



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **63840** | Service: **DTV** | Call **WSVN** | Channel: **9 (High VHF)** |  
ID:  
File **0000026383**  
Number:  
FRN: **0001800168** | Date **03/26**  
Submitted: **/2019**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>SUNBEAM TELEVISION CORPORATION</b> Doing Business As: SUNBEAM TELEVISION CORPORATION	ROBERT LEIDER 1401 79TH STREET CAUSEWAY MIAMI, FL 33141 United States	+1 (305) 751-6692	RLEIDER@WSVN.COM	Corporation

## Reimbursement Contact Information

### Reimbursement Contact Name and Information

Applicant	Address	Phone	Email
[Confidential]			

## Preparer Contact Information

### Preparer Contact Name and Information

Applicant	Address	Phone	Email
The Preparer is same as the reimbursement contact.			

## Broadcaster Information and Transition Plan

Question	Response
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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	We share the same tower

## Transmitters

Section	Question	Response
<b>Transmitter Related Expenses</b>	Do you have transmitter related expenses?	Yes

**Auxiliary  
Transmitter**

**Add Transmitter Information**

Section	Question	Response
<b>Existing Transmitter Description</b>	Type of change	Purchase New
	Use	Auxiliary (Base)
	Description of Use	Aux Unit
	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
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	Platinum PTCD40P41
	Year	1999
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	10 kW

Auxiliary  
Transmitter

New Transmitter Costs

Section	Question	Response
New Transmitter	Use	Auxiliary (Ba
	Change Type	Purchase Ne
	Is this a request for upgraded equipment?	Yes
	Manufacturer	
	Model	VAXTE-16R
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	8 kW
	Justification for New Transmitter	Current transmitter is channel spe

Auxiliary  
Transmitter

Other Transmitter Costs

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	Yes
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No
	Power	N/A
	Rigid Conduit and Wiring	Yes
	Size	3 inches
	Length	20.0 feet
	Other Electrical Service	No
	Description	N/A
HVAC Service	Does the replacement transmitter require HVAC Service?	Yes
	Type	Cooling Only

	Size	30 tons
	Other Size	N/A
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
<b>Channel 14 Costs</b>	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

## Auxiliary Transmitter

### Other Transmitter Cost Not Listed

Information not provided.

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	Platinum PTCD40P4I
	Year	2008
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	16 kW

Primary  
Transmitter

New Transmitter Costs

Section	Question	Response
New Transmitter	Use	Primary (Ma
	Change Type	Purchase Ne
	Is this a request for upgraded equipment?	Yes
	Manufacturer	
	Model	VAXTE-16R
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	16 kW
	Justification for New Transmitter	Current transmitter o made for ch 7, cannot ret

Primary  
Transmitter

Other Transmitter Costs

Section	Question	Response
Electrical Service	Service Entrance (3 phases 800A 208V)	Yes
	Switchgear (industrial 800 amp)	No
	Transformer (480V)	No
	Power	N/A
	Rigid Conduit and Wiring	Yes
	Size	3 inches
	Length	20.0 feet
	Other Electrical Service	No
	Description	N/A
HVAC Service	Does the replacement transmitter require HVAC Service?	Yes
	Type	Cooling Only

	Size	30 tons
	Other Size	N/A
<b>Transmitter Building Addition/Modification or Leasehold Improvement</b>	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
	Size	N/A
<b>Channel 14 Costs</b>	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

**Primary  
Transmitter**

**Other Transmitter Cost Not Listed**

Information not provided.



**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?	Yes
Existing Antenna Manufacturer and Type	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Top
	Polarization	Elliptical
	Type	Slotted Coax
	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) .....	158.0 kW
	Manufacturer	

Model	THV-10A7/V P210
Year	2009

Primary  
Antenna

New Antenna Costs

Section	Question	Response
New Antenna Description	Use	Primary (Ma
	Description of Use	N/A
	Change Type	Purchase Ne
	Is this a request for upgraded equipment?	Yes
	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?	Yes
New Antenna Manufacturer and Types	Class	Full Power
	Mounting	Top Mount
	Antenna position in stack	Top
	Polarization	Elliptical
	Type	Slotted Coax
	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)	158.0 kW
	Manufacturer	
	Model	THV-10A9/V P200 D9
	Year	2017

