



(REFERENCE COPY - Not for submission)

# FCC Form 399: Reimbursement Request

Facility **4332** | Service: **LPD** | Call **W18EU-D** | Channel: **18 (UHF)**  
ID: | Sign:  
File **000090032**  
Number:  
FRN: **0001529247** | Eligibility **Eligible** | Date **02/22**  
Status: | Submitted: **/2021**

## Applicant Information

### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>Estrella Television License LLC</b>	1845 EMPIRE AVENUE BURBANK, CA 91504 United States	+1 (818) 729-5300	bkei@lbimedia.com	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
<b>Samuel Hariton</b> <i>Widely</i>	4031 University Dr Suite 100 Fairfax, VA, VA 22030 United States	+1 (339) 222- 8107	sam.hariton@widely.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.	Yes
Briefly describe transition plan	W17DG-D is planning to purchase a new transmitter and antenna, both of which will be upgraded. The station will reuse the existing transmission line and remain on their current tower.

**Transmitters**

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

**Primary  
Transmitter**

**Existing Transmitter Information**

<b>Section</b>	<b>Question</b>	<b>Response</b>
<b>Existing Transmitter Description</b>	Type of change	Purchase New
	Use	Primary (Main)
	Ownership	Owned
	Is this transmitter currently shared with another station?	Yes
	Is this transmitter currently in operating condition?	Yes
<b>Existing Transmitter Manufacturer and Type</b>	Manufacturer	
	Model	CZ500
	Year	1999
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	2.5 kW

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

<b>Facility ID</b>	<b>Call Sign</b>
168482	WTXI-LD

**Primary  
Transmitter**

**New Transmitter Costs**

Section	Question	Response
<b>New Transmitter</b>	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	Yes
	Manufacturer	
	Model	UAXTE-3R37
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	1.8 kW
	Justification for New Transmitter	W17DG-D requires a new transmitter because the transmitter is no longer supported by the manufacturer and there are no personnel to retune it

**Primary  
Transmitter**

**Other Transmitter Costs**

Section	Question	Response
<b>Other Transmitter Costs</b>	Does the transmitter installation require a Transmitter Building Site Survey /Installation?	No
<b>Electrical Service</b>	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?	Yes

**Primary  
Antenna**

**Existing Antenna Information**

<b>Section</b>	<b>Question</b>	<b>Response</b>
<b>Existing Antenna Description</b>	Type of change	Purchase New
	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
<b>Existing Antenna Manufacturer and Type</b>	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Horizontal
	Type	Broadband Panel
	Number of Stations Supported	1
	Number of Panels	4
	Design power capacity in use	20.0 %
	Lower Limit	470.00 MHz
	Upper Limit	536.00 MHz
	ERP: (Effective Radiated Power)	15.0 kW
	Manufacturer	
	Model	955514
	Year	1999

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

Facility ID	Call Sign
168482	WTXI-LD

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**Primary  
Antenna**

**New Antenna Costs**

Section	Question	Response
<b>New Antenna Description</b>	Use	Primary (Main)
	Change Type	Purchase New
	Ownership	Owned
	Is antenna shared?	Yes
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	No
<b>New Antenna Manufacturer and Types</b>	Mounting	Side Mount
	Antenna position in stack	Not in Stack
	Polarization	Elliptical
	Type	Broadband Panel
	Number of Stations Supported	2
	Number of Panels/Bays	4
	Lower Limit	470.00 MHz
	Upper Limit	536.00 MHz
	Design power capacity in use	20.0 %
	ERP: (Effective Radiated Power)	15.0 kW
	Manufacturer	
	Model	955514-CP
	Year	2018
	Justification for New Antenna	New antenna is needed to accommodate channel sharing of stations displaced due to repack.

**Primary  
Antenna**

**Other Antenna Costs**

<b>Section</b>	<b>Question</b>	<b>Response</b>
<b>Combiner for Shared Antenna</b>	Do you need a Combiner for a Shared Antenna?	No
<b>Elbow Complex</b>	Do you require the separate purchase of the Elbow Complex?	No
<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
<b>Power Dividers</b>	Does the panel antenna require power dividers?	No
<b>Cable Harness</b>	Does the panel antenna require cable harness?	No

**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?	Yes

**Primary  
Transmission  
Line**

**Existing Transmission Line**

Section	Question	Response
<b>Existing Transmission Line Description</b>	Type of change	Purchase New
	Use	Primary (Main)
	Ownership	Owned
	Is the existing transmission line shared with another station or stations?	Yes
	Is Transmission Line in operating condition?	Yes
<b>Existing Transmission Line Manufacturer and Type</b>	Manufacturer	
	Type	Flexible Air
	Diameter	3 inches
	Number of parallel runs	1
	Length	855 feet per run

