Component Description: | Project Management |

| Component Description: Amount: | Project Management \$1,675.35 |
|-----------------------------------|-------------------------------------|
| Component Description: Amount: | Project Management \$2,432.95 |
| Component Description: Amount: | Project manager \$2,950.75 |
| Component Description: Amount: | Project management \$1,193.70 |
| Component Description: Amount: | Project Management \$2,027.35 |
| Component Description: Amount: | Project management \$778.60 |
| Component Description: Amount: | Project management \$1,165.65 |
| Component Description: Amount: | Project Management \$1,653.00 |
| Component Description: Amount: | Project management \$1,959.20 |

| | Component Description: Amount: | Project management \$2,274.45 |
|--|-----------------------------------|-------------------------------------|
| | Component Description: | Project management |
| | Amount: | \$1,535.85 |
| | Component Description: | Project |
| | Amount: | management \$148.20 |
| Prepare and or review reimbursement form | Information not provided. | |
| Address transition timing and coordination issues w/ | Information not provided. | |

Other Expenses

Cost Information

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 | \$75,330.00 | \$74,765.00 | | \$0.00 | |
| MVPD Notification of Channel Change | \$750.00 | \$750.00 | N/A | N/A | N/A |
| Develop and air announcement of upcoming channel change | \$15,000.00 | \$15,000.00 | N/A | N/A | N/A |
| Equipment Storage | \$15,000.00 | \$15,000.00 | N/A | N/A | N/A |
| Equipment Delivery and Handling Charges | \$15,000.00 | \$15,000.00 | N/A | N/A | N/A |
| Disposal Costs (for equipment and other waste, net of any salvage value) | \$10,000.00 | \$10,000.00 | N/A | N/A | N/A |
| Non-zoning permits | \$2,500.00 | \$2,500.00 | N/A | N/A | N/A |
| DTV Medical Facility Notification | \$11,550.00 | \$11,000.00 | 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 - Special Temporary Authorization request | \$195.00 | \$190.00 | N/A | N/A | N/A |
|---|----------------|----------------|-----|-------------|-----|
| Local Zoning | \$5,000.00 | \$5,000.00 | N/A | N/A | N/A |
| Sub-total | \$75,330.00 | \$74,765.00 | N/A | \$0.00 | N/A |
| Total for all systems | \$1,367,176.00 | \$1,256,994.00 | N/A | \$42,717.93 | N/A |

Components

Information not provided.

| Cost | Grand Total | | | | | |
|-------------|-----------------------|--------------------------------|----------------|-------------|--|--|
| Information | | Predetermined Cost Estimate | Estimated Cost | Actual Cost | | |
| | Total for all systems | \$1,367,176.00 | \$1,256,994.00 | \$42,717.93 | | |

| Reimbursem | entestiatus | 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. | |
| | | 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. 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).
- 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.

| 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. | Manuel Cavazos , III . EVP - Director of Technology 07/30/2018 |

| 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 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). | |
| | | 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).
- 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. | Manuel Cavazos , III . EVP - Director of Technology |

Attachments