



(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

Facility	52633	Service:	LPT	Call	K19LD-D	Channel:	19 (UHF)
ID:		Sign:					
File	0000088220						
Number:							
FRN:	0019509470	Eligibility	Eligible	Date	01/25		
		Status:		Submitted:	/2021		

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
Ramar Communications, Inc.	Brad Moran PO Box 3757 Lubbock, TX 79423 United States	+1 (806) 748-9300	bmoran@ramarcom.com	Corporation

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
Winn Boedeker Chief Engineer Ramar Communications	Winn Boedeker PO Box 3757 Lubbock, TX 79452 United States	+1 (806) 748-9342	wb@fox34.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	Replace equipment and change channel

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	MXD-30U
	Year	2000
	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	100537.01- PA-U-50-FA
	Transmitter Type	Solid State
	Solid State Cooling	Air Cooled
	Solid State Power capacity	60 W
	Justification for New Transmitter	Move to digital and change channel

**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
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
Transcoder		Transcoder

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	Purchase New
	Antenna Use	Primary (Main)
	Ownership	Owned
	Is the existing antenna shared with another station or stations?	No
	Is the existing antenna directional?	Yes
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	Yes
Existing Antenna Manufacturer and Type	Mounting	Side Mount
	Antenna position in stack	Middle
	Polarization	Horizontal
	Type	Slotted Coaxial
	ERP: (Effective Radiated Power)	0.24 kW
	Manufacturer	
	Model	al-8
	Year	2000

**Primary
Antenna**

New Antenna Costs

Section	Question	Response
New Antenna Description	Use	Primary (Main)
	Change Type	Purchase New
	Ownership	Owned
	Is antenna shared?	No
	Is antenna directional?	Yes
	Will antenna be located on or in close proximity to an antenna farm?	Yes
New Antenna Manufacturer and Types	Mounting	Side Mount
	Antenna position in stack	Middle
	Polarization	Horizontal
	Type	Broadband Slot
	Number of Stations Supported	1
	Number of Panels/Bays	8
	Lower Limit	470.00 MHz
	Upper Limit	806.00 MHz
	Design power capacity in use	10.0 %
	ERP: (Effective Radiated Power)	1000.0 W
	Manufacturer	
	Model	SL-8-NF-19
	Year	2019
	Justification for New Antenna	Tuned to new frequency

**Primary
Antenna**

Other Antenna Costs

Section	Question	Response
Elbow Complex	Do you require the separate purchase of the Elbow Complex?	No
Side Mount Brackets	Do you require the separate purchase of side mount brackets for a high power antenna?	No
Pattern Scatter Analysis	Do you require separate purchase of pattern scatter analysis for a side mount high or medium power antenna?	No
Sweep Test	Do you require the sweep testing of transmission line and antenna?	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
Existing Transmission Line Description	Type of change	Purchase New
	Use	Primary (Main)
	Ownership	Owned
	Is the existing transmission line shared with another station or stations?	No
	Is Transmission Line in operating condition?	Yes
Existing Transmission Line Manufacturer and Type	Manufacturer	
	Type	Flexible Foam
	Diameter	7/8 inches
	Number of parallel runs	0
	Length	100 feet per run

Primary **New Transmission Line**
Transmission Line

Section	Question	Response
New Transmission Line Costs	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Type	Flexible Foam
	Diameter	7/8 inches
	Number of parallel runs	1
	Length	50 feet per run
	Justification for New Transmission Line	Old transmission line was inadequate from age to reuse
Interior RF Systems	Does the Installation of the Transmission Line require an additional or replacement Inside RF system including switching, patch panels, and dehydrators?	No

Primary **Other Transmission Line Expenses Not Listed**
Transmission Line

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
Existing Tower Description	Type of change	Move Equipment
	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?	Unknown
	Is tower compliant with Rev G?	Unknown
Existing Tower Structure Registration	Do you have a tower registration number?	No
Coordinates (NAD83 (North American Datum of 1983))	Latitude (NAD83)	37° 11' 03.4" N-
	Longitude (NAD83)	107° 29' 08.7" W-
	Overall Structure Height	49.21 feet
	Support Structure Height	49.21 feet
	Ground Elevation Above Mean Sea Level (AMSL)	8845.00 feet

	Structure Type	TOWER - Free Standing or Guyed Structure
	Tower Owner	KOB
	Date Constructed	11/06/2019

**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
48595	K34QD-D	LPT
52631	K21OG-D	LPT
126105	K31IH-D	LPT
35816	KSUT	FM

**Primary
Tower**

Tower Rigging Costs

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

**Primary
Tower**

Other Tower Expenses Not Listed

Name	Description
Tower Crew	Tower crew to remove existing antenna and install new

**Outside
Professional**

Section	Question	Response
Services Costs Outside Project Management Services	Do you require outside project management services?	No
Outside RF consulting Engineering Services	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	Yes
Attorney and Other Outside Consulting Services	Prepare and file Form FCC Construction Permit Application	No
	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
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 not 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	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 100537.01-PA-U-50-FA	\$16,750.00	\$5,301.00		\$2,301.00	
Transcoder	<i>\$3,000.00</i>	\$3,000.00	N/A	N/A	N/A
UHF - Air Cooled Solid State Transmitter 50.001 - 150 Watts	\$13,750.00	\$2,301.00	N/A	\$2,301.00	N/A
Sub-total	\$16,750.00	\$5,301.00	N/A	\$2,301.00	N/A
Total for all systems	\$95,612.50	\$30,785.44	N/A	\$13,237.94	N/A

Components

Actual Information	
Description	File Name
Transcoder	Information not provided.

