



(REFERENCE COPY - Not for submission)

Digital Replacement Translator Engineering STA Application

File Number: **0000106180** | Submit Date: **02/18/2020** | Call Sign: **WCBS-TV** | Facility ID: **9610** | FRN: **0003482189** | State: **New York** | City: **NEW YORK**
 Service: **DRT** | Purpose: **Engineering STA** | Status: **Dismissed** | Status Date: **04/06/2020** | Filing Status: **InActive**

General Information

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

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	MGL	\$200.00
Total		\$200.00

**Applicant
Information**

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
CBS BROADCASTING INC. Doing Business As: CBS BROADCASTING INC.	Daniel G. Ryson 1725 DeSales St. NW Suite 501 Washington, DC 20036 United States	+1 (202) 457- 4505	dryson@cbs. 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
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
Daniel G. Ryson <i>Director of Spectrum Management</i> CBS	Daniel G. Ryson 1725 DeSales St. NW Suite 501 Washington, DC 20036 United States	+1 (202) 457- 4074	dryson@cbs.com	Technical Representative

Channel and Facility Information

Section	Question	Response
Proposed Community of License	Facility ID	9610
	State	New York
	City	NEW YORK
	DRT Channel	22
	Designated Market Area	New York

Antenna Location Data

Section	Question	Response
Antenna Structure Registration	Do you have an FCC Antenna Structure Registration (ASR) Number?	Yes
	ASR Number	1006717
Coordinates (NAD83)	Latitude	40° 53' 50.3" N+
	Longitude	072° 54' 54.2" W-
	Structure Type	TOWER-A free standing or guyed struct
	Overall Structure Height	195.6 meters
	Support Structure Height	183.9 meters
	Ground Elevation (AMSL)	27.4 meters
Antenna Data	Height of Radiation Center Above Ground Level	169.1 meters
	Height of Radiation Center Above Mean Sea Level	196.5 meters
	Effective Radiated Power	0 kW

**Antenna
Technical Data**

Section	Question	Response
Antenna Type	Antenna Type	Directional Custom
	Do you have an Antenna ID?	Yes
	Antenna ID	108586
Antenna Manufacturer and Model	Manufacturer:	DIE
	Model	TUL-C2-3/6M-T CIRCULARLY POLARIZED
	Rotation	253 degrees
	Electrical Beam Tilt	0.75
	Mechanical Beam Tilt	Not Applicable
	toward azimuth	
	Polarization	Horizontal
Elevation Radiation 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	
	Out-of-Channel Emission Mask:	Full Service

Directional Antenna Relative Field Values (Pre-rotated Pattern)

Degree	Value	Degree	Value	Degree	Value	Degree	Value
0	1	90	0.5	180	0.001	270	0.5
10	0.931	100	0.339	190	0.001	280	0.657
20	0.827	110	0.192	200	0.001	290	0.793
30	0.849	120	0.077	210	0.001	300	0.893
40	0.936	130	0.01	220	0.001	310	0.946
50	0.946	140	0.001	230	0.01	320	0.936
60	0.893	150	0.001	240	0.077	330	0.849
70	0.793	160	0.001	250	0.192	340	0.827
80	0.657	170	0.001	260	0.339	350	0.931

Additional Azimuths

Degree	V _A
45	0.953
315	0.953

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>Andrew J Siegel <i>Assistant Secretary</i></p> <p>02/18/2020</p>

Attachments

File Name	Uploaded By	Attachment Type	Description
<u>WCBS-TV Digital Replacement Translator Silent.pdf</u>	Applicant	General Information	Engineering Statement