	Justification for New Antenna	Old Antenna made for 7 c Our new ant paperwork s the antenna circularly or elliptically polarized, ar the antenna model numb does have th VP in it.
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**Primary  
Antenna**

**Other Antenna Costs**

Section	Question	Response
<b>Combiner for Shared Antenna</b>	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
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	Single Chan
	Feed Line Size	4 1/16 inch es
<b>Side Mount Brackets</b>	Do you require the separate purchase of side mount brackets for a high power antenna?	Yes
<b>Pattern Scatter Analysis</b>	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
<b>Sweep Test</b>	Do you require the sweep testing of transmission line and antenna?	Yes

**Primary  
Antenna**

**Other Antenna Cost Not Listed**

Information not provided.

**Interim  
Antenna**

**New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	Yes
<b>New Antenna Manufacturer and Type</b>	Class	Full Power
	Mounting	Side Mount
	Antenna position in stack	Middle
	Polarization	Horizontal
	Type	Slotted Coax
	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)	11.7 kW
	Manufacturer	
	Model	TLS-V4BB
	Year	2017
	Justification for New Antenna	current can't do 7

**Interim  
Antenna**

**Other Antenna Costs**

Section	Question	Response
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	Yes
	Broadband or Single Channel?	S
	Feed Line Size	3 1/8 inches
Side Mount Brackets	Do you require the separate purchase of side mount brackets for an 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

**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 Ne
	Use	Primary (Ma
	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 inch
	Other Diameter	N/A
	Segment Length	20 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1065 feet pe

Primary  
Transmission  
Line

New Transmission Line

Section	Question	Response
New Transmission Line Costs	Use	Primary (Ma
	Description of Use	N/A
	Change Type	Purchase Ne
	Is this a request for upgraded equipment?	Yes
	Type	Rigid
	Diameter	4 1/16 inche
	Other Diameter	N/A
	Segment Length	20 inches
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1065 feet pe
	Justification for New Transmission Line	Old line was channel 7

Primary  
Transmission  
Line

Other Transmission Line Expenses Not Listed

Information not provided.

<b>Interim Transmission Line</b>	<b>New Transmission Line</b>		
	<b>Section</b>	<b>Question</b>	<b>Response</b>
	<b>New Transmission Line Costs</b>	Use	Interim
		Description of Use	N/A
		Change Type	Purchase Ne
		Type	Rigid
		Diameter	3 1/8 inches
		Segment Length	20'
		Other Segment Length	
		Number of parallel runs	2
		Length	800 feet per
		Justification for New Transmission Line	Old line was

**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	Modify Exist
	Tower Use	Primary (Ma
	Description of Use	N/A
	Ownership	Owned
	Is this tower consider Complex?	Candelabra
	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?	Yes
Existing Tower Structure Registration	Do you have a tower registration number?	Yes
	ASR Number	1262187
Coordinates (NAD83 ( North American Datum of 1983))	Latitude (NAD83)	25° 58' 01.0'
	Longitude (NAD83)	080° 12' 42.0'
	Overall Structure Height	1041.98 feet
	Support Structure Height	952.09 feet
	Ground Elevation Above Mean Sea Level (AMSL)	6.89 feet
	Structure Type	TOWER - Fr Standing or Guyed Struc
	Tower Owner	Miami Towe

	Date Constructed	08/22/2009
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**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
53113	WPLG	DTV

**Primary  
Tower**

**Tower Modification Costs**

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	Study needed tower with candelabra
Tower Reinforcements	Please select whether tower reinforcements are needed:	No reinforcement needed

**Primary  
Tower**

**Tower Rigging Costs**

Section	Question	Response
Tower Rigging Costs	Complex Tower	Candelabra
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
<b>Outside Project Management Services</b>	Do you require outside project management services?	No
	Number of Hours	N/A
	Explanation	N/A
<b>Outside RF consulting Engineering Services</b>	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
<b>Attorney and Other Outside Consulting Services</b>	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	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	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	No
<b>RF Field Engineering Services</b>	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**

