

(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

10645 Service: DTV Channel: 9 (High VHF) Facility Call Sign:

ID:

File 0000028207

Number:

FRN: 0001957331 Date 04/24

> Submitted: /2019

#### **Applicant** Information

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

Applicant	Address	Phone	Email	Applicant Type
CENTRAL PIEDMONT COMMUNITY COLLEGE Doing Business As: CENTRAL PIEDMONT COMMUNITY COLLEGE	AMY BURKETT 3242 Commonwealth Ave CHARLOTTE, NC 28205 United States	+1 (704) 330- 5940	amy. burkett@cpcc. edu	Government Entity

# Reimbursement Contact Name and Information Reimbursement Contact Information

Applicant	Address	Phone	Email
[Confidential]			

#### **Preparer** Contact Information

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

. The week leaves to The I	App	plicant	Address	Phone	Email
Director of 3242 Commonwealth 5265 com  Engineering Ave  WTVI Charlotte, NC 28205 United States	Dire Eng	ngineering	Ave Charlotte, NC 28205	+1 (828) 324- 5265	tlong@teslarf. com

#### 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	The existing facility employs a side- mounted non-directional antenna. A broadband interim antenna will be installed to facilitate the transition from Channel 11 to Channel 9.

#### **Transmitters**

rs	Section	Question	Response
	Transmitter Related Expenses	Do you have transmitter related expenses?	Yes

#### Auxiliary Transmitter

#### **Add Transmitter Information**

Section	Question	Response
Existing Transmitter Description	Type of change	Retune Existing
	Use	Auxiliary (Backup)
	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 and Type	Manufacturer	Rohde & Schwarz
	Model	SCx8000

Year	2010
Туре	Solid State
Solid State Cooling	Liquid Cooled
Solid State Power capacity	3.0 kW

# Auxiliary Transmitter

## **Retuning Transmitter Costs**

Section	Question	Response
New IOT Tubes	Number of Tubes (including accessories) needed	N/A
New Mask Filter	Power	7 kW
	Other Power	N/A
New Exciter	Is a new exciter needed?	No

# Auxiliary 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	2 inches
	Length	75.0 feet
	Other Electrical Service	Yes

	Description	Low voltage wiring to support transmitter liquid cooling system
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

Auxiliary Transmitte **Other Transmitter Cost Not Listed** 

**Transmitter** 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	Optimum TDV2 2K50
	Year	2001
	Туре	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power Capacity	3.0 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	SCx9000
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	3.5 kW
	Justification for New Transmitter	Transmitter was abandoned by manufacturer 10 years ago. We have no parts to move channel with.

#### Primary Transmitter

#### **Other Transmitter Costs**

Question	Response
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
	Service Entrance (3 phases 800A 208V)  Switchgear (industrial 800 amp)  Transformer (480V)  Power  Rigid Conduit and Wiring

	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
Installation	Installation, Commissioning and Proof-of- Performance for new transmitter

#### **Antennas**

Section	Question	Response
Antenna Related Expenses	Do you have antenna related expenses?	Yes

#### **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?	Yes
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)	2.57 kW

Manufacturer	
Model	ATW2V1- HSOC-11
Year	2002

#### **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	Class	Full Power
Manufacturer and Types	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)	2.57 kW
	Manufacturer	
	Manadottio	

Model	ATW2V1- HSOC-9
Year	2018
Justification for New Antenna	Existing slot antenna will not function on new channel and cannot be retuned.

#### **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	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	3 1/8 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?	Yes

Sweep Test	Do you require the sweep testing of	Yes
	transmission line and antenna?	