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

Facility ID	Call Sign
168061	DW24DE-D

**Primary  
Transmission  
Line**      **New Transmission Line**

Section	Question	Response
<b>New Transmission Line Costs</b>	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Flexible Air
	Diameter	3 inches
	Number of parallel runs	1
	Length	1000 feet per run
	Justification for New Transmission Line	The antenna was moving to a different location on the tower and the existing line could not operate on the new channel
<b>Interior RF Systems</b>	Does the Installation of the Transmission Line require an additional or replacement Inside RF system including switching, patch panels, and dehydrators?	No

**Primary  
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
<b>Existing Tower Description</b>	Type of change	Modify Existing
	Tower Use	Primary (Main)
	Ownership	Leased
	Is this tower consider Complex?	No
	Is this tower currently shared with any other stations?	Yes
	One or more FM, AM or TV radio broadcaster(s)	Yes
	Others Types of Users	No
	Is tower documented for structural analysis?	No
	Is tower compliant with Rev G?	No
<b>Existing Tower Structure Registration</b>	Do you have a tower registration number?	Yes
	ASR Number	1224225
<b>Coordinates (NAD83 ( North American Datum of 1983))</b>	Latitude (NAD83)	25° 59' 10.0" N-
	Longitude (NAD83)	080° 11' 36.3" W-
	Overall Structure Height	1019.02 feet
	Support Structure Height	942.90 feet
	Ground Elevation Above Mean Sea Level (AMSL)	11.15 feet

Structure Type	GTOWER - Guyed Structure Used for Communication Purposes
Tower Owner	American Towers LLC
Date Constructed	10/12/2001

**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
51978	WMIA-FM	FM
51349	WBEC-TV	DTV
41381	WHYI-FM	FM
64971	WSCV	DTV
168482	WTXI-LD	LPD
29547	WSBS-CD	DTV
29567	WSFS	FM
60536	WAMI-DT	DTV
11965	WBGG-FM	FM
138594	W288DD	FX
168061	W24DE-D	LPT
63154	WTVJ	DTV
67153	880204TF	FX
6040	WVFW-LD	LPD
51979	WZTU	FM

**Primary  
Tower**

**Tower Modification Costs**

Section	Question	Response
<b>Engineering Study</b>	Please what type of engineering study is required, if any:	Study need for guyed or free-standing tower
<b>Tower Reinforcements</b>	Please select whether tower reinforcements are needed:	Minor Reinforcements needed

**Primary  
Tower**

**Tower Rigging Costs**

Section	Question	Response
<b>Tower Rigging Costs</b>	Complex Tower	N/A
<b>Helicopter Services Required</b>	Are helicopter services required?	No

**Primary  
Tower**

**Other Tower Expenses Not Listed**

Information not provided.



**Outside Professional Services Costs**

Section	Question	Response
<p><b>Outside Project Management Services</b></p>	<p>Do you require outside project management services?</p>	<p>Yes</p>
	<p>Number of Hours</p>	<p>254</p>
	<p>Explanation</p>	<p>W17DG-D requires the aid of outside project management services to fulfill the requirements of the repack. W17DG-D will hire an outside firm to facilitate and support W17DG-D in these tasks and others to ensure a timely and well managed transition.</p>
<p><b>Outside RF consulting Engineering Services</b></p>	<p>Perform engineering study for displacement application</p>	<p>Yes</p>
	<p>Prepare engineering section of Form FCC Construction Permit Application</p>	<p>Yes</p>
	<p>For Auxiliary Facility</p>	<p>No</p>
	<p>For Main Facility</p>	<p>Yes</p>
	<p>Prepare engineering section of Form FCC License to Cover Application</p>	<p>Yes</p>
	<p>For Auxiliary Facility</p>	<p>No</p>
	<p>For Main Facility</p>	<p>Yes</p>
	<p>Prepare request for Special Temporary Authority</p>	<p>Yes</p>

	Quantity	1
	Prepare Form 601	Yes
<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	Yes
	Quantity	1
	Negotiation of Lease and other Matter for Shared Locations	Yes
	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

**Other Professional Services Expenses Not Listed**

**Outside  
Professional  
Services  
Costs**

Information not provided.

