



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **128277** | Service: **LPA** | Call **KACN-LD** | Channel: **17 (UHF)**  
ID:  
File **0000090039**  
Number:  
FRN: **0007784325** | Eligibility **Eligible** | Date **09/15**  
Status: | Submitted: **/2020**

## Applicant Information

### Applicant Name, Type, and Contact Information

| Applicant   | Address   | Phone                | Email                  | Applicant Type |
|---|---|----------------------|------------------------|----------------|
| <b>Etulain</b><br>Doing Business As:<br>DAN ETULAIN | 520 LAKE<br>STREET<br>SITKA, AK<br>99835<br>United States | +1 (907)<br>747-8200 | John@JWKingLaw.<br>com | Individual     |

## Reimbursement Contact Information

### Reimbursement Contact Name and Information

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

## Preparer Contact Information

### Preparer Contact Name and Information

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

## Broadcaster Information and Transition Plan

| Question | Response |
|----------|----------|
|----------|----------|

|  |  |
|--|--|
| Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information. | No   |
| Briefly describe transition plan   | Transition is complete. Displacement facilities have been authorized and constructed. License to cover has been filed and granted. |

## Transmitters

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

**Primary  
Transmitter**

**Existing Transmitter Information**

| Section                                    | Question   | Response          |
|--|--|-------------------|
| Existing Transmitter Description           | Type of change   | Purchase<br>New   |
|  | Use  | Primary<br>(Main) |
|  | Ownership  | Owned             |
|  | Is this transmitter currently shared with another station? | No                |
|  | Is this transmitter currently in operating condition?      | No                |
| Existing Transmitter Manufacturer and Type | Manufacturer   |                   |
|  | Model  | UPSL-1            |
|  | Year   | 2005              |
|  | Type   | Solid State       |
|  | Solid State Cooling  | Air Cooled        |
|  | Solid State Power Capacity                                 | 30 W              |

**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                                     | SS1000UT   |
|                 | Transmitter Type                          | Solid State  |
|                 | Solid State Cooling                       | Air Cooled   |
|                 | Solid State Power capacity                | 40 W   |
|                 | Justification for New Transmitter         | The former transmitter, tuned to Channel 38, was approaching fifteen years old, ready for replacement. |

**Primary  
Transmitter**

**Other Transmitter Costs**

| Section                 | Question  | Response |
|-------------------------|---|----------|
| Other Transmitter Costs | Does the transmitter installation require a Transmitter Building Site Survey /Installation? | No       |
| Electrical Service      | Service Entrance (3 phases 800A 208V)   | No       |
|                         | Switchgear (industrial 800 amp)   | No       |
|                         | Transformer (480V)  | No       |
|                         | Rigid Conduit and Wiring  | No       |
|                         | Other Electrical Service  | No       |

|  |   |    |
|--|---|----|
| <b>HVAC Service</b>  | Does the replacement transmitter require HVAC Service?  | No |
| <b>Transmitter Building Addition/Modification or Leasehold Improvement</b> | Does the Transmitter Building require an addition, modification, other leasehold improvement? | No |

**Primary Transmitter**      **Other Transmitter Cost Not Listed**  
Information not provided.

**Antennas**

| Section                  | Question                              | Response |
|--------------------------|---------------------------------------|----------|
| Antenna Related Expenses | Do you have antenna related expenses? | No       |

**Transmission Line**

| Section                            | Question  | Response |
|------------------------------------|---|----------|
| Transmission Line Related Expenses | Do you have transmission line related expenses? | No       |

**Tower Equipment And Rigging Costs**

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

**Outside Professional Services Costs**

| Section                             | Question  | Response |
|-------------------------------------|---|----------|
| Outside Project Management Services | Do you require outside project management services? | Yes      |
|                                     | Number of Hours                                     | 10       |
|                                     |   |          |

|   |   |   |
|---|---|---|
|   | Explanation   | Transmitter modification and installation performed on independent consulting basis by on-site technical personnel who is an employee of KDMD(TV), which owns the site at which KACN-LP is located. KACN-LP has no technical staff at the site. |
| <b>Outside RF consulting Engineering Services</b>     | Perform engineering study for displacement application                  | 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  |
|   | Prepare Form 601  | No  |
| <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  |
|                                      | Negotiation of Lease and other Matter for Shared Locations | No  |
|                                      | Prepare or Review FCC Form 399 for Reimbursement           | Yes |
|                                      | Form 399 assistance or other program management costs      | No  |
| <b>RF Field Engineering Services</b> | Comprehensive coverage verification via field study        | No  |
|                                      | RF exposure measurements                                   | No  |
|                                      | Additional Field Engineering Service                       | No  |

