



(REFERENCE COPY - Not for submission)

# DTV Engineering STA Application

File Number: **0000018659** | Submit Date: **11/30/2016** | Call Sign: **DWKPV** | Facility ID: **58341** | FRN: **0019526946** | State: **Puerto Rico** | City: **PONCE**  
 Service: **DTV** | Purpose: **Engineering STA** | Status: **Cancelled** | Status Date: **09/15/2017** | 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	\$190.00
<b>Total</b>		<b>\$190.00</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>AMERICA-CV STATION GROUP, INC.</b> Doing Business As: AMERICA-CV STATION GROUP, INC.	13001 N.W. 107TH AVE. HIALEAH GARDENS, FL 33018 United States	+1 (305) 592-4141	lourdes. negrone@americaveve. com	Corporation

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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>FRANCISCO R. MONTERO</b> <i>ATTORNEY</i> FLETCHER, HEALD & HILDRETH, P.L.C.	1300 NORTH 17TH ST. 11TH FLOOR ARLINGTON, VA 22209 United States	+1 (703) 812-0480	MONTERO@FHHLAW. COM	Legal Representative
<b>GERD RIEGER</b> <i>DIRECTOR OF ENGINEERING</i> AMERICA-CV STATION GROUP, INC.	13001 N.W. 107TH AVE. HIALEAH GARDENS, FL 33018 United States	+1 (305) 592-4141	GERD. RIEGER@AMERICATEVE. COM	Technical Representative

**Channel and Facility Information**

Section	Question	Response
Facility ID	58341	
State	Puerto Rico	
City	PONCE	
DTV Channel	19	
Facility Type	Facility Type	Commercial
	Station Type	Main
Zone	Zone	2

**Primary station proposed to be rebroadcast:**

Facility Id	Call Sign	City	State
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**Antenna Location Data**

Section	Question	Response
<b>Antenna Structure Registration</b>	Do you have an FCC Antenna Structure Registration (ASR) Number?	No
	ASR Number	
<b>Coordinates (NAD83)</b>	Latitude	18° 04' 41.8" N+
	Longitude	066° 44' 51.6" W-
	Structure Type	LTOWER-Lattice Tower
	Overall Structure Height	61 meters
	Support Structure Height	61 meters
	Ground Elevation (AMSL)	620 meters
<b>Antenna Data</b>	Height of Radiation Center Above Ground Level	31 meters
	Height of Radiation Center Above Average Terrain	269 meters
	Height of Radiation Center Above Mean Sea Level	651 meters
	Effective Radiated Power	700 kW

**Antenna  
Technical Data**

Section	Question	Response
<b>Antenna Type</b>	Antenna Type	Directional Custom
	Do you have an Antenna ID?	Yes
	Antenna ID	65948
<b>Antenna Manufacturer and Model</b>	Manufacturer:	DIE
	Model	TFU-24DSB-J (C) DC
	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	0.402	90	0.917	180	0.591	270	0.918
10	0.374	100	0.975	190	0.568	280	0.842
20	0.299	110	1	200	0.601	290	0.731
30	0.253	120	0.969	210	0.666	300	0.594
40	0.296	130	0.89	220	0.764	310	0.444
50	0.427	140	0.775	230	0.878	320	0.309
60	0.579	150	0.673	240	0.964	330	0.25
70	0.728	160	0.608	250	1	340	0.284
80	0.844	170	0.569	260	0.975	350	0.361

**Additional Azimuths**

Degree	V <sub>A</sub>
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**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>CARLOS VASALLO</b> <i>CEO</i></p> <p>11/30/2016</p>

## Attachments

File Name	Uploaded By	Attachment Type	Description
<a href="#">00993464.PDF</a>	Applicant	All Purpose	WKPV Reduced Power STA Exhibit

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