**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	Yes
	FCC Construction Permit Minor Change	Yes
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	Yes
<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?	Yes
<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**

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
<b>Primary Transmitter UAXTE-3R37</b>	<b>\$84,000.00</b>	<b>\$84,617.07</b>		<b>\$81,140.41</b>	
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	\$84,000.00	\$84,617.07	Please see GatesAir quote Q-80136	\$81,140.41	N/A
<b>Sub-total</b>	\$84,000.00	\$84,617.07	N/A	\$81,140.41	N/A
<b>Total for all systems</b>	\$543,822.00	\$548,109.44	N/A	\$100,801.11	N/A

**Components**

Actual Information	
Description	File Name
UHF - Air Cooled Solid State Transmitter 1 - 2.5 kW	<b>Component Description:</b> Transmitter <b>Amount:</b> \$81,140.41

**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
<b>Primary Antenna 955514-CP</b>	<b>\$24,065.00</b>	<b>\$20,430.00</b>		<b>\$0.00</b>	
Sweep test of transmission line and antenna	\$5,730.00	\$5,730.00	N/A	N/A	N/A
UHF-Low Power, Side Mount, Broadband Panel, 4 bay, 15.0kW input, Elliptical	<i>\$13,710.00</i>	\$13,710.00	Please see Mega Industries quote 0113579	N/A	N/A
Side Mount antenna brackets	\$4,625.00	\$990.00	Please see Mega Industries quote 0113579	N/A	N/A
<b>Sub-total</b>	<b>\$24,065.00</b>	<b>\$20,430.00</b>	<b>N/A</b>	<b>\$0.00</b>	<b>N/A</b>
<b>Total for all systems</b>	<b>\$543,822.00</b>	<b>\$548,109.44</b>	<b>N/A</b>	<b>\$100,801.11</b>	<b>N/A</b>

**Components**

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 Cost Justification
<b>Primary Transmission Line</b>	<b>\$59,000.00</b>	<b>\$49,562.92</b>		<b>\$0.00</b>	
Flexible Air Transmission Line - dielectric, 3"	\$59,000.00	\$49,562.92	Please see Mega Industries quote 0113579	N/A	N/A
<b>Sub-total</b>	<b>\$59,000.00</b>	<b>\$49,562.92</b>	N/A	<b>\$0.00</b>	N/A
<b>Total for all systems</b>	<b>\$543,822.00</b>	<b>\$548,109.44</b>	N/A	<b>\$100,801.11</b>	N/A

**Components**

Information not provided.

**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
<b>Primary Tower GTOWER</b>	<b>\$324,450.00</b>	<b>\$324,450.00</b>		<b>\$0.00</b>	
Minor tower reinforcement /modifications	<i>\$158,000.00</i>	\$158,000.00	Catalog of costs	N/A	N/A
Study needed for guyed or free-standing tower	\$8,700.00	\$8,700.00	N/A	N/A	N/A
Tower Rigging Tall Tower (greater than 500')	\$157,750.00	\$157,750.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$324,450.00</b>	<b>\$324,450.00</b>	N/A	<b>\$0.00</b>	N/A
<b>Total for all systems</b>	<b>\$543,822.00</b>	<b>\$548,109.44</b>	N/A	<b>\$100,801.11</b>	N/A

**Components**

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>\$45,597.00</b>	<b>\$62,339.45</b>		<b>\$19,290.70</b>	
Project management of the transition	\$26,797.00	\$41,910.00	Please see Widelity W17DG-D Strategic Support Quote.	\$14,902.75	N/A
Attorney Fees - Prepare and File request for Special Temporary Authorization	\$2,235.00	\$2,235.00	N/A	N/A	N/A
Attorney Fees - Negotiation of lease and other matters for shared locations	\$3,262.50	\$3,262.50	N/A	\$648.00	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$1,577.50	\$1,577.50	N/A	\$400.50	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$3,025.00	\$3,025.00	N/A	N/A	N/A



Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,052.50	\$1,052.50	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$2,102.50	\$2,102.50	N/A	N/A	N/A
Prepare request for Special Temporary Authorization	\$1,280.00	\$1,280.00	N/A	N/A	N/A
Perform engineering study for displacement application	\$1,800.00	\$1,800.00	N/A	N/A	N/A
Prepare/ Review 399 reimbursement form	\$1,710.00	\$3,339.45	Please see Estimated Cost Justification W17DG-D-510- Prepare: Review 399 Reimbursement Form v0	\$3,339.45	N/A
Prepare Form 601	\$755.00	\$755.00	N/A	N/A	N/A
<b>Sub-total</b>	\$45,597.00	\$62,339.45	N/A	\$19,290.70	N/A
<b>Total for all systems</b>	\$543,822.00	\$548,109.44	N/A	\$100,801.11	N/A