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

| Name        | Description                                   |
|-------------|---|
| <b>KDMD</b> | Modification and installation of transmitter. |



**Other  
Expenses**

| Section                                   | Question   | Response |
|---|--|----------|
| <b>AM Pattern Disturbance</b>             | Is an Impact Study needed?   | No       |
|   | Is Remediation needed?   | No       |
| <b>Permit and Filing Costs</b>            | FCC Construction Permit Major Change   | No       |
|   | FCC Construction Permit Minor Change   | No       |
|   | FCC License to Cover Application   | Yes      |
|   | FCC Special Temporary Authority Application  | No       |
| <b>Other Miscellaneous Expenses</b>       | Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?        | No       |
|   | Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs? | No       |
|   | Does this relocation require Equipment Storage?  | No       |
| <b>Point to Point Microwave (STL/ICR)</b> | Frequency Coordination for Unidirection System   | No       |
|   | Frequency Coordination for Bi-Direction System   | No       |
|   | New Point to Point Microwave System  | No       |

**Other  
Expenses**

**Other Expenses Not Listed**

| Name             | Description                                      |
|------------------|--|
| <b>SmartView</b> | SmartView Duo Rackmountable Dual 8" LCD Monitors |

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 SS1000UT                          | \$10,200.00                 | \$600.00       |                              | \$600.00    |                           |
| UHF - Air Cooled Solid State Transmitter 5 - 50 Watts | \$10,200.00                 | \$600.00       | N/A                          | \$600.00    | N/A                       |
| Sub-total   | \$10,200.00                 | \$600.00       | N/A                          | \$600.00    | N/A                       |
| Total for all systems                                 | \$23,379.00                 | \$8,414.00     | N/A                          | \$7,892.50  | N/A                       |

Components

| Actual Information                                    |  |
|---|--|
| Description   | File Name  |
| UHF - Air Cooled Solid State Transmitter 5 - 50 Watts | <div>Component Description: Transmitter purchase and installation.</div> <div>Amount: \$600.00</div> |

**Cost Information**      **Antennas**  
Information not provided.

**Cost Information**      **Transmission Line**  
Information not provided.

**Cost Information**      **Tower Equipment and Rigging Costs**  
Information not provided.

**Cost Information**      **Outside Professional Services**

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

| Description  | Predetermined Cost Estimate | Estimated Cost    | Estimated Cost Justification   | Actual Cost       | Actual Cost Justification                                   |
|--|-----------------------------|-------------------|--|-------------------|---|
| <b>Outside Professional Services</b>   | <b>\$12,322.50</b>          | <b>\$7,122.50</b> |  | <b>\$7,122.50</b> |   |
| KDMD   | <i>\$0.00</i>               | \$0.00            | This estimated cost is now shown in transmitter costs; the installation combined equipment and services. | \$0.00            | N/A   |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | \$3,025.00                  | \$1,350.00        | N/A  | \$1,350.00        | Services required greater expenditure of research and time. |

|  |            |            |   |            |   |
|--|------------|------------|---|------------|---|
| Prepare engineering section of FCC Form 2100 (main), License to Cover Application    | \$1,052.50 | \$0.00     | Cost included in construction permit and license application fee.   | N/A        | N/A   |
| Prepare engineering section of FCC Form 2100 (main), Construction Permit Application | \$2,102.50 | \$2,472.50 | Estimated cost includes services for construction permit and license applications.  | \$2,472.50 | Fee for construction permit and license application.        |
| Perform engineering study for displacement application                               | \$1,800.00 | \$0.00     | Cost included in construction permit and license application fee.   | \$0.00     | N/A   |
| Prepare/ Review 399 reimbursement form   | \$1,710.00 | \$2,625.00 | Project required additional research and time to compile, assemble, and parse records, and to complete applications for eligibility, reimbursement, and payment instructions. | \$2,625.00 | Services required greater expenditure of research and time. |
| Project management of the transition   | \$1,055.00 | \$0.00     | N/A   | N/A        | N/A   |
| Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application  | \$1,577.50 | \$675.00   | N/A   | \$675.00   | N/A   |

|                              |             |            |     |            |     |
|------------------------------|-------------|------------|-----|------------|-----|
| <b>Sub-total</b>             | \$12,322.50 | \$7,122.50 | N/A | \$7,122.50 | N/A |
| <b>Total for all systems</b> | \$23,379.00 | \$8,414.00 | N/A | \$7,892.50 | N/A |

