



(REFERENCE COPY - Not for submission)

# Digital Replacement Translator Engineering STA Application

File Number: **0000059257** | Submit Date: **08/29/2018** | Call Sign: **WPCW** | Facility ID: **69880** | FRN: **0003742624** | State: **Pennsylvania** | City: **JEANNETTE**  
Service: **DRT** | Purpose: **Engineering STA** | Status: **Dismissed** | Status Date: **12/04/2018** | 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?	Yes
	Indicate reason for fee exemption:	Per the Media Services Fee Filing Guide, STAs for displaced TV translator stations are not feeable.
<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:	

**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>PITTSBURGH TELEVISION STATION WPCW INC.</b> Doing Business As: PITTSBURGH TELEVISION STATION WPCW 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
<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>Daniel G. Ryson</b> <i>Associate 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
Facility ID	69880	
State	Pennsylvania	
City	JEANNETTE	
DRT Channel	27	

**Primary station proposed to be rebroadcast:**

Facility Id	Call Sign	City	State
-------------	-----------	------	-------

**Antenna Location Data**

Section	Question	Response
<b>Antenna Structure Registration</b>	Do you have an FCC Antenna Structure Registration (ASR) Number?	Yes
	ASR Number	1032552
<b>Coordinates (NAD83)</b>	Latitude	40° 10' 51.3" N+
	Longitude	079° 07' 45.4" W-
	Structure Type	LTOWER-Lattice Tower
	Overall Structure Height	118.9 meters
	Support Structure Height	100.2 meters
	Ground Elevation (AMSL)	823.5 meters
<b>Antenna Data</b>	Height of Radiation Center Above Ground Level	103.5 meters
	Height of Radiation Center Above Mean Sea Level	927.0 meters
	Effective Radiated Power	0 kW

**Antenna  
Technical Data**

Section	Question	Response
<b>Antenna Type</b>	Antenna Type	Directional Custom
	Do you have an Antenna ID?	Yes
	Antenna ID	93839
<b>Antenna Manufacturer and Model</b>	Manufacturer:	DIE
	Model	TLP-8H/VP
	Rotation	120 degrees
	Electrical Beam Tilt	1.5
	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	0.911	180	0.521	270	0.918
10	0.977	100	0.88	190	0.511	280	0.885
20	0.917	110	0.788	200	0.477	290	0.834
30	0.842	120	0.673	210	0.446	300	0.793
40	0.776	130	0.56	220	0.468	310	0.777
50	0.768	140	0.467	230	0.56	320	0.816
60	0.779	150	0.43	240	0.688	330	0.885
70	0.828	160	0.452	250	0.81	340	0.949
80	0.885	170	0.495	260	0.891	350	0.984

**Additional Azimuths**

Degree	V <sub>A</sub>
--------	----------------

**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>Andrew J Siegel</b> <i>Assistant Secretary</i></p> <p>08/29/2018</p>

## Attachments

File Name	Uploaded By	Attachment Type	Description
<a href="#">STA Statement August 29 2018.pdf</a>	Applicant	All Purpose	Engineering Statement