



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility **69922** | Service: **LPT** | Call **K471K** | Channel: **30 (UHF)** |
ID: | Sign:
File **0000089841**
Number:
FRN: **0005009618** | Eligibility **Eligible** | Date **06/09**
Status: | Submitted: **/2021**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
THE CAMP VERDE TV CLUB Doing Business As: THE CAMP VERDE TV CLUB	Roger Doering 420 W Angus Dr CAMP VERDE, AZ 86322 United States	+1 (928) 399-9402	rpd@verdeonline.com	Not-for-Profit

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
Nick Solano <i>Anywave Communications Technologies</i>	Nick Solano 300 Knightsbridge Parkway, Suite 150 Lincolnshire, IL 60069 United States	+1 (816) 882-5600	nick. solano@anywavecom.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		Install transmitter and combiner. K30OI and K32ME plan to share antenna with combiner.

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?	Yes
	Is this transmitter currently in operating condition?	Yes
Existing Transmitter Manufacturer and Type	Manufacturer	
	Model	MX-20U
	Year	2004
	Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power Capacity	.02 kW

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

Facility ID	Call Sign
69924	K49HP

**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	TRN-U-200-D-FB
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	200 W
	Justification for New Transmitter	Lowest power transmitter sold manufactured by Anywave.

**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

Name		Description
Combiner		Combiner for K32ME and K30OI

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?	No
Outside RF consulting Engineering Services	Perform engineering study for displacement application	No
	Prepare engineering section of Form FCC Construction Permit Application	No
	Prepare engineering section of Form FCC License to Cover Application	No
	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	Yes
	RF exposure measurements	No
	Additional Field Engineering Service	No

Outside Professional Services Costs

Other Professional Services Expenses Not Listed

Services Costs

Name	Description
Engineering-General	Engineering Consultation

**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	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)?	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 TRN-U- 200-D-FB	\$35,700.00	\$34,485.00		\$0.00	
Combiner	<i>\$1,400.00</i>	\$1,400.00	N/A	N/A	N/A
Transmitter Building Site Survey/Installation	\$10,000.00	\$10,000.00	N/A	N/A	N/A
UHF - Air Cooled Solid State Transmitter 160 - 300 Watts	\$24,300.00	\$23,085.00	Per attached quote PR1911- 0589	N/A	N/A
Sub-total	\$35,700.00	\$34,485.00	N/A	\$0.00	N/A
Total for all systems	\$95,370.00	\$85,287.00	N/A	\$0.00	N/A

Components

Information not provided.

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
Outside Professional Services	\$59,670.00	\$50,802.00		\$0.00	
Form 399 assistance or other Program Management costs	<i>\$5,000.00</i>	\$5,000.00	N/A	\$0.00	N/A
Prepare/ Review 399 reimbursement form	\$1,710.00	\$1,710.00	N/A	N/A	N/A
Comprehensive coverage verification via field study, if needed	\$52,600.00	\$43,732.00	Per-attached quote number 744-R for Coverage Verification	N/A	N/A
Engineering-General	<i>\$360.00</i>	\$360.00	Cost determined by invoices.	\$0.00	N/A
Sub-total	\$59,670.00	\$50,802.00	N/A	\$0.00	N/A

Total for all systems	\$95,370.00	\$85,287.00	N/A	\$0.00	N/A
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Components

Actual Information	
Description	File Name
Form 399 assistance or other Program Management costs	Component Description: Paperwork PM Amount: \$492.80
	Component Description: Paperwork PM Amount: \$882.42
	Component Description: Paperwork PM Amount: \$200.20
	Component Description: Paperwork PM Amount: \$369.60
Prepare/ Review 399 reimbursement form	Information not provided.
Comprehensive coverage verification via field study, if needed	Information not provided.
Engineering-General	Component Description: Consultation Services Amount: \$360.00

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	\$0.00	\$0.00		\$0.00	
Sub-total	\$0.00	\$0.00	N/A	\$0.00	N/A
Total for all systems	\$95,370.00	\$85,287.00	N/A	\$0.00	N/A

Components

Information not provided.

Cost Information	Grand Total		
		Predetermined Cost Estimate	Estimated Cost
			Actual Cost
	Total for all systems	\$95,370.00	\$85,287.00
			\$0.00

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

Attachments