## Components

**Actual Information****Description****File Name**

Project management of the transition

**Component Description:** Project Management**Amount:** \$2,262.35**Component Description:** Project Management**Amount:** \$1,337.60**Component Description:** Project Management**Amount:** \$325.70**Component Description:** Project Management**Amount:** \$4.60**Component Description:** Project Management**Amount:** \$1,553.30**Component Description:** Project Management**Amount:** \$919.55**Component Description:** Project Management**Amount:** \$799.25**Component Description:** Project Management**Amount:** \$705.40

	<p><b>Component Description:</b> Project Management</p> <p><b>Amount:</b> \$2,479.75</p>
	<p><b>Component Description:</b> Project Management</p> <p><b>Amount:</b> \$1,251.10</p>
	<p><b>Component Description:</b> Project Management</p> <p><b>Amount:</b> \$325.25</p>
	<p><b>Component Description:</b> Project Management</p> <p><b>Amount:</b> \$1,214.40</p>
	<p><b>Component Description:</b> Project Management</p> <p><b>Amount:</b> \$116.20</p>
	<p><b>Component Description:</b> Project Management</p> <p><b>Amount:</b> \$634.45</p>
	<p><b>Component Description:</b> Project Management</p> <p><b>Amount:</b> \$973.85</p>
Attorney Fees - Prepare and File request for Special Temporary Authorization	Information not provided.
Attorney Fees - Negotiation of lease and other matters for shared locations	<p><b>Component Description:</b> For Professional Services Rendered</p> <p><b>Amount:</b> \$648.00</p>

<p>Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application</p>	<p><b>Component Description:</b> Professional services rendered through September 30, 2020</p> <p><b>Amount:</b> \$400.50</p>
<p>Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application</p>	<p>Information not provided.</p>
<p>Prepare engineering section of FCC Form 2100 (main), License to Cover Application</p>	<p>Information not provided.</p>
<p>Prepare engineering section of FCC Form 2100 (main), Construction Permit Application</p>	<p>Information not provided.</p>
<p>Prepare request for Special Temporary Authorization</p>	<p>Information not provided.</p>
<p>Perform engineering study for displacement application</p>	<p>Information not provided.</p>
<p>Prepare/ Review 399 reimbursement form</p>	<p><b>Component Description:</b> Total Professional Services</p> <p><b>Amount:</b> \$3,339.45</p>
<p>Prepare Form 601</p>	<p>Information not provided.</p>

**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
<b>Other Expenses</b>	<b>\$6,710.00</b>	<b>\$6,710.00</b>		<b>\$370.00</b>	
Equipment Storage	<i>\$0.00</i>	\$0.00	Required due to displacement - documentation pending	N/A	N/A
FCC Filing Fees - Special Temporary Authorization request	\$305.00	\$305.00	N/A	\$200.00	N/A
FCC Filing Fees - Form 2100 Major change CP application	\$4,960.00	\$4,960.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$335.00	N/A	\$170.00	N/A
FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,110.00	N/A	N/A	N/A
<b>Sub-total</b>	<b>\$6,710.00</b>	<b>\$6,710.00</b>	N/A	<b>\$370.00</b>	N/A
<b>Total for all systems</b>	<b>\$543,822.00</b>	<b>\$548,109.44</b>	N/A	<b>\$100,801.11</b>	N/A

**Components**

Actual Information	
Description	File Name
Equipment Storage	Information not provided.
FCC Filing Fees - Special Temporary Authorization request	<p><b>Component Description:</b> W17DG-D-550-Attorney - Negotiate Lease and Other Matters: \$648.00</p> <p><b>Amount:</b> \$200.00</p>
FCC Filing Fees - Form 2100 Major change CP application	Information not provided.
FCC Filing Fees - Form 2100 license to cover application	<p><b>Component Description:</b> W17DG-D-610-FCC Filing Fee - License to Cover Application</p> <p><b>Amount:</b> \$170.00</p>
FCC Filing Fees - Form 2100 minor change CP application	Information not provided.

**Cost Information** **Grand Total**

	<b>Predetermined Cost Estimate</b>	<b>Estimated Cost</b>	<b>Actual Cost</b>
<b>Total for all systems</b>	\$543,822.00	\$548,109.44	\$100,801.11

**Reimbursement Status**

<b>Question</b>	<b>Response</b>
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
	<p><b>Submission of Estimated Expenses Statements</b></p>	<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 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> </ol>	



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 above-named applicant for the Authorization(s) specified above.

**Michael  
Everett  
Todd**  
*Chief  
Engineer*

02/22/2021

Certification	Section	Question	Response
	<b>Submission of Actual Cost Documentation Statements</b>	<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"> <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> </ol>	

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 above-named applicant for the Authorization(s) specified above.

**Michael  
Everett  
Todd**  
*Chief  
Engineer*

02/22/2021

## Attachments