



(REFERENCE COPY - Not for submission)

# DTV Engineering STA Application

File Number: **0000078714** | Submit Date: **07/26/2019** | Call Sign: **KVOS-TV** | Facility ID: **35862** | FRN: **0027496082**  
 State: **Washington** | City: **BELLINGHAM**  
 Service: **DTV** | Purpose: **Engineering STA** | Status: **Granted** | Status Date: **07/31/2019** | Expiration Date: **01/17/2020**  
 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	\$200.00
<b>Total</b>		<b>\$200.00</b>

**Applicant  
Information**

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

Applicant	Address	Phone	Email	Applicant Type
<b>KVOS-TV LLC</b>	Norman H. Shapiro 26 NORTH HALSTED STREET CHICAGO, IL 20190 United States	+1 (312) 705- 2600	nshapiro@wciu. com	Limited Liability Company

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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>Matthew S. DeINero</b> <i>Legal Representative</i> Covington & Burling LLP	Matthew S. DeINero One CityCenter, 850 Tenth Street, N.W. Washington, DC 20001 United States	+1 (202) 662- 5543	mdelnero@cov. com	Legal Representative
<b>Louis R duTreil , Jr .</b> <i>Technical Consultant</i> duTreil Lundin & Rackley Inc	3135 Southgate Circle Sarasota, FL 34239 United States	+1 (941) 329- 6004	bobjr@DLR. com	Technical Representative

**Channel and Facility Information**

Section	Question	Response
<b>Proposed Community of License</b>	Facility ID	35862
	State	Washington
	City	BELLINGHAM
	DTV Channel	35
	Designated Market Area	Seattle-Tacoma
<b>Facility Type</b>	Facility Type	Commercial
	Station Type	Main
<b>Zone</b>	Zone	2

**Antenna Location Data**

Section	Question	Response
<b>Antenna Structure Registration</b>	Do you have an FCC Antenna Structure Registration (ASR) Number?	Yes
	ASR Number	1251758
<b>Coordinates (NAD83)</b>	Latitude	48° 40' 49.4" N+
	Longitude	122° 50' 26.4" W-
	Structure Type	TOWER-A free standing or guyed struct
	Overall Structure Height	152.0 meters
	Support Structure Height	152.0 meters
	Ground Elevation (AMSL)	692.0 meters
<b>Antenna Data</b>	Height of Radiation Center Above Ground Level	125.1 meters
	Height of Radiation Center Above Average Terrain	781 meters
	Height of Radiation Center Above Mean Sea Level	817.1 meters
	Effective Radiated Power	40 kW

**Antenna  
Technical Data**

Section	Question	Response
<b>Antenna Type</b>	Antenna Type	Directional Custom
	Do you have an Antenna ID?	No
	Antenna ID	1005300
<b>Antenna Manufacturer and Model</b>	Manufacturer:	ATC
	Model	ATC-BCSH16S1-U1
	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	.531	90	.816	180	.998	270	.496
10	.494	100	.878	190	.985	280	.447
20	.455	110	.927	200	.962	290	.434
30	.434	120	.962	210	.927	300	.455
40	.447	130	.985	220	.878	310	.494
50	.496	140	.998	230	.816	320	.531
60	.571	150	1	240	.74	330	.554
70	.656	160	1	250	.656	340	.553
80	.74	170	1	260	.571	350	.554

**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>Norman H. Shapiro</b> <i>Manager</i></p> <p>07/26/2019</p>

## Attachments

File Name	Uploaded By	Attachment Type	Description
<a href="#"><u>KVOS_TV_35_STA_Antenna_Information.pdf</u></a>	Applicant	All Purpose	ANTENNA INFORMATION
<a href="#"><u>KVOS_TV_35_STA_Coverage_Map.pdf</u></a>	Applicant	All Purpose	PREDICTED COVERAGE CONTOURS
<a href="#"><u>KVOS_TV_35_STA_RF_Hazard_Statement.pdf</u></a>	Applicant	All Purpose	RF HAZARD STATEMENT
<a href="#"><u>KVOS_TV_35_STA_Technical_Summary.pdf</u></a>	Applicant	General Information	TECHNICAL SUMMARY