



(REFERENCE COPY - Not for submission)

Request to Extend a DTV Engineering STA Application

File Number: **0000063666** | Submit Date: **11/21/2018** | Call Sign: **WFLX** | Facility ID: **39736** | FRN: **0014580187** | State: **Florida** | City: **WEST PALM BEACH**
 Service: **DTV** | Purpose: **STA Extension** | Status: **Granted** | Status Date: **11/26/2018** | Expiration Date: **05/30/2019**

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
STA Extension	MGT	200.0
Total		200.0

**Applicant
Information**

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
WFLX LICENSE SUBSIDIARY, LLC Doing Business As: WFLX LICENSE SUBSIDIARY, LLC	201 MONROE STREET RSA TOWER, 20TH FLOOR MONTGOMERY, AL 36104 United States	+1 (334) 206-1400	fclms@raycommedia. com	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
(2)**

Contact Name	Address	Phone	Email	Contact Type
Ann W. Bobeck , Esq . <i>Legal Counsel</i> Covington & Burling LLP	Ann W. Bobeck One CityCenter 850 Tenth Street, NW WASHINGTON, DC 20001 United States	+1 (202) 662- 5719	abobeck@cov.com	Legal Representative
David Burke <i>Vice President-- Chief Technology Officer</i> Raycom Media, Inc.	RSA Tower 20th Floor 201 Monroe Street Montgomery, AL 36104 United States	+1 (334) 206- 1475	dburke@raycommedia. com	Technical Representative

Channel and Facility Information

Section	Question	Response
Proposed Community of License	Facility ID	39736
	State	Florida
	City	WEST PALM BEACH
	DTV Channel	27
Facility Type	Facility Type	Commercial
	Station Type	Main
Zone	Zone	3

Antenna Location Data

Section	Question	Response
Antenna Structure Registration	Do you have an FCC Antenna Structure Registration (ASR) Number?	Yes
	ASR Number	1028084
Coordinates (NAD83)	Latitude	26° 34' 30.7" N+
	Longitude	080° 14' 31.1" W-
	Structure Type	GTOWER-Guyed Structure Used for Communication Purposes
	Overall Structure Height	467.0 meters
	Support Structure Height	466.0 meters
	Ground Elevation (AMSL)	5.2 meters
Antenna Data	Height of Radiation Center Above Ground Level	439 meters
	Height of Radiation Center Above Average Terrain	440 meters
	Height of Radiation Center Above Mean Sea Level	444.2 meters
	Effective Radiated Power	400 kW

**Antenna
Technical Data**

Section	Question	Response
Antenna Type	Antenna Type	Directional Custom
	Do you have an Antenna ID?	No
	Antenna ID	1003698
Antenna Manufacturer and Model	Manufacturer:	DIE
	Model	TUA-P4-12/48H-1-S
	Rotation	0 degrees
	Electrical Beam Tilt	0.7
	Mechanical Beam Tilt	Not Applicable
	toward azimuth	
	Polarization	Horizontal
DTV and DTS: Elevation 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	

Directional Antenna Relative Field Values (Pre-rotated Pattern)

Degree	V _A (Authorized Value)	Degree	V _A (Authorized Value)	Degree	V _A (Authorized Value)	Degree	V _A (Authorized Value)
0	1	90	0.285	180	1	270	0.285
10	0.961	100	0.244	190	0.961	280	0.244
20	0.864	110	0.166	200	0.864	290	0.166
30	0.784	120	0.282	210	0.784	300	0.282
40	0.694	130	0.517	220	0.694	310	0.517
50	0.501	140	0.681	230	0.501	320	0.681
60	0.255	150	0.771	240	0.255	330	0.771
70	0.167	160	0.869	250	0.167	340	0.869
80	0.256	170	0.965	260	0.256	350	0.965

Additional Azimuths

Degree	V _A
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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>David Burke <i>Vice President, Chief Technology Officer</i></p> <p>11/21/2018</p>

Attachments

File Name	Uploaded By	Attachment Type	Description
<u>WFLX STA Extension Request Narrative (Finalized) November 20 2018.pdf</u>	Applicant	All Purpose	STA Extension Request Narrative