



(REFERENCE COPY - Not for submission)

## Channel Substitution/Community of License Change

File Number: **0000063992** | Submit Date: **12/05/2018** | Call Sign: **WNPX-TV** | Facility ID: **28468** | FRN: **0003720042**

State: **Tennessee** | City: **COOKEVILLE**

Service: **DTV** | Purpose: **Rule Making** | Status: **Dismissed** | Status Date: **12/27/2018** | Filing Status: **InActive**

### General Information

Section	Question	Response
Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes

### Applicant Information

#### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
<b>ION MEDIA LICENSE COMPANY, LLC</b> Doing Business As: ION MEDIA LICENSE COMPANY, LLC	601 Clearwater Park Road West Palm Beach, FL 33401 United States	+1 (561) 682-4110	BiancaFrye@ionmedia. 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
<b>Shea Clark</b> <i>VP, Engineering</i> ION Media Networks, Inc.	Shea Clark 14444 66th Street N Clearwater, FL 33764 United States	+1 (727) 533- 2708	SheaClark@ionmedia. com	Technical Representative
<b>Bianca Frye</b> ION Media Networks, Inc.	601 Clearwater Park Road West Palm Beach, FL 33401 United States	+1 (561) 682- 4110	BiancaFrye@ionmedia. com	Paralegal

**Channel and Facility Information**

Section	Question	Response
Facility ID	28468	
State	Tennessee	
City	COOKEVILLE	
DTV Channel	36	
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?	Yes
	ASR Number	1233975
<b>Coordinates (NAD83)</b>	Latitude	36° 16' 04.9" N+
	Longitude	086° 47' 44.7" W-
	Structure Type	GTOWER-Guyed Structure Used for Communication Purposes
	Overall Structure Height	392.9 meters
	Support Structure Height	352.9 meters
	Ground Elevation (AMSL)	231.7 meters
<b>Antenna Data</b>	Height of Radiation Center Above Ground Level	381 meters
	Height of Radiation Center Above Average Terrain	428.7 meters
	Height of Radiation Center Above Mean Sea Level	612.7 meters
	Effective Radiated Power	733 kW

**Antenna  
Technical Data**

Section	Question	Response
<b>Antenna Type</b>	Antenna Type	Directional Custom
	Do you have an Antenna ID?	Yes
	Antenna ID	64292
<b>Antenna Manufacturer and Model</b>	Manufacturer:	DIE
	Model	TFU-18DSC S190
	Rotation	180 degrees
	Electrical Beam Tilt	0.75
	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
<b>0</b>	0.76	<b>90</b>	0.442	<b>180</b>	0.76	<b>270</b>	1
<b>10</b>	0.696	<b>100</b>	0.419	<b>190</b>	0.802	<b>280</b>	0.994
<b>20</b>	0.603	<b>110</b>	0.361	<b>200</b>	0.832	<b>290</b>	0.978
<b>30</b>	0.487	<b>120</b>	0.297	<b>210</b>	0.86	<b>300</b>	0.953
<b>40</b>	0.368	<b>130</b>	0.29	<b>220</b>	0.89	<b>310</b>	0.922
<b>50</b>	0.29	<b>140</b>	0.368	<b>230</b>	0.922	<b>320</b>	0.89
<b>60</b>	0.297	<b>150</b>	0.487	<b>240</b>	0.953	<b>330</b>	0.86
<b>70</b>	0.361	<b>160</b>	0.603	<b>250</b>	0.978	<b>340</b>	0.832
<b>80</b>	0.419	<b>170</b>	0.696	<b>260</b>	0.994	<b>350</b>	0.802

**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>Terri McGalliard</b> <i>Secretary</i></p> <p>12/05/2018</p>

## Attachments

File Name	Uploaded By	Attachment Type	Description
<a href="#"><u>COL Petition for Rulemaking - WNPX-TV Cookeville to Franklin.pdf</u></a>	Applicant	All Purpose	COL Petition for Rulemaking