



(REFERENCE COPY - Not for submission)

# DTV Engineering STA Application

File Number: **0000081100** | Submit Date: **09/09/2019** | Call Sign: **WWAY** | Facility ID: **12033** | FRN: **0014489892** | State: **North Carolina** | City: **WILMINGTON**  
 Service: **DTV** | Purpose: **Engineering STA** | Status: **Granted** | Status Date: **09/11/2019** | Expiration Date: **09/17/2019**  
 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
Engineering STA	MGT	\$200.00
<b>Total</b>		<b>\$200.00</b>

**Applicant  
Information**

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

Applicant	Address	Phone	Email	Applicant Type
<b>WWAY-TV, LLC</b> Doing Business As: WWAY-TV, LLC	Bobby Berry 301 Poplar Street Macon, GA 31201 United States	+1 (478) 745- 4141	bberry@morrisnetwork. 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  
(2)**

Contact Name	Address	Phone	Email	Contact Type
<b>Anne Goodwin Crump</b> Fletcher, Heald & Hildreth, P.L.C.	1300 NORTH 17TH STREET ELEVENTH FLOOR ARLINGTON, VA 22209 United States	+1 (703) 812- 0426	CRUMP@FHHLAW. COM	Legal Representative
<b>Ray Luke</b> <i>TECHNICAL CONSULTANT</i> Custom Specialty Services, LLC	Ray Luke 17363 Carlton Cuebas Rd Gulfport, MS 39503 United States	+1 (228) 297- 2500	ray.css@att.net	Technical Representative

**Channel and Facility Information**

Section	Question	Response
<b>Proposed Community of License</b>	Facility ID	12033
	State	North Carolina
	City	WILMINGTON
	DTV Channel	46
	Designated Market Area	Wilmington
<b>Facility Type</b>	Facility Type	Commercial
	Station Type	Main
<b>Zone</b>	Zone	2

**Antenna Location Data**

Section	Question	Response
<b>Antenna Structure Registration</b>	Do you have an FCC Antenna Structure Registration (ASR) Number?	Yes
	ASR Number	1008242
<b>Coordinates (NAD83)</b>	Latitude	34° 07' 54.0" N+
	Longitude	078° 11' 16.0" W-
	Structure Type	GTOWER-Guyed Structure Used for Communication Purposes
	Overall Structure Height	595.6 meters
	Support Structure Height	548.0 meters
	Ground Elevation (AMSL)	19.2 meters
<b>Antenna Data</b>	Height of Radiation Center Above Ground Level	587 meters
	Height of Radiation Center Above Average Terrain	590 meters
	Height of Radiation Center Above Mean Sea Level	606.2 meters
	Effective Radiated Power	1000 kW

**Antenna  
Technical Data**

Section	Question	Response
<b>Antenna Type</b>	Antenna Type	Directional Custom
	Do you have an Antenna ID?	Yes
	Antenna ID	68042
<b>Antenna Manufacturer and Model</b>	Manufacturer:	AND
	Model	ABBP14H4-HTCX1-30/54
	Rotation	0 degrees
	Electrical Beam Tilt	1
	Mechanical Beam Tilt	Not Applicable
	toward azimuth	
	Polarization	Horizontal
<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	0.775	90	0.791	180	0.522	270	0.298
10	0.825	100	0.797	190	0.585	280	0.466
20	0.993	110	0.905	200	0.633	290	0.708
30	0.91	120	0.801	210	0.589	300	0.796
40	0.735	130	0.527	220	0.436	310	0.834
50	0.875	140	0.543	230	0.407	320	0.936
60	0.991	150	0.652	240	0.433	330	0.97
70	0.985	160	0.663	250	0.439	340	0.978
80	0.925	170	0.607	260	0.418	350	0.944

**Additional Azimuths**

Degree	V <sub>A</sub>
22	1

**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>Bobby Berry</b> <i>Chief Operating Officer</i></p> <p>09/09/2019</p>

## Attachments

File Name	Uploaded By	Attachment Type	Description
<u><a href="#">WWAY.RepackSTAE Exhibit (01350557xB3D1E).docx</a></u>	Applicant	General Information	Extraordinary Circumstances Necessitating WWAY STA