



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility	25219	Service:	LPD	Call	KLDY-LD	Channel:	31 (UHF)
ID:		Sign:					
File	0000088570						
Number:							
FRN:	0032881088	Eligibility	Eligible	Date	04/07		
		Status:		Submitted:	/2021		

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
KETCHIKAN TV, LLC	David Drucker PO BOX 1471 EVERGREEN, CO 80437 United States	+1 (303) 478- 5647	DDRUCKER@WILDBLUE.NET	Limited Liability Company

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.	No
Briefly describe transition plan	KLDY-LD displaced from Ch 41 to Ch 31. Transmitter and combiner need replacement.

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 New
	Use	Primary (Main)
	Ownership	Owned
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
Existing Transmitter Manufacturer and Type	Manufacturer	
	Model	ACT-560U
	Year	2013
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	.6 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	UAXTE-3P- C
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	.6 kW
	Justification for New Transmitter	Old transmitter cannot be retuned to Ch 31.

**Primary
Transmitter**

Other Transmitter Costs

Section	Question	Response
Other Transmitter Costs	Does the transmitter installation require a Transmitter Building Site Survey /Installation?	Yes
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
HVAC Service	Does the replacement transmitter require HVAC Service?	No

Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leasehold improvement?	No
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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	Retune Existing
	Antenna Use	Primary (Main)
	Ownership	Owned
	Is the existing antenna shared with another station or stations?	Yes
	Is the existing antenna directional?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
Existing Antenna Manufacturer and Type	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Other
	Other Antenna Type	K723147 ARRAY
	ERP: (Effective Radiated Power)	5.0 kW
	Manufacturer	Kathrein
	Model	K723147 Array
	Year	2011

**Facility ID's and Call Signs of
all stations with whom the
antenna is shared.**

Facility ID	Call Sign
25221	KDMD

Primary Antenna

Adjustment to Existing Antenna

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

Primary Antenna

Other Antenna Costs

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	Yes
	Type	New
	Number of channels supported	2
	Frequencies of channels supported	RF channel
	Frequency	N/A

Enter a list of RF channel numbers.

RF Channel Number
33
31

Primary 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?	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?	No
Outside RF consulting Engineering Services	Perform engineering study for displacement application	No
	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
Attorney and Other Outside Consulting Services	Prepare and file Form FCC Construction Permit Application	No
	Prepare and file Form FCC License to Cover Application	No
	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	Yes
RF Field Engineering Services	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**
 Services provided.

**Other
Expenses**

Section	Question	Response
AM Pattern Disturbance	Is an Impact Study needed?	No
	Is Remediation needed?	No
Permit and Filing Costs	FCC Construction Permit Major Change	No
	FCC Construction Permit Minor Change	No
	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)?	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
Point to Point Microwave (STL/ICR)	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

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 UAXTE-3P-C	\$38,100.00	\$33,612.75		\$28,612.75	
Transmitter Building Site Survey /Installation	\$10,000.00	\$5,000.00	N/A	N/A	N/A
UHF - Air Cooled Solid State Transmitter 320 - 700 Watts	\$28,100.00	\$28,612.75	Transmitter cost 26500 Freight cost 2112.75 Totals \$28,612.75	\$28,612.75	Actual cost transmitter and freight
Sub-total	\$38,100.00	\$33,612.75	N/A	\$28,612.75	N/A
Total for all systems	\$51,108.50	\$44,416.25	N/A	\$38,581.25	N/A

Components

Actual Information	
Description	File Name
Transmitter Building Site Survey/Installation	Information not provided.
UHF - Air Cooled Solid State Transmitter 320 - 700 Watts	<div><div>Component Description:</div><div>Amount:</div><div>Component Description:</div><div>Amount:</div></div> <div>Transmitter Freight \$2,112.75 Gates Transmitter \$26,500.00</div>

Cost
Information

Antennas

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

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Antenna K723147 Array	\$6,808.50	\$6,808.50		\$6,808.50	
5.0 kW UHF Combiner	<i>\$6,808.50</i>	\$6,808.50	Microwave Filter Company, Inc. Invoice 159780	\$6,808.50	N/A
Sub-total	\$6,808.50	\$6,808.50	N/A	\$6,808.50	N/A
Total for all systems	\$51,108.50	\$44,416.25	N/A	\$38,581.25	N/A

Components

Actual Information Description	File Name
5.0 kW UHF Combiner	<div>Component Description:Ch 31 & Ch 33 combiner</div> <div>Amount:\$6,808.50</div>

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
Outside Professional Services	\$5,865.00	\$3,660.00		\$3,160.00	
Form 399 assistance or other Program Management costs	<i>\$1,000.00</i>	\$1,000.00	See BWS Estimate KLDY.pdf	\$1,000.00	N/A
Prepare/ Review 399 reimbursement form	\$1,710.00	\$1,710.00	See BWS Estimate KLDY.pdf	\$1,710.00	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,052.50	\$500.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$2,102.50	\$450.00	N/A	\$450.00	N/A

Sub-total	\$5,865.00	\$3,660.00	N/A	\$3,160.00	N/A
Total for all systems	\$51,108.50	\$44,416.25	N/A	\$38,581.25	N/A

Components

Actual Information Description	File Name	
Form 399 assistance or other Program Management costs	Component Description:	Cost for turnkey management of 399 Eligibility and 1876 filings
	Amount:	\$1,000.00
Prepare/ Review 399 reimbursement form	Component Description:	Cost for turnkey management of 399 reimbursement filings.
	Amount:	\$1,710.00
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:	displacement to Ch 31
	Amount:	\$450.00

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	\$335.00	\$335.00		\$0.00	
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$335.00	N/A	N/A	N/A
Sub-total	\$335.00	\$335.00	N/A	\$0.00	N/A
Total for all systems	\$51,108.50	\$44,416.25	N/A	\$38,581.25	N/A

Components

Information not provided.

Cost Information	Grand Total		
	Predetermined Cost Estimate	Estimated Cost	Actual Cost
	Total for all systems	\$51,108.50	\$44,416.25

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
	Submission of Estimated Expenses 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"> 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.

<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>Susan Hansen <i>Consultant</i></p> <p>04/07/2021</p>

Certification	Section	Question	Response
	Submission of Actual Cost Documentation Statements	<p>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).</p>	
		<ol style="list-style-type: none"> 1. The Authorized Person signing below certifies and represents that he /she is authorized to submit this TV Broadcaster Relocation Fund Reimbursement Form on behalf of the above-named entity. 2. The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct. 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) .
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.

<p>8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.</p> <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>	<p>David M. Drucker <i>Member</i> <i>/Manager</i></p> <p>04/07/2021</p>

Attachments