



(REFERENCE COPY - Not for submission)

DTV Engineering STA Application

File Number: **0000084150** | Submit Date: **10/04/2019** | Call Sign: **WLPX-TV** | Facility ID: **73189** | FRN: **0001808468**
 State: **West Virginia** | City: **CHARLESTON**
 Service: **DTV** | Purpose: **Engineering STA** | Status: **Granted** | Status Date: **10/11/2019** | Expiration Date: **04/09/2020**
 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
ION MEDIA CHARLESTON LICENSE, INC. Doing Business As: ION MEDIA CHARLESTON LICENSE, INC.	601 Clearwater Park Road West Palm Beach, FL 33401 United States	+1 (561) 682-4110	BiancaFrye@ionmedia. com	Corporation

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
Shea Clark <i>VP, Engineering</i> ION Media Networks, Inc.	Shea Clark 14444 66th Street N Clearwater, FL 33764 United States	+1 (727) 533- 2708	SheaClark@ionmedia. com	Technical Representative
Bianca Frye <i>Paralegal</i> ION Media Networks, Inc.	601 Clearwater Park Road West Palm Beach, FL 33401 United States	+1 (561) 682- 4110	BiancaFrye@ionmedia. com	Paralegal

Channel and Facility Information

Section	Question	Response
Proposed Community of License	Facility ID	73189
	State	West Virginia
	City	CHARLESTON
	DTV Channel	18
	Designated Market Area	Charleston-Huntington
Facility Type	Facility Type	Commercial
	Station Type	Main
Zone	Zone	1

Antenna Location Data

Section	Question	Response
Antenna Structure Registration	Do you have an FCC Antenna Structure Registration (ASR) Number?	Yes
	ASR Number	1234025
Coordinates (NAD83)	Latitude	38° 30' 21.1" N+
	Longitude	082° 12' 32.3" W-
	Structure Type	GTOWER-Guyed Structure Used for Communication Purposes
	Overall Structure Height	353.3 meters
	Support Structure Height	352.0 meters
	Ground Elevation (AMSL)	296.2 meters
Antenna Data	Height of Radiation Center Above Ground Level	213 meters
	Height of Radiation Center Above Average Terrain	327.2 meters
	Height of Radiation Center Above Mean Sea Level	509.2 meters
	Effective Radiated Power	200 kW

**Antenna
Technical Data**

Section	Question	Response
Antenna Type	Antenna Type	Directional Custom
	Do you have an Antenna ID?	No
	Antenna ID	1005649
Antenna Manufacturer and Model	Manufacturer:	DIE
	Model	TFU-8WB-R C160
	Rotation	0 degrees
	Electrical Beam Tilt	1.05
	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	0.762	90	0.956	180	0.947	270	0.559
10	0.832	100	0.933	190	0.914	280	0.653
20	0.877	110	0.923	200	0.878	290	0.690
30	0.912	120	0.932	210	0.831	300	0.654
40	0.945	130	0.955	220	0.759	310	0.560
50	0.975	140	0.982	230	0.655	320	0.464
60	0.995	150	0.998	240	0.533	330	0.450
70	0.997	160	0.997	250	0.447	340	0.537
80	0.981	170	0.978	260	0.462	350	0.658

Additional Azimuths

Degree	V _A
154	1
153	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>Shea Clark <i>VP, Engineering</i></p> <p>10/04/2019</p>

Attachments

File Name	Uploaded By	Attachment Type	Description
2019-09-19 WLPX Charleston Engineering Exhibit.pdf	Applicant	All Purpose	Engineering Exhibit
2019-10-04 WLPX Charleston Request for STA - Final.pdf	Applicant	General Information	Request for STA Exhibit