


Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0386 (July 2002)	FOR FCC USE ONLY
Extension of Existing Engineering STA Read Instructions/FAQ before filling out form		FOR COMMISSION USE ONLY FILE NO.

Section I - General Information

1. Legal Name of the Applicant ALAMANCE MEDIA PARTNERS, INC. Mailing Address 2509 ELON OSSIPEE ROAD <table border="1"> <tr> <td>City ELON</td> <td>State or Country (if foreign address) NC</td> <td>Zip Code 27244 -</td> </tr> </table> <table border="1"> <tr> <td>Telephone Number (include area code) 3369263141</td> <td>E-Mail Address (if available)</td> </tr> </table> <table border="1"> <tr> <td>FCC Registration No 0028226785</td> <td>Call Sign WSML</td> <td>Facility ID Number 740</td> </tr> </table>	City ELON	State or Country (if foreign address) NC	Zip Code 27244 -	Telephone Number (include area code) 3369263141	E-Mail Address (if available)	FCC Registration No 0028226785	Call Sign WSML	Facility ID Number 740
City ELON	State or Country (if foreign address) NC	Zip Code 27244 -						
Telephone Number (include area code) 3369263141	E-Mail Address (if available)							
FCC Registration No 0028226785	Call Sign WSML	Facility ID Number 740						
2. Contact Representative (if other than licensee/permittee) COE W. RAMSEY Mailing Address 150 FAYETTEVILLE STREET SUITE 1700 <table border="1"> <tr> <td>City RALEIGH</td> <td>State or Country (if foreign address) NC</td> <td>ZIP Code 27601 -</td> </tr> </table> <table border="1"> <tr> <td>Telephone Number (include area code) 9198390300</td> <td>E-Mail Address (if available) CRAMSEY@BROOKSPIERCE.COM</td> </tr> </table>	City RALEIGH	State or Country (if foreign address) NC	ZIP Code 27601 -	Telephone Number (include area code) 9198390300	E-Mail Address (if available) CRAMSEY@BROOKSPIERCE.COM			
City RALEIGH	State or Country (if foreign address) NC	ZIP Code 27601 -						
Telephone Number (include area code) 9198390300	E-Mail Address (if available) CRAMSEY@BROOKSPIERCE.COM							
3. Purpose: <input type="radio"/> Engineering STA <input checked="" type="radio"/> Extension of Existing Engineering STA File Number: BSTA - 20210208AAD <input type="radio"/> Legal STA <input type="radio"/> Extension of Existing Legal STA								
4. Service: AM								
5. Community of License: City: GRAHAM State: NC								
6. If this application has been submitted without a fee, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114): <input type="radio"/> Governmental Entity <input type="radio"/> Noncommercial Educational Licensee/Permittee <input type="radio"/> Other <input checked="" type="radio"/> N/A (Fee Required)								
7. Environmental Protection Act. The proposed facility is excluded from environmental processing under 47. C.F.R. Section 1.1306 (i.e., The facility will not have a significant environmental impact and complies with the maximum permissible radiofrequency electromagnetic exposure limits for controlled and uncontrolled environments). Unless the applicant can determine compliance through the use of the RF worksheets in Appendix A, an Exhibit is required. By checking "Yes" above, the applicant also certifies that it, in coordination with other users of the site, will reduce power or cease operation as necessary to protect persons having access to the site, tower or antenna from radiofrequency electromagnetic exposure in excess of FCC guidelines.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 33]							

8.	Please explain in detail the "extraordinary circumstances" which warrant temporary operations at variance from the Commission's Rules. In addition, please specify 1) the specific rules and/or policies from which the applicant seeks temporary relief; 2) how the public interest will be furthered by grant; and 3) the expected duration of the STA and the licensee's plan for restoration of licensed operation. If requesting variance with other than authorized technical facilities, please specify the exact facilities sought.	[Exhibit 34]
9.	Anti-Drug Abuse Act Certification. Applicant certifies that neither applicant nor any party to the application is subject to denial of federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862.	<input checked="" type="radio"/> Yes <input type="radio"/> No

I hereby certify that the statements in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge that all certifications and attached Exhibits are considered material representations.

Typed or Printed Name of Person Signing CHUCK MARSH	Typed or Printed Title of Person Signing PRESIDENT
Signature 	Date (mm/dd/yyyy) APRIL 29th 2022

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).

Exhibits

Exhibit 13

Description: OTHER VARIANCE EXPLANATION

PLEASE REFER TO EXHIBIT 16.

Attachment 13

Exhibit 34

Description: STA REQUEST

Please see attached exhibit.

Attachment 34

April 2022 Update:

For the reasons described in the underlying STA (BSTA-20210208AAD), the licensee is operating WSML(AM) during daytime hours with power reduced to 5 Kw and with no nighttime operations.

