



(REFERENCE COPY - Not for submission)

DTV Engineering STA Application

File Number: **0000079848** | Submit Date: **08/02/2019** | Call Sign: **WXIX-TV** | Facility ID: **39738** | FRN: **0018223693** | State: **Kentucky** | City: **NEWPORT**
 Service: **DTV** | Purpose: **Engineering STA** | Status: **Granted** | Status Date: **08/06/2019** | Expiration Date: **10/18/2019**
 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	\$200.00
Total		\$200.00

**Applicant
Information**

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
GRAY TELEVISION LICENSEE, LLC Doing Business As: WXIX	4370 PEACHTREE ROAD, NE ATLANTA, GA 30319 United States	+1 (513) 421- 1919	allfclms@gray. tv	Limited Liability Company

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
(2)**

Contact Name	Address	Phone	Email	Contact Type
Joseph M. Davis , P.E. . <i>Consulting Engineer</i> Chesapeake RF Consultants, LLC	207 Old Dominion Road Yorktown, VA 23692 United States	+1 (703) 650- 9600	Joseph.Davis@RF- consultants.com	Technical Representative
Joan Stewart , Esq. . <i>Legal Counsel</i> Wiley Rein, LLP	Joan Stewart 1776 K Street NW Washington, DC 20006 United States	+1 (202) 719- 7438	jstewart@wileyrein.com	Legal Representative

Channel and Facility Information

Section	Question	Response
Proposed Community of License	Facility ID	39738
	State	Kentucky
	City	NEWPORT
	DTV Channel	29
	Designated Market Area	Cincinnati
Facility Type	Facility Type	Commercial
	Station Type	Main
Zone	Zone	1

Primary station proposed to be rebroadcast:

Facility Id	Call Sign	City	State
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Antenna Location Data

Section	Question	Response
Antenna Structure Registration	Do you have an FCC Antenna Structure Registration (ASR) Number?	Yes
	ASR Number	1012088
Coordinates (NAD83)	Latitude	39° 07' 19.0" N+
	Longitude	084° 32' 52.0" W-
	Structure Type	GTOWER-Guyed Structure Used for Communication Purposes
	Overall Structure Height	311.2 meters
	Support Structure Height	290.1 meters
	Ground Elevation (AMSL)	221.9 meters
Antenna Data	Height of Radiation Center Above Ground Level	248.4 meters
	Height of Radiation Center Above Average Terrain	252.4 meters
	Height of Radiation Center Above Mean Sea Level	470.3 meters
	Effective Radiated Power	83 kW

**Antenna
Technical Data**

Section	Question	Response
Antenna Type	Antenna Type	Directional Custom
	Do you have an Antenna ID?	No
	Antenna ID	1005332
Antenna Manufacturer and Model	Manufacturer:	DIE
	Model	TFU-16WB C160H
	Rotation	90 degrees
	Electrical Beam Tilt	0.55
	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	Value	Degree	Value	Degree	Value	Degree	Value
0	0.771	90	0.884	180	0.635	270	0.887
10	0.787	100	0.834	190	0.589	280	0.932
20	0.832	110	0.765	200	0.474	290	0.973
30	0.894	120	0.659	210	0.366	300	0.998
40	0.955	130	0.517	220	0.386	310	0.993
50	0.992	140	0.384	230	0.520	320	0.956
60	0.997	150	0.365	240	0.663	330	0.895
70	0.972	160	0.474	250	0.768	340	0.833
80	0.930	170	0.589	260	0.837	350	0.787

Additional Azimuths

Degree	V _A
56	0.999
304	1.000

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>Robert Folliard , III . <i>Assistant Secretary</i></p> <p>08/02/2019</p>

Attachments

File Name	Uploaded By	Attachment Type	Description
<u>WXIX-TV STA request for interim antenna ENG 07-24-2019.pdf</u>	Applicant	All Purpose	WXIX-TV STA engineering exhibits
