



(REFERENCE COPY - Not for submission)

# Digital Class A Engineering STA Application

File Number: **0000036719** | Submit Date: **12/22/2017** | Call Sign: **KFDF-CD** | Facility ID: **168154** | FRN: **0021646880** |  
State: **Arkansas** | City: **FORT SMITH**  
Service: **DCA** | Purpose: **Engineering STA** | Status: **Granted** | Status Date: **01/12/2018** | Expiration Date: |  
Filing Status: **InActive**

General Information

Section	Question	Response
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Fees, Waivers, and Exemptions

Section	Question	Response
Fees	Is the applicant exempt from FCC application Fees?	No
	Indicate reason for fee exemption:	
Waivers	Does this filing request a waiver of the Commission's rule(s)?	No
	Total number of rule sections involved in this waiver request:	

Application Type	Fee Code	Fee Amount
Engineering STA	MGT	\$190.00
Total		\$190.00

**Applicant  
Information**

**Applicant Name, Type, and Contact Information**

Applicant	Address	Phone	Email	Applicant Type
<b>KTV MEDIA, LLC</b> <b>Applicant</b> Doing Business As: KTV MEDIA, LLC	Larry Morton 17200 Chenal Parkway Suite 300-267 Little Rock, AR 72223 United States	+1 (501) 476- 1507	EQUITYLEM@GMAIL. COM	Other

**Authorization Holder Name**

Check box if the Authorization Holder name is being updated because of the sale (or transfer of control) of the Authorization(s) to another party and for which proper Commission approval has not been received or proper notification provided.

Contact  
Representatives  
(3)

Contact Name	Address	Phone	Email	Contact Type
<b>Jim McPhetridge</b> <b>McPhetridge</b> WES Broadcasting	Jim McPhetridge 228 Flynn Drive El Paso, TX 79932 United States	+1 (915) 892- 2775	jmcphetridge@sbcglobal. net	Technical Representative
<b>Larry Morton</b> <i>Manager</i> ELLIS-WILSON, LLC	Larry Morton PO Box 23808 Little Rock, AR 72221 United States	+1 (501) 476- 1507	equitylem@gmail.com	Owner's Representative
<b>Lori Withrow Withrow</b> Lori E. Withrow, PLLC	Lori Withrow 12410 Cantrell Road Suite 100 Little Rock, AR 72223 United States	+1 (501) 227- 2000	lwithrow@allenwithrow. com	Legal Representative

Channel and Facility Information

Section	Question	Response
Proposed Community of License	Facility ID	168154
	State	Arkansas
	City	FORT SMITH
	DCA Channel	44
	Designated Market Area	Ft. Smith-Fay-Sprngdl-Rgrs

Antenna Location Data

Section	Question	Response
Antenna Structure Registration	Do you have an FCC Antenna Structure Registration (ASR) Number?	Yes
	ASR Number	1037672
Coordinates (NAD83)	Latitude	35° 47' 49.0" N+
	Longitude	094° 10' 05.0" W-
	Structure Type	TOWER-A free standing or guyed struct
	Overall Structure Height	106.4 meters
	Support Structure Height	103.6 meters
	Ground Elevation (AMSL)	634.1 meters
Antenna Data	Height of Radiation Center Above Ground Level	94 meters
	Height of Radiation Center Above Mean Sea Level	728.1 meters
	Effective Radiated Power	4.52 kW

Antenna  
Technical Data

Section	Question	Response
Antenna Type	Antenna Type	Directional Custom
	Do you have an Antenna ID?	No
	Antenna ID	1002780
Antenna Manufacturer and Model	Manufacturer:	SIRA
	Model	UTV01 Array
	Rotation	0 degrees
	Electrical Beam Tilt	0.5
	Mechanical Beam Tilt	Not Applicable
	toward azimuth	
	Polarization	Horizontal
Elevation Radiation Pattern	Does the proposed antenna propose elevation radiation patterns that vary with azimuth for reasons other than the use of mechanical beam tilt?	No
	Uploaded file for elevation antenna (or radiation) pattern data	
	Out-of-Channel Emission Mask:	Stringent

Directional Antenna Relative Field Values (Pre-rotated Pattern)

Degree	Value	Degree	Value	Degree	Value	Degree	Value
0	0.001	90	0.975	180	0.921	270	0.062
10	0.014	100	0.985	190	0.990	280	0.009
20	0.081	110	0.894	200	0.963	290	0.001
30	0.189	120	0.809	210	0.857	300	0.001
40	0.303	130	0.852	220	0.702	310	0.001
50	0.429	140	0.957	230	0.545	320	0.001
60	0.575	150	0.936	240	0.402	330	0.001
70	0.735	160	0.831	250	0.281	340	0.001
80	0.884	170	0.819	260	0.166	350	0.001

Additional Azimuths

Degree	V <sub>A</sub>
95	1.0
195	1.0

## Certification

Section	Question	Response
<b>General Certification Statements</b>	The Applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by authorization or otherwise, and requests an Authorization in accordance with this application (See Section 304 of the Communications Act of 1934, as amended.).	
	The Applicant certifies that neither the Applicant nor any other party to the application is subject to a denial of Federal benefits pursuant to §5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. §862, because of a conviction for possession or distribution of a controlled substance. This certification does not apply to applications filed in services exempted under §1.2002(c) of the rules, 47 CFR . See §1.2002(b) of the rules, 47 CFR §1.2002(b), for the definition of "party to the application" as used in this certification §1.2002 (c). The Applicant certifies that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.	
<b>Authorized Party to Sign</b>	<b>FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID</b> Upon grant of this application, the Authorization Holder may be subject to certain construction or coverage requirements. Failure to meet the construction or coverage requirements will result in automatic cancellation of the Authorization. Consult appropriate FCC regulations to determine the construction or coverage requirements that apply to the type of Authorization requested in this application. WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, §312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, §503).	
	I certify that this application includes all required and relevant attachments.	Yes
	I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	<b>Lori Withrow Withrow</b> <i>Attorney</i>  12/22/2017

Attachments

File Name	Uploaded By	Attachment Type	Description
<a href="#"><u>36719.pdf</u></a>	Internal	All Purpose	
<a href="#"><u>Extraordinary Circumstance for KFDF-CD Ch 44 Interim STA.pdf</u></a>	Internal	All Purpose	
<a href="#"><u>Extraordinary Circumstance for KFDF-CD Ch 44 Interim STA.pdf</u></a>	Applicant	General Information	Extraordinary Excuse