## Components

| Actual Information   |  |
|--|--|
| Description  | File Name  |
| KDMD   | <p><b>Component Description:</b> This component is now listed under transmitter costs, for equipment and services.</p> <p><b>Amount:</b> N/A</p> |
| Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application | <p><b>Component Description:</b> Services rendered.</p> <p><b>Amount:</b> \$250.00</p>   |
|  | <p><b>Component Description:</b> Services rendered.</p> <p><b>Amount:</b> \$75.00</p>  |
|  | <p><b>Component Description:</b> Services rendered.</p> <p><b>Amount:</b> \$175.00</p>   |
|  | <p><b>Component Description:</b> Services rendered.</p> <p><b>Amount:</b> \$850.00</p>   |
| 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   | <p><b>Component Description:</b> Fee for construction permit and license application.</p> <p><b>Amount:</b> \$2,472.50</p>                       |

|  |   |                                  |
|--|---|----------------------------------|
| Perform engineering study for displacement application                             | Information not provided.                       |                                  |
| Prepare/ Review 399 reimbursement form   | <b>Component Description:</b><br><b>Amount:</b> | Services rendered.<br>\$100.00   |
|  | <b>Component Description:</b><br><b>Amount:</b> | Services rendered.<br>\$250.00   |
|  | <b>Component Description:</b><br><b>Amount:</b> | Services rendered.<br>\$2,000.00 |
|  | <b>Component Description:</b><br><b>Amount:</b> | Services rendered.<br>\$75.00    |
|  | <b>Component Description:</b><br><b>Amount:</b> | Services rendered.<br>\$200.00   |
| Project management of the transition   | Information not provided.                       |                                  |
| Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application | <b>Component Description:</b><br><b>Amount:</b> | Services rendered.<br>\$250.00   |
|  | <b>Component Description:</b><br><b>Amount:</b> | Services rendered.<br>\$425.00   |

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 Cost Justification |
|--|-----------------------------|----------------|------------------------------|-------------|---------------------------|
| Other Expenses   | \$856.50                    | \$691.50       |                              | \$170.00    |                           |
| SmartView  | <i>\$521.50</i>             | \$521.50       | N/A                          | \$0.00      | N/A                       |
| FCC Filing Fees - Form 2100 license to cover application | \$335.00                    | \$170.00       | N/A                          | \$170.00    | N/A                       |
| Sub-total  | \$856.50                    | \$691.50       | N/A                          | \$170.00    | N/A                       |
| Total for all systems                                    | \$23,379.00                 | \$8,414.00     | N/A                          | \$7,892.50  | N/A                       |

Components

| Actual Information Description                           | File Name  |
|--|--|
| SmartView  | <div>Component Description: SmartView Duo Rackmountable Dual 8" LCD Monitors</div> <div>Amount: \$521.50</div> |
| FCC Filing Fees - Form 2100 license to cover application | <div>Component Description: FCC filing fee.</div> <div>Amount: \$170.00</div>                                  |

|                     |                       |                                |                |
|---------------------|-----------------------|--------------------------------|----------------|
| Cost<br>Information | Grand Total           |                                |                |
|                     |                       | Predetermined<br>Cost Estimate | Estimated Cost |
|                     |                       |                                | Actual Cost    |
|                     | Total for all systems | \$23,379.00                    | \$8,414.00     |
|                     |                       |                                | \$7,892.50     |

|                      |  |          |
|----------------------|--|----------|
| Reimbursement Status | Question   | Response |
|                      | The facility has ceased operating on its pre-auction channel.  | Yes      |
|                      | Construction of final facilities or all necessary modifications are complete.  | Yes      |
|                      | 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. | Yes      |



| Certification | Section   | Question   | Response |
|---------------|---|--|----------|
|               | Submission of Final Allocation or Accounting Information Statements | <p>WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.</p>  |          |
|               |   | <ol style="list-style-type: none"> <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. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.</li> <li>2. 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> |          |

3. The above-named entity certifies that all costs identified as "actual costs" herein accurately represent the costs actually paid by the above-named entity, including any discounts, refunds, or rebates.
4. 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.
5. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.
6. 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.

**Dan Etulain**  
*Licensee*

09/15/2020

**Attachments**