Name		Description
Herman Hurst		Consulting Engineer for construction permit



## 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	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?	No
	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
EIA Length	T/L 4-50 EIA Length 10 to 15' Fixed

<b>Elbow 4-50 Digit Main</b>	Elbow 4-50 Digit 7x14
<b>Taxes</b>	Taxes, with Matching Documentation
<b>Freight</b>	Freight costs, which I am told need no match quote.
<b>Support Pole</b>	Ch 9 antenna is 30 feet shorter then Ch 7 Antenna and we need to maintain the same height as Ch 7 antenna. Therefore we have to construct a 30' base pole for ch 9 antenna.

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
Primary Transmitter VAXTE-16R44	\$380,807.99	\$380,047.99	
Other -- HVAC Service Type: C Size:30 (Other)	\$33,500.00	\$33,500.00	One HVAC needs to be replaced
High VHF - Air Cooled Solid State Transmitter 16 kW	\$331,867.99	\$331,867.99	N/A
Service entrance 3 phase/800 amp/208 volt	\$14,400.00	\$13,700.00	N/A
3" Rigid Conduit and Wiring (Cost per foot)	\$1,040.00	\$980.00	N/A
Auxiliary Transmitter VAXTE-16R44	\$346,940.00	\$290,473.87	
Service entrance 3 phase/800 amp/208 volt	\$14,400.00	\$13,700.00	N/A

High VHF - Air Cooled Solid State Transmitter 6.5 . 12.5 kW	\$331,500.00	\$275,793.87	Quote includes Freight, but not taxes (which we will do separately). Freight will be included in "Other" area. Quote in file "GatesAir_Invoice_TE10004389_Quote_GA-00022212_Fixed"
3" Rigid Conduit and Wiring (Cost per foot)	\$1,040.00	\$980.00	N/A
Other -- HVAC Service Type: C Size:30 (Other)	<b>\$0.00</b>	\$0.00	N/A
<b>Sub-total</b>	\$727,747.99	\$670,521.86	N/A
<b>Total for all systems</b>	\$2,200,871.83	\$1,721,697.60	N/A

## Components

Actual Information Description	File Name
Other -- HVAC Service Type: C Size:30 (Other)	Information not provided.

High VHF - Air Cooled Solid State Transmitter 16 kW	<b>Component Description:</b> Main Transmitter, 2n Deposit	
	<b>Amount:</b> \$104,361.00	
	<b>Component Description:</b> Main Transmitter Site Survey, quote is file "Gates Air Site Surve Quote"	
	<b>Amount:</b> \$17,770.00	
	<b>Component Description:</b> Main Transmitter, 1s Deposit	
	<b>Amount:</b> \$102,277.67	
Service entrance 3 phase/800 amp /208 volt	Information not provided.	
3" Rigid Conduit and Wiring (Cost per foot)	Information not provided.	
Service entrance 3 phase/800 amp /208 volt	Information not provided.	
High VHF - Air Cooled Solid State Transmitter 6.5 . 12.5 kW	<b>Component Description:</b> Additional Parts for Aux Transmitter.	
	<b>Amount:</b> \$2,231.55	
	<b>Component Description:</b> Aux Transmitter, 1/3 down payment. Note fixed Quote and fixe Invoice to correct Gates' rounding issues. Quote re-fixe with correct Faculty I	
	<b>Amount:</b> \$89,864.62	
3" Rigid Conduit and Wiring (Cost per foot)	Information not provided.	
Other -- HVAC Service Type: C Size:30 (Other)	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 Justifi
<b>Interim Antenna TLS-V4BB</b>	<b>\$74,040.00</b>	<b>\$58,936.32</b>		<b>\$58,032.00</b>	
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$8,530.88	N/A	\$8,048.00	N/
Elbow complex, single channel, at antenna input, per 3 1/8. feedline (if needed)	\$7,600.00	\$7,445.44	See attached quote	\$7,024.00	N/
High VHF - High Power Side Mount One Station horizontally polarized	<b>\$36,560.00</b>	\$36,560.00	Freight not included	\$36,560.00	Frei costs inclu (lines invoi Tax also dor separ
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$6,400.00	Sweep
<b>Primary Antenna THV-10A9 /VP P200 D9</b>	<b>\$432,950.00</b>	<b>\$367,784.80</b>		<b>\$6,834.00</b>	