**Other Antenna Cost Not Listed** 

#### Interim Antenna

#### **New Antenna Costs**

Section	Question	Response
New Antenna Description	Use	Interim
	Description of Use	N/A
	Change Type	Purchase New
	Ownership	Owned
	Owner	N/A
	Is antenna shared?	No
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	Yes
New Antenna	Class	Full Power
Manufacturer and Type	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Туре	Broadband Slot
	Number of Stations Supported	1
	Number of Panels/Bays	4
	Lower Limit	174.00 MHz
	Upper Limit	216.00 MHz
	Design power capacity in use	35.0 %
	Other Antenna Type	N/A
	ERP: (Effective Radiated Power)	2.75 kW
	Manufacturer	
	Model	TLS-V-BB
	Year	2017

Justification for New Antenna	WTVI
	needs to
	purchase a
	Interim
	antenna to
	be able to
	stay on the
	air during
	the channel
	change.
	WHKY TV
	that is
	collocated
	on the
	tower is in
	phase 5,
	WTVI is in
	phase 9.
	Work on
	both
	systems
	need to be
	done at the
	same time.

#### 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?	В
	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?	Yes
Sweep Test	Do you require the sweep testing of transmission line and antenna?	Yes

#### Interim Antenna

**Other Antenna Cost Not Listed** 

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

# Primary Transmission

## **Add Transmission Line**

Section Section	Question	Response
Existing Transmission Line Description	Type of change	Utilize Existing
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is this transmission currently shared with any other stations?	No
	Is Transmission Line in operating condition?	Yes
Existing Transmission	Manufacturer	Andrew
Line Manufacturer and Type	Туре	Flexible Ai
	Diameter	3 inches
	Other Diameter	N/A
	Segment Length	N/A
	Other Segment Length	N/A
	Number of parallel runs	1
	Length	1378 feet per run

#### Other Transmission Line Expenses Not Listed

**Primary** 

Transmission loinetion not provided.

#### Interim

#### **New Transmission Line**

Transmission	a Line Section	Question	Response
	New Transmission Line	Use	Interim
	Costs	Description of Use	N/A
		Change Type	Purchase New
		Туре	Flexible Air
		Diameter	3 inches
		Segment Length	N/A
		Other Segment Length	
		Number of parallel runs	1
		Length	1220 feet per run
	Justification for New Transmission Line	Required transmission line for interim antenna system.	

Other Transmission Line Expenses Not Listed

Transmission loine tion not provided.

Interim

# 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 Existing
	Tower Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	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	No
	Is tower documented for structural analysis?	Yes
	Is tower compliant with Rev G?	Yes
Existing Tower Structure	Do you have a tower registration number?	Yes
Registration	ASR Number	1005065
Coordinates (NAD83 ( North American Datum of	Latitude (NAD83)	35° 17' 15.0" N-
1983))	Longitude (NAD83)	080° 41' 44.0" W-
	Overall Structure Height	1246.70 fe
	Support Structure Height	1197.49 fe
	Ground Elevation Above Mean Sea Level (AMSL)	715.21 fee

Structure Type	TOWER - Free Standing or Guyed Structure
Tower Owner	Central Piedmont Community College
Date Constructed	08/01/1992

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
65919	WHKY-TV	DTV
53970	WRFX	FM
69436	WFAE	FM

#### Primary Tower

#### **Tower Modification Costs**

Section	Question	Response
Engineering Study	Please what type of engineering study is required, if any:	Study needed for documented tower
Tower Reinforcements	Please select whether tower reinforcements are needed:	Minor Reinforcements needed

#### Primary Tower

#### **Tower Rigging Costs**

Section	Question	Response
Tower Rigging Costs	Complex Tower	N/A

Helicopter Services	Are helicopter services required?	No
Required		

#### Primary Tower

## Other Tower Expenses Not Listed

#### Outside Professional

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	Yes
	Number of Hours	250
	Explanation	Provide Project management of the transition Prepare and/or review reimbursement form Address transition timing, and coordination issues with other stations. Outside Accounting to comply with Reimbursement.
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	Yes
	For Main Facility	Yes
	Prepare engineering section of Form FCC License to Cover Application	Yes
	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare request for Special Temporary Authority	Yes
	Quantity	2
	Do you have Distributed Transmission System engineering services?	N/A
	Critical Facility	N/A

	Terrain-Shielded Facility	N/A
Attorney and Other Outside Consulting	Prepare and file Form FCC Construction Permit Application	Yes
Services	For Auxiliary Facility	Yes
	For Main Facility	Yes
	Prepare and file Form FCC License to Cover Application	Yes
	For Auxiliary Facility	Yes
	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	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