UHF - Air Cooled Solid State Transmitter 50.001 - 150 Watts	<table> <tr> <td data-bbox="702 91 1085 448"> Component Description: </td><td data-bbox="1085 91 1428 448"> Amplifier - Invoice split between K19LD (Bayfield) and K19LC (Pagosa Springs) REVISED INVOICE </td></tr> <tr> <td data-bbox="702 448 1085 560"> Amount: </td><td data-bbox="1085 448 1428 560"> \$2,301.00 </td></tr> <tr> <td data-bbox="702 560 1085 844"> Component Description: </td><td data-bbox="1085 560 1428 844"> Transcoder/mask filter-Determined not reimbursable REMOVED </td></tr> <tr> <td data-bbox="702 844 1085 844"> Amount: </td><td data-bbox="1085 844 1428 844"> N/A </td></tr> </table>	Component Description:	Amplifier - Invoice split between K19LD (Bayfield) and K19LC (Pagosa Springs) REVISED INVOICE	Amount:	\$2,301.00	Component Description:	Transcoder/mask filter-Determined not reimbursable REMOVED	Amount:	N/A
Component Description:	Amplifier - Invoice split between K19LD (Bayfield) and K19LC (Pagosa Springs) REVISED INVOICE								
Amount:	\$2,301.00								
Component Description:	Transcoder/mask filter-Determined not reimbursable REMOVED								
Amount:	N/A								

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 SL-8-NF-19	\$8,125.00	\$7,279.44		\$7,279.44	
UHF Low-Power, 1 - 2 kW 8-bay slot antenna, horizontally-polarized side mount	\$8,125.00	\$7,279.44	N/A	\$7,279.44	N/A
Sub-total	\$8,125.00	\$7,279.44	N/A	\$7,279.44	N/A
Total for all systems	\$95,612.50	\$30,785.44	N/A	\$13,237.94	N/A

Components

Actual Information Description	File Name
UHF Low-Power, 1 - 2 kW 8-bay slot antenna, horizontally-polarized side mount	<div>Component Description: RF Spec Paraslot Antenna SL-8-NF-19-REVISED</div> <div>Amount: \$7,279.44</div>

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
Primary Transmission Line	\$550.00	\$550.00		\$0.00	
Flexible Foam Transmission Line - dielectric, 7/8"	\$550.00	\$550.00	N/A	N/A	N/A
Sub-total	\$550.00	\$550.00	N/A	\$0.00	N/A
Total for all systems	\$95,612.50	\$30,785.44	N/A	\$13,237.94	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
Primary Tower TOWER	\$61,190.00	\$8,657.50		\$3,657.50	
Tower Rigging Short Tower (less than 500')	\$56,190.00	\$3,657.50	Adjust estimate to match invoices.	\$3,657.50	N/A
Tower Crew	\$5,000.00	\$5,000.00	N/A	\$0.00	N/A
Sub-total	\$61,190.00	\$8,657.50	N/A	\$3,657.50	N/A
Total for all systems	\$95,612.50	\$30,785.44	N/A	\$13,237.94	N/A

Components

Actual Information	
Description	File Name
Tower Rigging Short Tower (less than 500')	Component Description: REVISED INVOICE - Antenna installation charges-split with K19LC (Pagosa Springs)
	Amount: \$2,280.00
	Component Description: Antenna installation Charges REVISION #3; Remove 7/8" coax
	Amount: \$1,377.50

Tower Crew	Component Description:	Antenna installation charges - split with K19LC (Pagosa Springs)
	Amount:	N/A
	Component Description:	Antenna istallation charges - split with K19LC (Pagosa Springs)
	Amount:	N/A

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	\$8,997.50	\$8,997.50		\$0.00	
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$1,577.50	\$1,577.50	N/A	N/A	N/A
Prepare Form 601	\$755.00	\$755.00	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
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	\$1,710.00	N/A	N/A	N/A
Sub-total	\$8,997.50	\$8,997.50	N/A	\$0.00	N/A
Total for all systems	\$95,612.50	\$30,785.44	N/A	\$13,237.94	N/A

Components

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	\$0.00	\$0.00		\$0.00	
Sub-total	\$0.00	\$0.00	N/A	\$0.00	N/A
Total for all systems	\$95,612.50	\$30,785.44	N/A	\$13,237.94	N/A

Components

Information not provided.

Cost Information	Grand Total		
		Predetermined Cost Estimate	Estimated Cost
			Actual Cost
	Total for all systems	\$95,612.50	\$30,785.44
			\$13,237.94

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>Keith Kerr CFO 01/25/2021</p>

Attachments