High-VHF, One station antenna -- top mount, elliptically or circularly polarized	\$393,500.00	\$330,792.80	Tax, freight not included. They will be done in Other costs. Note, matching quote is file: "Main_Antenna_- _44893_Confirmation" which also includes other items including Elbow Complex and Transmission wire that are invoices elsewhere.	\$0.00	See n attac fil
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	\$6,834.00	Pri inclu Tax,   direct the Fl Depart of Rev
Elbow complex, single channel, at antenna input, per 4 1/16. feedline (if needed)	\$9,570.00	\$8,592.00	Cost for Elbow complex, invoice line 2	\$0.00	Se attac note, € compl for li
Side mount brackets for high power antennas (if not included in antenna base cost)	\$23,150.00	\$22,000.00	N/A	N/A	N/
<b>Sub-total</b>	\$506,990.00	\$426,721.12	N/A	\$64,866.00	N/
<b>Total for all systems</b>	\$2,200,871.83	\$1,721,697.60	N/A	\$699,070.39	N/

## Components



Actual Information Description	File Name
Side mount brackets for high power antennas (if not included in antenna base cost)	<div> <b>Component Description:</b> Line 2 of invoice. Tax will be done separately </div> <div> <b>Amount:</b> \$8,048.00 </div>
Elbow complex, single channel, at antenna input, per 3 1/8. feedline (if needed)	<div> <b>Component Description:</b> Line 3 of invoice. Tax will be done separately </div> <div> <b>Amount:</b> \$7,024.00 </div>
High VHF - High Power Side Mount One Station horizontally polarized	<div> <b>Component Description:</b> Freight not included. Tax will be done separately </div> <div> <b>Amount:</b> \$36,560.00 </div>
Sweep test of existing antenna	<div> <b>Component Description:</b> Sweep Test </div> <div> <b>Amount:</b> \$6,400.00 </div>
High-VHF, One station antenna -- top mount, elliptically or circularly polarized	<div> <b>Component Description:</b> Items received, but Freight charges in invoice have no matching line in the quote. See note in attached file. Amount here is for Antenna only, not including elbow complex or Freight or Elbow 4-50. </div> <div> <b>Amount:</b> \$330,792.80 </div>
Sweep test of existing antenna	<div> <b>Component Description:</b> Price includes Tax, paid directly to the Florida Department of Revenue </div> <div> <b>Amount:</b> \$6,834.00 </div>

Elbow complex, single channel, at antenna input, per 4 1/16. feedline (if needed)	<b>Component Description:</b>  <b>Amount:</b>	See attached note. Price for Elbow is Invoice line 2 \$8,592.00
Side mount brackets for high power antennas (if not included in antenna base cost)	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 Justification
Interim Transmission Line	\$166,400.00	\$78,598.58		\$0.00	
Rigid Transmission Line - copper, 3 1/8"	\$166,400.00	\$78,598.58	N/A	N/A	N/A
Primary Transmission Line	\$151,230.00	\$118,211.20		\$0.00	
Rigid Transmission Line - copper, 4 1/16"	\$151,230.00	\$118,211.20	See file "Dielectric 44893 Transmission Line Item 5" (on line 5)	\$0.00	87005 bec move Oth /Frei alrea
Sub-total	\$317,630.00	\$196,809.78	N/A	\$0.00	N/A
Total for all systems	\$2,200,871.83	\$1,721,697.60	N/A	\$699,070.39	N/A

Components

Actual Information Description	File Name
Rigid Transmission Line - copper, 3 1/8"	Information not provided.

Rigid Transmission Line - copper,  
4 1/16"

**Component Description:**

Freight for  
Transmission Line,  
moved to Other  
expenses, but I don't  
see a way to remove  
this line.

