



(REFERENCE COPY - Not for submission)

# Digital Class A Engineering STA Application

File Number: **0000063715** | Submit Date: **11/26/2018** | Call Sign: **KUVM-CD** | Facility ID: **13200** | FRN: **0026907329**  
 State: **Texas** | City: **MISSOURI CITY**  
 Service: **DCA** | Purpose: **Engineering STA** | Status: **Dismissed** | Status Date: **11/27/2018** | Filing Status: **InActive**

**General Information**

Section	Question	Response
---------	----------	----------

**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
Engineering STA	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>HC2 LPTV HOLDINGS, INC.</b>	RENEE ILHARDT 450 PARK AVENUE 30TH FLOOR NEW YORK, NY 10022 United States	+1 (954) 606-5486	RILHARDT@HC2BROADCASTING.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  
(3)**

Contact Name	Address	Phone	Email	Contact Type
<b>REBECCA HANSON</b> HC2 Broadcasting Holdings, INC	REBECCA HANSON 450 PARK AVENUE 30TH FLOOR NEW YORK, NY 10022 United States	+1 (212) 339- 5832	rhanson@hc2broadcasting. com	Legal Representative
<b>KURT HANSON</b> <i>CHIEF TECHNICAL OFFICER</i> HC2 Broadcasting Holdings, INC	REBECCA HANSON 450 PARK AVENUE 30TH FLOOR NEW YORK, NY 10022 United States	+1 (212) 339- 5853	rhanson@hc2broadcasting. com	Technical Representative
<b>RENEE ILHARDT</b> HC2 Broadcasting Holdings, INC	RRENEE ILHARDT 450 PARK AVENUE 30TH FLOOR NEW YORK, NY 10022 United States	+1 (954) 606- 5486	rilhardt@hc2broadcasting. com	CORPORATE REPRESENTATIVE

**Channel and Facility Information**

Section	Question	Response
Facility ID	13200	
State	Texas	
City	MISSOURI CITY	
DCA Channel	34	

**Antenna Location Data**

Section	Question	Response
<b>Antenna Structure Registration</b>	Do you have an FCC Antenna Structure Registration (ASR) Number?	Yes
	ASR Number	1059622
<b>Coordinates (NAD83)</b>	Latitude	29° 33' 45.2" N+
	Longitude	095° 30' 35.9" W-
	Structure Type	GTOWER-Guyed Structure Used for Communication Purposes
	Overall Structure Height	601.7 meters
	Support Structure Height	562.1 meters
	Ground Elevation (AMSL)	22.6 meters
<b>Antenna Data</b>	Height of Radiation Center Above Ground Level	293 meters
	Height of Radiation Center Above Mean Sea Level	315.6 meters
	Effective Radiated Power	15 kW

**Antenna  
Technical Data**

Section	Question	Response
<b>Antenna Type</b>	Antenna Type	Directional Custom
	Do you have an Antenna ID?	Yes
	Antenna ID	20060
<b>Antenna Manufacturer and Model</b>	Manufacturer:	MCI
	Model	955316
	Rotation	347 degrees
	Electrical Beam Tilt	Not Applicable
	Mechanical Beam Tilt	Not Applicable
	toward azimuth	
	Polarization	Horizontal
<b>Elevation Radiation 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	
	Out-of-Channel Emission Mask:	Stringent

**Directional Antenna Relative Field Values (Pre-rotated Pattern)**

Degree	Value	Degree	Value	Degree	Value	Degree	Value
0	1	90	1	180	0.01	270	0.01
10	0.947	100	0.967	190	0.01	280	0.021
20	0.793	110	0.872	200	0.01	290	0.094
30	0.756	120	0.729	210	0.01	300	0.218
40	0.902	130	0.556	220	0.01	310	0.378
50	0.902	140	0.378	230	0.01	320	0.556
60	0.756	150	0.218	240	0.01	330	0.729
70	0.793	160	0.094	250	0.01	340	0.872
80	0.947	170	0.021	260	0.01	350	0.967

**Additional Azimuths**

Degree	V <sub>A</sub>
65	0.74
45	0.933
25	0.74

**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>LES LEVI</b> <i>CHIEF OPERATING OFFICER</i></p> <p>11/26/2018</p>

## Attachments

File Name	Uploaded By	Attachment Type	Description
<a href="#">Engineering STA Narrative - KUVM-CD.pdf</a>	Applicant	General Information	Engineering STA Narrative - KUVM-CD