



(REFERENCE COPY - Not for submission)

DTV Engineering STA Application

File Number: **0000058788** | Submit Date: **08/07/2018** | Call Sign: **WVER** | Facility ID: **69946** | FRN: **0005067830** | State: **Vermont** | City: **RUTLAND**
Service: **DTV** | Purpose: **Engineering STA** | Status: **Granted** | Status Date: **08/10/2018** | Expiration Date: **02/11/2019**

Filing Status: **Active**

General Information

Section	Question	Response
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Fees, Waivers, and Exemptions

Section	Question	Response
Waivers	Does this filing request a waiver of the Commission's rule(s)?	No
	Total number of rule sections involved in this waiver request:	

**Applicant
Information**

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
VERMONT ETV, INC. Doing Business As: Vermont PBS	Tom Laffan 204 ETHAN ALLEN AVENUE COLCHESTER, VT 05446 United States	+1 (802) 655- 4800	tlaffan@vermontpbs. org	Not-for-Profit

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
Tom Laffan <i>Technical Representative</i> Vermont ETV, Inc.	Tom Laffan 204 Ethan Allen Avenue Colchester, VT 05446 United States	+1 (802) 655- 4800	tlaffan@vermontpbs. org	Technical Representative
Rajat Mathur , P. E . <i>Consulting Engineer</i> Hammett & Edison, Inc.	470 3rd St W Sonoma, CA 95476 United States	+1 (707) 996- 5200	rmathur@h-e.com	Technical Representative
Lawrence M. Miller <i>Attorney</i> Garvey Schubert Barer	1000 Potomac Street, NW Suite 200 Washington, DC 20007 United States	+1 (202) 298- 2534	lmiller@gsblaw.com	Legal Representative

Channel and Facility Information

Section	Question	Response
Proposed Community of License	Facility ID	69946
	State	Vermont
	City	RUTLAND
	DTV Channel	10
Facility Type	Facility Type	Noncommercial Educational
	Station Type	Main
Zone	Zone	2

Antenna Location Data

Section	Question	Response
Antenna Structure Registration	Do you have an FCC Antenna Structure Registration (ASR) Number?	Yes
	ASR Number	1060721
Coordinates (NAD83)	Latitude	43° 26' 15.0" N+
	Longitude	072° 27' 06.0" W-
	Structure Type	TOWER-A free standing or guyed struct
	Overall Structure Height	129.1 meters
	Support Structure Height	116.0 meters
	Ground Elevation (AMSL)	872.0 meters
Antenna Data	Height of Radiation Center Above Ground Level	81 meters
	Height of Radiation Center Above Average Terrain	648.9 meters
	Height of Radiation Center Above Mean Sea Level	953.0 meters
	Effective Radiated Power	5.0 kW

**Antenna
Technical Data**

Section	Question	Response
Antenna Type	Antenna Type	Directional Custom
	Do you have an Antenna ID?	Yes
	Antenna ID	1003638
Antenna Manufacturer and Model	Manufacturer:	KAT
	Model	75010242 Array
	Rotation	340 degrees
	Electrical Beam Tilt	Not Applicable
	Mechanical Beam Tilt	Not Applicable
	toward azimuth	
	Polarization	Horizontal
DTV and DTS: Elevation 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	

Directional Antenna Relative Field Values (Pre-rotated Pattern)

Degree	V _A (Authorized Value)	Degree	V _A (Authorized Value)	Degree	V _A (Authorized Value)	Degree	V _A (Authorized Value)
0	0.998	90	0.003	180	0.084	270	0.023
10	0.948	100	0.032	190	0.077	280	0.076
20	0.838	110	0.045	200	0.057	290	0.162
30	0.684	120	0.041	210	0.032	300	0.282
40	0.513	130	0.024	220	0.004	310	0.433
50	0.347	140	0.021	230	0.024	320	0.6
60	0.211	150	0.044	240	0.040	330	0.762
70	0.112	160	0.067	250	0.040	340	0.895
80	0.043	170	0.081	260	0.024	350	0.979

Additional Azimuths

Degree	V _A
358	1
356	1

Certification

Section	Question	Response
<p>General Certification Statements</p>	<p>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.).</p>	
	<p>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.</p>	
<p>Authorized Party to Sign</p>	<p>FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID</p> <p>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.</p> <p>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).</p>	
	<p>I certify that this application includes all required and relevant attachments.</p>	<p>Yes</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>Holly Groschner <i>President and CEO</i></p> <p>08/07/2018</p>

Attachments

File Name	Uploaded By	Attachment Type	Description
<u>Reason for STA WVER.pdf</u>	Applicant	All Purpose	Reason for STA
<u>WVER DTS STA Brattleboro Location.pdf</u>	Applicant	All Purpose	Brattleboro Location
<u>WVER DTS STA Mt. Pleasant Location.pdf</u>	Applicant	All Purpose	Mt. Pleasant Location
<u>WVER DTS STA Pownal, VT Location 6Aug2018.pdf</u>	Applicant	All Purpose	Pownal, VT Location