**Amount:**

N/A

**Component Description:**

Freight and taxes to be  
included in "other"  
costs. Cost for  
transmission line is list  
1. Note, invoice total is  
correct (I am ignoring  
the sales scribble).

**Amount:**

\$111,520.00

**Component Description:**

Freight for  
Transmission Line,  
working on getting a  
matching quote.

**Amount:**

\$1,612.55

**Component Description:**

Transmission Line and  
1 day of Engineer (line  
1 and 5). Freight to be  
done in "Other"  
expenses area.  
Matches quote 44893  
(not all of quote 4489  
is in this invoice). Tax  
will be submitted  
separately, please  
ignore hand tax notes

**Amount:**

\$9,712.00

**Component Description:**

Freight for  
Transmission Line,  
moved to Other  
expenses, freight. Can  
kill the line.

**Amount:**

N/A



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 Justification
Primary Tower TOWER	\$441,000.00	\$214,286.00		\$195,286.00	
Structural engineering tower load study for a documented tower with candelabra	\$20,000.00	\$16,936.00	Uploaded FDH Velocitel Stainless Structural Analysis Quote	\$16,936.00	N/A
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	\$421,000.00	\$197,350.00	N/A	\$178,350.00	N/A
Sub-total	\$441,000.00	\$214,286.00	N/A	\$195,286.00	N/A
Total for all systems	\$2,200,871.83	\$1,721,697.60	N/A	\$699,070.39	N/A

Components

Actual Information Description	File Name
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Structural engineering tower load study for a documented tower with candelabra	<b>Component Description:</b>		Tower Study & Structural Analysis (see file FDH Velocity Stainless Structural Analysis.pdf)
	<b>Amount:</b>		\$8,468.00
	<b>Component Description:</b>		Structural Analysis - see quote "FDH Velocity Stainless Structural Analysis.p
	<b>Amount:</b>		\$8,468.00
Complex Tower (includes, for example, those with candelabras and/or stacked antennas)	<b>Component Description:</b>		Tower Install
	<b>Amount:</b>		\$70,000.00
	<b>Component Description:</b>		Tower Install
	<b>Amount:</b>		\$78,350.00
	<b>Component Description:</b>		Tower Removal
	<b>Amount:</b>		\$30,000.00

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 Justification
Outside Professional Services	\$26,850.00	\$33,305.00		\$6,082.00	
Prepare and or review reimbursement form	\$2,630.00	\$10,000.00	Legal bills are higher then estimation.	\$1,027.00	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	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
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,250.00	N/A	N/A	N/A
Herman Hurst	<i>\$4,500.00</i>	\$4,500.00	Consulting Engineer	N/A	N/A



Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,055.00	N/A	\$5,055.00	Revis Invo Uploa
<b>Sub-total</b>	\$26,850.00	\$33,305.00	N/A	\$6,082.00	N/
<b>Total for all systems</b>	\$2,200,871.83	\$1,721,697.60	N/A	\$699,070.39	N/

### Components

Actual Information Description	File Name
Prepare and or review reimbursement form	<div> <div>Component Description:</div> <div>Amount:</div> </div> <div>Legal Fees \$520.00</div>
	<div> <div>Component Description:</div> <div>Amount:</div> </div> <div>Legal Fees \$507.00</div>
	<div> <div>Component Description:</div> <div>Amount:</div> </div> <div>Legal Fees \$7,872.16</div>
	<div> <div>Component Description:</div> <div>Amount:</div> </div> <div>Legal Fees \$118.00</div>
Perform engineering study for new channel assignment and antenna development	Information not provided.
Prepare engineering section of 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.
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.

