



(REFERENCE COPY - Not for submission)

# Request to Extend a DTV Engineering STA Application

File Number: **0000106635** | Submit Date: **02/26/2020** | Call Sign: **WWMB** | Facility ID: **3133** | FRN: **0023159734** | State: **South Carolina** | City: **FLORENCE**  
 Service: **DTV** | Purpose: **STA Extension** | Status: **Dismissed** | Status Date: **03/04/2020** | Filing Status: **InActive**

**General Information**

Section	Question	Response
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**Fees, Waivers, and Exemptions**

Section	Question	Response
<b>Fees</b>	Is the applicant exempt from FCC application Fees?	No
	Indicate reason for fee exemption:	
<b>Waivers</b>	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
STA Extension	MGT	\$200.00
<b>Total</b>		<b>\$200.00</b>

**Applicant  
Information**

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

<b>Applicant</b>	<b>Address</b>	<b>Phone</b>	<b>Email</b>	<b>Applicant Type</b>
<b>HSH MYRTLE BEACH (WWMB) LICENSEE, LLC</b>	201 MASSACHUSETTS AVENUE, NE Suite C-1 WASHINGTON, DC 20002 United States	+1 (202) 546-5400	cmmay@maylawoffices. com	Limited Liability Company

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**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>Paul A. Cicelski , Esq. .</b> Lerman Senter PLLC	2001 L Street, NW, Suite 400 Washington, DC 20036 United States	+1 (202) 416- 6756	pcicelski@lermansenter. com	Legal Representative
<b>Colby M. May , Esq .</b> <i>Attorney</i> COLBY M. MAY, ESQ., P.C.	PO Box 15473 WASHINGTON, DC 20003 United States	+1 (202) 544- 5171	cmmay@maylawoffices. com	Legal Representative
<b>Clyde Vanel</b> <i>Attorney</i> HSH	Clyde Vanel 201 Massachusetts Avenue NE, Suite C-1 Washington, DC 20002 United States	+1 (202) 546- 5400	clydevanel@vanellaw. com	Legal Representative

**Channel and Facility Information**

Section	Question	Response
<b>Proposed Community of License</b>	Facility ID	3133
	State	South Carolina
	City	FLORENCE
	DTV Channel	26
	Designated Market Area	Myrtle Beach-Florence
<b>Facility Type</b>	Facility Type	Commercial
	Station Type	Main
<b>Zone</b>	Zone	2

**Primary station proposed to be rebroadcast:**

Facility Id	Call Sign	City	State
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**Antenna Location Data**

Section	Question	Response
<b>Antenna Structure Registration</b>	Do you have an FCC Antenna Structure Registration (ASR) Number?	Yes
	ASR Number	1024373
<b>Coordinates (NAD83)</b>	Latitude	34° 22' 03.0" N+
	Longitude	079° 19' 48.0" W-
	Structure Type	TOWER-A free standing or guyed struct
	Overall Structure Height	609.6 meters
	Support Structure Height	585.6 meters
	Ground Elevation (AMSL)	32.6 meters
<b>Antenna Data</b>	Height of Radiation Center Above Ground Level	130.3 meters
	Height of Radiation Center Above Average Terrain	132.3 meters
	Height of Radiation Center Above Mean Sea Level	162.9 meters
	Effective Radiated Power	91.48 kW

**Antenna  
Technical Data**

Section	Question	Response
<b>Antenna Type</b>	Antenna Type	Directional Custom
	Do you have an Antenna ID?	No
	Antenna ID	1005462
<b>Antenna Manufacturer and Model</b>	Manufacturer:	Dielectric
	Model	TFU-8WB/VP-R C160
	Rotation	180 degrees
	Electrical Beam Tilt	1.05
	Mechanical Beam Tilt	Not Applicable
	toward azimuth	
	Polarization	Elliptical
<b>DTV and DTS: Elevation Pattern</b>	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	.771	90	.884	180	.635	270	.887
10	.787	100	.834	190	.589	280	.932
20	.832	110	.765	200	.474	290	.973
30	.894	120	.659	210	.366	300	.998
40	.955	130	.517	220	.386	310	.993
50	.992	140	.384	230	.520	320	.955
60	.997	150	.365	240	.662	330	.895
70	.972	160	.474	250	.768	340	.833
80	.930	170	.589	260	.837	350	.787

**Additional Azimuths**

Degree	V <sub>A</sub>
304	1.0
214	.354
146	.353

**Certification**

Section	Question	Response
<p><b>General Certification Statements</b></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><b>Authorized Party to Sign</b></p>	<p><b>FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID</b></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><b>Armstrong P. Williams</b>  <i>Managing Member</i></p> <p>02/26/2020</p>

## Attachments

File Name	Uploaded By	Attachment Type	Description
<u>WWMB Request for Extension of Interim Facilities STA.pdf</u>	Applicant	All Purpose	