Since WSML(AM)'s last STA extension (BESTA-20211007AAG), the Commission granted a new construction permit for WSML(AM) (BP-20211007AAH) to change sites and to operate non-directionally on an existing tower.

To facilitate WSML(AM) at the new site, the owner of the tower needs to make modifications to the tower site. While the owner continues to plan to make the necessary modifications, that project has been delayed due to another extensive AM project the tower owner is in the process of completing.

In the interim, the licensee has secured assistance from the tower owner in attempting to troubleshoot the problems plaguing WSML(AM)'s current antenna system. Subject to further troubleshooting and component availability, it is hoped that WSML(AM)'s nighttime operations can be restored pending relocation to the new site.

For the foregoing reasons, the licensee respectfully requests extension of STA to continue operating WSML(AM) during daytime hours with power reduced to 5 Kw and with no nighttime operations. Further extension of STA will allow the licensee to continue to provide WSML(AM)'s service to the public while it continues to work towards relocation of WSML(AM) to the new site specified in its construction permit.

READ INSTRUCTIONS CAREFULLY
BEFORE PROCEEDING

FEDERAL COMMUNICATIONS COMMISSION
REMITTANCE ADVICE

Approved by OMB
3060-0589
Page No 1 of 1

(1) LOCK BOX # 979089		SPECIAL USE ONLY	
		FCC USE ONLY	
SECTION A - PAYER INFORMATION			
(2) PAYER NAME (if paying by credit card enter name exactly as it appears on the card) Alamance Media Partners, Inc.		(3) TOTAL AMOUNT PAID (U.S. Dollars and cents) 290.00	
(4) STREET ADDRESS LINE NO.1 2509 Elon Ossipee Road			
(5) STREET ADDRESS LINE NO. 2			
(6) CITY Elon		(7) STATE NC	(8) ZIP CODE 27244
(9) DAYTIME TELEPHONE NUMBER (include area code) 3369263141		(10) COUNTRY CODE (if not in U.S.A.) US	
FCC REGISTRATION NUMBER (FRN) REQUIRED			
(11) PAYER (FRN) 0028226785			
IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C) COMPLETE SECTION BELOW FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET			
(13) APPLICANT NAME Alamance Media Partners, Inc.			
(14) STREET ADDRESS LINE NO.1 2509 Elon Ossipee Road			
(15) STREET ADDRESS LINE NO. 2			
(16) CITY Elon		(17) STATE NC	(18) ZIP CODE 27244
(19) DAYTIME TELEPHONE NUMBER (include area code) 3369263141		(20) COUNTRY CODE (if not in U.S.A.) US	
FCC REGISTRATION NUMBER (FRN) REQUIRED			
(21) APPLICANT (FRN) 0028226785			
COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET			
(23A) CALL SIGN/OTHER ID WSML	(24A) PAYMENT TYPE CODE MVV	(25A) QUANTITY 1	
(26A) FEE DUE FOR (PTC) 290.00	(27A) TOTAL FEE 290.00	FCC USE ONLY	
(28A) FCC CODE 1 740		(29A) FCC CODE 2 CDBS20220502AAA	
(23B) CALL SIGN/OTHER ID	(24B) PAYMENT TYPE CODE	(25B) QUANTITY	
(26B) FEE DUE FOR (PTC)	(27B) TOTAL FEE	FCC USE ONLY	
(28B) FCC CODE 1		(29B) FCC CODE 2	
SECTION D - CERTIFICATION			
CERTIFICATION STATEMENT I, _____, certify under penalty of perjury that the foregoing and supporting information is true and correct to the best of my knowledge, information and belief. SIGNATURE _____ DATE _____			
SECTION E - CREDIT CARD PAYMENT INFORMATION			
MASTERCARD _____ VISA _____ AMEX _____ DISCOVER _____			
ACCOUNT NUMBER _____		EXPIRATION DATE _____	
I hereby authorize the FCC to charge my credit card for the service(s)/authorization herein described.			
SIGNATURE _____		DATE _____	



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Register New FRN | Reset
FRN Password
| Search for FRN

FCC Registration

[FCC](#) > [FCC Registration](#) > [Manage Existing FRNs](#) > [FRN Financial](#) > [View/Pay](#) > Payment Confirmation

Logged In As: cheynen@brookspierce.com | [Logout](#)

Online Payment Confirmation

Print

Online Payment Confirmation

Total Amount	\$290.00
Payer FRN	0028226785
Payer Name	cheynen@brookspierce.com
Remittance ID	3804620
Treasury Tracking ID	2702MFCO

Thank you for your payment!

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For assistance, please submit a help request at <https://www.fcc.gov/wireless/available-support-services> or call 877-480-3201 (Mon.-Fri. 8 a.m.-6 p.m. ET).