Herman Hurst	Information not provided.
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	<b>Component Description:</b> Permit Application <b>Amount:</b> \$5,055.00

## 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 Justification
Other Expenses	\$180,653.84	\$180,053.84		\$116,331.55	
Freight	<b>\$9,722.99</b>	\$9,722.99	Was told to put all freight costs in one line in other costs. Freight costs in invoices: Dielectric 25015, 14001, 123003, 87005, 104011	\$791.55	Freight costs in invoice Dielectric 25015, 14001, 123003, 87005, 104011
Taxes	<b>\$21,179.13</b>	\$21,179.13	Was told to put all taxes in one line in other costs. Taxes here are from Invoices: 25015	\$0.00	Taxes in Invoice 25015
Elbow 4-50 Digit Main	<b>\$4,656.00</b>	\$4,656.00	See info in file Dielectric Invoice 25015 Revised. This is invoiced lines 3 & 4	\$0.00	See no file, the invoice lines 3 & 4
EIA Length	<b>\$3,510.72</b>	\$3,510.72	N/A	N/A	N/A

Support Pole	<b>\$110,090.00</b>	\$110,090.00	ch 7 antenna is 30 feet taller than new ch 9 antenna. New support pole is needed to maintain FCC height requirement. Taxes to be done separately.	\$110,090.00	Taxes for separator
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	\$5,450.00	N/A
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,070.00	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
Disposal Costs (for equipment and other waste, net of any salvage value)	<b>\$10,000.00</b>	\$10,000.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	<b>\$5,000.00</b>	\$5,000.00	N/A	N/A	N/A
MVPD Notification of Channel Change	<b>\$3,500.00</b>	\$3,500.00	N/A	N/A	N/A
<b>Sub-total</b>	\$180,653.84	\$180,053.84	N/A	\$116,331.55	N/A
<b>Total for all systems</b>	\$2,200,871.83	\$1,721,697.60	N/A	\$699,070.39	N/A

## Components

Actual Information Description	File Name
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Freight	<b>Component Description:</b>	Freight for items received (line 4 of the invoice). I was told by FCC support that freight costs do not need matching quote
	<b>Amount:</b>	\$791.55
	<b>Component Description:</b>	Freight for items received. Was told there does not need to be a matching quote.
	<b>Amount:</b>	\$62.51
	<b>Component Description:</b>	Freight for items received. Was told there does not need to be a matching quote.
	<b>Amount:</b>	\$1,567.73
	<b>Component Description:</b>	Line 5 on this invoice Was told there needs to be no matching quote.
	<b>Amount:</b>	\$5,688.65
	<b>Component Description:</b>	Freight for transmissi line received. Was to there does not need to be a matching quote.
	<b>Amount:</b>	\$1,612.55

Taxes	<p><b>Component Description:</b> Taxes for Invoice 25015. We will put together something from Accounting to show where we paid this amount. Please deny this component</p> <p><b>Amount:</b> N/A</p>
Elbow 4-50 Digit Main	<p><b>Component Description:</b> See attached note. Invoice lines 3 &amp; 4.</p> <p><b>Amount:</b> \$4,656.00</p>
EIA Length	Information not provided.
Support Pole	<p><b>Component Description:</b> Price does not include tax, which will be done in Other page</p> <p><b>Amount:</b> \$55,045.00</p> <p><b>Component Description:</b> Deposit</p> <p><b>Amount:</b> \$55,045.00</p>
DTV Medical Facility Notification	<p><b>Component Description:</b> RF Notifications Mailing Complete</p> <p><b>Amount:</b> \$1,200.00</p> <p><b>Component Description:</b> RF Medical Notifications</p> <p><b>Amount:</b> \$4,250.00</p>
FCC Filing Fees - Form 2100 minor change CP application	Information not provided.
FCC Filing Fees - Form 2100 license to cover application	Information not provided.

Disposal Costs (for equipment and other waste, net of any salvage value)	Information not provided.
Develop and air announcement of upcoming channel change	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	\$2,200,871.83	\$1,721,697.60	\$699,070.39

**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
<b>Submission of Estimated Expenses Statements</b>	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.	
	<ol style="list-style-type: none"><li>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.</li><li>2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li><li>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.</li><li>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).</li></ol>	

<p>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.</p> <p>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.</p> <p>7. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.</p> <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><b>Moreau Du</b>  <i>Director of Engineering</i></p> <p>03/26/2019</p>

**Certification**

Section	Question	Response
<b>Submission of Actual Cost Documentation Statements</b>	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).	
	<ol style="list-style-type: none"><li>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.</li><li>2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.</li><li>3. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li><li>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.</li></ol>	

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.

<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>	

## Attachments