## Other Professional Services Expenses Not Listed

Services Costs	Description
Attorney Expence for 399 Form	Work performed by attorney to prepare 399 form

# 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	No
	FCC License to Cover Application	No
	FCC Special Temporary Authority Application	No
Other Miscellaneous Expenses	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	Yes
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	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 Not Listed

**Expenses** Information not provided.

# **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 SCx9000	\$263,500.00	\$251,000.00		\$203,970.11	
High VHF - Liquid Cooled Solid State Transmitter 3.3 . 6.5 kW	\$249,500.00	\$237,000.00	N/A	\$203,970.11	N/A
Installation	\$14,000.00	\$14,000.00	N/A	N/A	N/A
Auxiliary Transmitter SCx8000	\$140,410.00	\$83,575.00		\$9,009.01	
Other Electrical Service: Low voltage wiring to support transmitter liquid cooling system	\$1,500.00	\$1,500.00	N/A	N/A	N/A
UHF and VHF - minor banding issues	\$105,200.00	\$50,000.00	N/A	N/A	N/A

7 kW mask	\$6,210.00	\$5,900.00	N/A	\$9,009.01	Cost when
filter					ordered was higher than the original quote. Transmission line fittings were included in the mask filter final invoice.
Transformer 3 phase /480v - 150 KVA	\$25,550.00	\$24,300.00	N/A	N/A	N/A
2" Rigid Conduit and Wiring (Cost per foot)	\$1,950.00	\$1,875.00	N/A	N/A	N/A
Sub-total	\$403,910.00	\$334,575.00	N/A	\$212,979.12	N/A
Total for all systems	\$1,148,095.00	\$1,046,225.00	N/A	\$217,349.12	N/A

## Components

Actual Information Description	File Name	
High VHF - Liquid Cooled Solid State Transmitter 3.3 . 6.5 kW	Component Description: Amount:	Transmitter system taxes \$13,565.11
	Component Description:	Payment for transmitter
	Amount:	\$190,405.00
Installation	Information not provided.	

Other Electrical Service: Low voltage wiring to support transmitter liquid cooling system	Information not provided.	
UHF and VHF - minor banding issues	Information not provided.	
7 kW mask filter		
	Component Description:	Mask filter and RF components auxiliary transmitter
	Amount:	\$8,400.00
	Component Description:	Mask Filter RF components
	Amount:	auxiliary tx tax \$609.01
Transformer 3 phase/480v - 150 KVA	Information not provided.	
2" Rigid Conduit and Wiring (Cost per foot)	Information not provided.	

# **Cost Information**

#### **Antennas**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Interim Antenna TLS-V-BB	\$94,480.00	\$92,280.00		\$0.00	
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/A
Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)	\$5,260.00	\$5,000.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
High VHF - High Power Side Mount One Station horizontally polarized	\$50,000.00	\$50,000.00	N/A	N/A	N/A

Elbow complex, broadband, at antenna input, per 3 1/8. feedline (if needed)	\$9,340.00	\$8,880.00	N/A	N/A	N/A
Primary Antenna ATW2V1- HSOC-9	\$92,240.00	\$90,300.00		\$0.00	
High VHF - High Power Side Mount One Station horizontally polarized	\$49,500.00	\$49,500.00	N/A	\$0.00	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
Elbow complex, single channel, at antenna input, per 3 1/8. feedline (if needed)	\$7,600.00	\$7,400.00	N/A	N/A	N/A
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/A

side mount high/med power					
antennas					
(if not included in					
antenna					
base cost)					
Sub-total	\$186,720.00	\$182,580.00	N/A	\$0.00	N/A
Total for all systems	\$1,148,095.00	\$1,046,225.00	N/A	\$217,349.12	N/A

#### Components

# **Cost** Information

#### **Transmission Line**

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Interim Transmission Line	\$71,980.00	\$68,320.00		\$0.00	
Flexible Air Transmission Line - dielectric, 3"	\$71,980.00	\$68,320.00	N/A	N/A	N/A
Primary Transmission Line	\$0.00	\$0.00		\$0.00	
Sub-total	\$71,980.00	\$68,320.00	N/A	\$0.00	N/A
Total for all systems	\$1,148,095.00	\$1,046,225.00	N/A	\$217,349.12	N/A

