

United States of America

FEDERAL COMMUNICATIONS COMMISSION LOW POWER TELEVISION/TELEVISION TRANSLATOR BROADCAST STATION CONSTRUCTION PERMIT

Authorizing Official:

Official Mailing Address:

EDGE SPECTRUM, INC.
7829 CENTER BLVD. SE. NO. 190
SNOQUALMIE WA 98065

Facility Id: 28815

Call Sign: W28DY-D

Permit File Number: BPTT-19920214NB

Mary M. Fitzgerald Supervisory Engineer Video Division Media Bureau

Grant Date: September 24, 1992 This permit expires 3:00 a.m. local time, March 24, 1994.

Subject to the provisions of the Communications Act of 1934, as amended, subsequent acts and treaties, and all regulations heretofore or hereafter made by this Commission, and further subject to the conditions set forth in this permit, the permittee is hereby authorized to construct the radio transmitting apparatus herein described. Installation and adjustment of equipment not specifically set forth herein shall be in accordance with representations contained in the permittee's application for construction permit except for such modifications as are presently permitted, without application, by the Commission's Rules.

Commission rules which became effective on February 16, 1999, have a bearing on this construction permit. See Report & Order, Streamlining of Mass Media Applications, MM Docket No. 98-43, 13 FCC RCD 23056, Para. 77-90 (November 25, 1998); 63 Fed. Reg. 70039 (December 18, 1998). Pursuant to these rules, this construction permit will be subject to automatic forfeiture unless construction is complete and an application for license to cover is filed prior to expiration. See Section 73.3598.

Equipment and program tests shall be conducted only pursuant to Sections 73.1610 and 73.1620 of the Commission's Rules.

Name of Permittee: EDGE SPECTRUM, INC.

Station Location: MI-SAULT STE. MARIE

Frequency (MHz): 788 - 794 Offset: NONE

Channel: 67

Hours of Operation: Unlimited

Callsign: W28DY-D Permit No.: BPTT-19920214NB

Transmitter: Type Accepted. See Sections 74.750 of the Commission's Rules.

Antenna type: (directional or non-directional): Non-Directional

Major lobe directions (degrees true): Not Applicable

Beam Tilt: Not Applicable

Antenna Coordinates: North Latitude: 46 deg 26 min

West Longitude: 84 deg 22 min 42 sec

Maximum Effective Radiated Power (ERP) Towards Radio Horizon: 10.5kW

Maximum ERP in any Horizontal and Vertical Angle: 10.5 kW

Height of radiation center above ground: 48 Meters

Height of radiation center above mean sea level: 261 Meters

Antenna structure registration number: None

Overall height of antenna structure above ground: 63 Meters

Special operating conditions or restrictions:

Prior to construction of the tower authorized herein, permittee shall notify AM Station(s) listed below so that the station(s) may commence determining operating power by the indirect method. Permittee shall be responsible for the installation and continued maintenance of detuning apparatus necessary to prevent adverse effects upon the radiation pattern of the AM station(s). Both prior to construction of the tower and subsequent to the installation of all appurtenance thereon, antenna impedance measurements of the AM station(s) shall be made and sufficient field strength measurements, taken at 10 locations along each of eight equally spaces radials, shall be made to establish that the AM radiation pattern is essentially omnidirectional. Prior to or simultaneous with the filing of application for license to cover this permit, the results of the field strength measurements and the impedance measurements shall be submitted to the Commission in an application for the AM station(s) to return to the direct method of power determination.

(Revised March 14, 1983)

WSOO 1230 KHZ, SAULT STE. MARIE, MI

Your construction permit application did not identify the name, address and telephone number of a person who may be contacted in an emergency to suspend operation of this station, should such action be deemed necessary by the Commission. You are directed to provide this information along with your license application on FCC Form 347.

*** END OF AUTHORIZATION ***