



(REFERENCE COPY - Not for submission)

# Digital Class A Engineering STA Application

File Number: **0000068045** | Submit Date: **02/25/2019** | Call Sign: **WPMF-CD** | Facility ID: **30129** | FRN: **0024862302**  
 State: **Florida** | City: **MIAMI**  
 Service: **DCA** | Purpose: **Engineering STA** | Status: **Granted** | Status Date: **03/11/2019** | Expiration Date: **09/10/2019**  
 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**

<b>Applicant</b>	<b>Address</b>	<b>Phone</b>	<b>Email</b>	<b>Applicant Type</b>
<b>WPMF MIAMI, LLC</b> Doing Business As: WPMF MIAMI, LLC	Ms. Maria Martinez 147 Alhambra Circle Suite 131 Coral Gables, FL 33134 United States	+1 (305) 903- 6507	maria. martinez@primetimepartners. net	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>Louis R duTreil , Jr .</b> <i>Technical Consultant</i> duTreil Lundin & Rackley Inc	3135 Southgate Circle Sarasota, FL 34239 United States	+1 (941) 329- 6004	bobjr@DLR.com	Technical Representative
<b>Paul Feldman , Esq .</b> Fletcher, Heald & Hildreth, PLC	1300 North 17th Street 11th Floor Arlington, VA 22209 United States	+1 (703) 812- 0400	feldman@fhhlaw. com	Legal Representative

**Channel and Facility Information**

Section	Question	Response
Facility ID	30129	
State	Florida	
City	MIAMI	
DCA Channel	17	

**Antenna Location Data**

Section	Question	Response
<b>Antenna Structure Registration</b>	Do you have an FCC Antenna Structure Registration (ASR) Number?	Yes
	ASR Number	1026553
<b>Coordinates (NAD83)</b>	Latitude	25° 58' 08.0" N+
	Longitude	080° 13' 19.0" W-
	Structure Type	GTOWER-Guyed Structure Used for Communication Purposes
	Overall Structure Height	317.3 meters
	Support Structure Height	285.5 meters
	Ground Elevation (AMSL)	2.4 meters
<b>Antenna Data</b>	Height of Radiation Center Above Ground Level	194.1 meters
	Height of Radiation Center Above Mean Sea Level	196.5 meters
	Effective Radiated Power	5.1 kW

**Antenna  
Technical Data**

Section	Question	Response
<b>Antenna Type</b>	Antenna Type	Directional Custom
	Do you have an Antenna ID?	Yes
	Antenna ID	114183
<b>Antenna Manufacturer and Model</b>	Manufacturer:	ODD
	Model	I230-EC
	Rotation	0 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	0.006	90	0.029	180	0.992	270	0.075
10	0.003	100	0.051	190	0.987	280	0.055
20	0.001	110	0.106	200	0.916	290	0.061
30	0.001	120	0.194	210	0.794	300	0.059
40	0.002	130	0.315	220	0.641	310	0.044
50	0.005	140	0.463	230	0.485	320	0.029
60	0.012	150	0.635	240	0.344	330	0.017
70	0.021	160	0.8	250	0.23	340	0.011
80	0.026	170	0.925	260	0.137	350	0.009

**Additional Azimuths**

Degree	V <sub>A</sub>
184	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>Jose Rodriguez</b> <i>Manager</i></p> <p>02/25/2019</p>

## Attachments

File Name	Uploaded By	Attachment Type	Description
<a href="#"><u>WBEH_CD_17_STA_Coverage_Map.pdf</u></a>	Applicant	All Purpose	PREDICTED COVERAGE CONTOURS
<a href="#"><u>WBEH_CD_17_STA_RF_Hazard_Statement.pdf</u></a>	Applicant	All Purpose	RF HAZARD STATEMENT
<a href="#"><u>WBEH_CD_17_STA_Technical_Summary.pdf</u></a>	Applicant	General Information	TECHNICAL SUMMARY