



(REFERENCE COPY - Not for submission)

Digital Class A Engineering STA Application

File Number: 0000221186 | Submit Date: 09/21/2023 | Call Sign: KTSH-CD | Facility ID: 70420 | FRN: 0018223693 |

State: Louisiana | City: SHREVEPORT

Service: DCA | Purpose: Engineering STA | Status: Granted | Status Date: 09/22/2023 | Expiration Date: 03/21/2024 |

Filing Status: Active

General Information

Section	Question	Response
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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	MPV	\$300.00
Total		\$300.00

**Applicant  
Information**

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

Applicant	Address	Phone	Email	Applicant Type
Gray Television Licensee, LLC	4370 Peachtree Road, NE Atlanta, GA 30319 United States	+1 (404) 288-8333	robert.folliard@gray.tv	Limited Liability Company

**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>David Burke</b> <i>Senior Vice President and CTO</i> Gray Television Licensee, LLC	201 Monroe Street Montgomery, AL 36104 United States	+1 (334) 206-1475	david.burke@gray.tv	Technical Representative
<b>Joseph M. Davis , P.E. .</b> <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
<b>Joan Stewart</b> Wiley Rein LLP	2050 M Street, NW Washington, DC 20036 United States	+1 (202) 719-7438	jstewart@wiley.law	Legal Representative

Channel and  
Facility  
Information

Section	Question	Response
Proposed Community of License	Facility ID	70420
	State	Louisiana
	City	SHREVEPORT
	DCA Channel	20
	Designated Market Area	Shreveport

Antenna Location  
Data

Section	Question	Response
Antenna Structure Registration	Do you have an FCC Antenna Structure Registration (ASR) Number?	Yes
	ASR Number	1013803
Coordinates (NAD83)	Latitude	32° 28' 25.2" N+
	Longitude	093° 46' 13.7" W-
	Structure Type	GTOWER-Guyed Structure Used for Communication Purposes
	Overall Structure Height	128.0 meters
	Support Structure Height	121.9 meters
	Ground Elevation (AMSL)	73.5 meters
Antenna Data	Height of Radiation Center Above Ground Level	93.9 meters
	Height of Radiation Center Above Mean Sea Level	167.4 meters
	Effective Radiated Power	9.2 kW

Antenna  
Technical Data

Section	Question	Response
Antenna Type	Antenna Type	Directional Custom
	Do you have an Antenna ID?	Yes
	Antenna ID	1010939
Antenna Manufacturer and Model	Manufacturer:	Dielectric
	Model	DLP-8B
	Rotation	60 degrees
	Electrical Beam Tilt	1.0
	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	1.000	90	0.661	180	0.645	270	0.650
10	0.996	100	0.615	190	0.641	280	0.699
20	0.981	110	0.583	200	0.631	290	0.759
30	0.955	120	0.569	210	0.613	300	0.817
40	0.920	130	0.571	220	0.592	310	0.869
50	0.876	140	0.586	230	0.579	320	0.914
60	0.826	150	0.607	240	0.570	330	0.951
70	0.771	160	0.627	250	0.579	340	0.975
80	0.714	170	0.640	260	0.610	350	0.993

Additional Azimuths

Degree	V <sub>A</sub>
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## Certification

Section	Question	Response
<b>General Certification Statements</b>	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.).	
	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.	
<b>Authorized Party to Sign</b>	<b>FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID</b> 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. 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).	
	I certify that this application includes all required and relevant attachments.	Yes
	I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	<b>Robert Folliard , III .</b> <i>Assistant Secretary</i>  09/21/2023

Attachments

File Name	Uploaded By	Attachment Type	Description
<a href="#">KTSH-CD STA request ENG 09-20-2023.pdf</a>	Applicant	All Purpose	KTSH-CD STA engineering exhibits