## Components

# **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	\$381,100.00	\$362,000.00		\$0.00	
Minor tower reinforcement /modifications	\$158,000.00	\$150,000.00	N/A	N/A	N/A
Structural engineering tower load study for well documented tower	\$12,600.00	\$12,000.00	N/A	N/A	N/A
Tall Tower (greater than 500')	\$210,500.00	\$200,000.00	N/A	N/A	N/A
Sub-total	\$381,100.00	\$362,000.00	N/A	\$0.00	N/A
Total for all systems	\$1,148,095.00	\$1,046,225.00	N/A	\$217,349.12	N/A

#### Components

# **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	\$86,335.00	\$81,250.00		\$4,370.00	
Attorney Expence for 399 Form	\$2,500.00	\$2,500.00	N/A	\$1,120.00	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$7,360.00	\$7,000.00	N/A	\$0.00	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 - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	\$4,210.00	\$4,000.00	N/A	N/A	N/A

RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application	\$1,580.00	\$1,500.00	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
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit Application	\$2,105.00	\$2,000.00	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	\$0.00	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	\$2,500.00	N/A

Project management of the transition	\$39,500.00	\$37,500.00	N/A	N/A	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	\$750.00	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
Prepare request for Special Temporary Authorization	\$4,100.00	\$3,000.00	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
Sub-total	\$86,335.00	\$81,250.00	N/A	\$4,370.00	N/A
Total for all systems	\$1,148,095.00	\$1,046,225.00	N/A	\$217,349.12	N/A

#### Components

Actual Information Description	File Name	
Attorney Expence for 399 Form	Component Description: Amount:	Review of FCC form 399 for filing \$1,120.00
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.	
Attorney Fees - Aux Antenna, prepare and File Form 2100 Construction Permit or License Application	Information not provided.	
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, License to Cover Application	Information not provided.	
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.	
RF Consulting Engineer Fees- Aux Antenna: Prepare engineering section of FCC Form 2100, Construction Permit Application	Information not provided.	
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	Information not provided.	
Perform engineering study for new channel assignment and antenna development	Component Description:  Amount:	Preparation of engineering portion of FCC Form 2100 for repack to new channel. \$2,500.00
Project management of the transition	Information not provided.	

Prepare and or review reimbursement form	Component Description:	Assistance with engineering parts
		FCC form 399 reimbursable
		expenses
	Amount:	\$750.00
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.	
Prepare request for Special Temporary Authorization	Information not provided.	
Attorney Fees - Prepare and File 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	\$18,050.00	\$17,500.00		\$0.00	
MVPD Notification of Channel Change	\$1,500.00	\$1,500.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	\$2,500.00	\$2,500.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$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
Sub-total	\$18,050.00	\$17,500.00	N/A	\$0.00	N/A
Total for all systems	\$1,148,095.00	\$1,046,225.00	N/A	\$217,349.12	N/A

#### Components

# Cost Information

#### **Grand Total**

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$1,148,095.00	\$1,046,225.00	\$217,349.12

Reimbursem	enrestiatus	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 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.

- 1. The Authorized
  Person signing
  below certifies that he
  /she is authorized to
  submit this TV
  Broadcaster
  Relocation Fund
  Reimbursement
  Form on behalf of
  the above-named
  entity.
- 2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.
- 3. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.

- 4. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (broadcasters) or to continue to carry the signal of a broadcaster that changes channels (MVPD).
- 5. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
- 6. The above-named entity certifies that it will maintain and provide to the Commission detailed records, including receipts, of all costs eligible for reimbursement actually incurred.
- 7. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.

8. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.

I declare, under penalty of perjury, that I am an authorized representative of the abovenamed applicant for the Authorization(s) specified above. **Linda Kempf** *Office Manager* 

04/24/2019

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.
- 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. **Linda Kempf** *Office Manager* 

04/24/2019

#### **Attachments**