



(REFERENCE COPY - Not for submission)

DTV Engineering STA Application

File Number: **0000081284** | Submit Date: **09/12/2019** | Call Sign: **WTAP-TV** | Facility ID: **4685** | FRN: **0018223693** | State: **West Virginia** | City: **PARKERSBURG**
 Service: **DTV** | Purpose: **Engineering STA** | Status: **Granted** | Status Date: **09/18/2019** | Expiration Date: **03/13/2020**
 Filing Status: **InActive**

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
Engineering STA	MGT	\$200.00
Total		\$200.00

**Applicant
Information**

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
GRAY TELEVISION LICENSEE, LLC	WTAP-TV ONE TELEVISION PLAZA PARKERSBURG, WV 26101 United States	+1 (304) 485- 4588	robert. folliard@gray.tv	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
Joseph M. Davis , P.E. . <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
JOAN STEWART WILEY REIN LLP	1776 K STREET, N. W. WASHINGTON, DC 20006 United States	+1 (202) 719- 7438	JSTEWART@WILEYREIN. COM	Legal Representative

**Channel and
Facility
Information**

Section	Question	Response
Proposed Community of License	Facility ID	4685
	State	West Virginia
	City	PARKERSBURG
	DTV Channel	49
	Designated Market Area	Parkersburg
Facility Type	Facility Type	Commercial
	Station Type	Main
Zone	Zone	1

Primary station proposed to be rebroadcast:

Facility Id	Call Sign	City	State
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Antenna Location Data

Section	Question	Response
Antenna Structure Registration	Do you have an FCC Antenna Structure Registration (ASR) Number?	Yes
	ASR Number	1239800
Coordinates (NAD83)	Latitude	39° 20' 59.8" N+
	Longitude	081° 33' 55.4" W-
	Structure Type	TOWER-A free standing or guyed struct
	Overall Structure Height	141.1 meters
	Support Structure Height	140.2 meters
	Ground Elevation (AMSL)	295.7 meters
Antenna Data	Height of Radiation Center Above Ground Level	103.6 meters
	Height of Radiation Center Above Average Terrain	170.3 meters
	Height of Radiation Center Above Mean Sea Level	399.3 meters
	Effective Radiated Power	300 kW

**Antenna
Technical Data**

Section	Question	Response
Antenna Type	Antenna Type	Directional Custom
	Do you have an Antenna ID?	No
	Antenna ID	1005538
Antenna Manufacturer and Model	Manufacturer:	RFS
	Model	SBB-8C170
	Rotation	125 degrees
	Electrical Beam Tilt	1.0
	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	Value	Degree	Value	Degree	Value	Degree	Value
0	0.922	90	0.828	180	0.356	270	0.930
10	0.916	100	0.747	190	0.325	280	0.980
20	0.921	110	0.674	200	0.253	290	0.988
30	0.927	120	0.580	210	0.230	300	0.992
40	0.932	130	0.451	220	0.320	310	0.999
50	0.938	140	0.318	230	0.474	320	0.999
60	0.934	150	0.230	240	0.622	330	0.985
70	0.918	160	0.240	250	0.737	340	0.961
80	0.890	170	0.313	260	0.838	350	0.938

Additional Azimuths

Degree	V _A
55	0.938
315	1.000

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>Robert Folliard , III . <i>Assistant Secretary</i></p> <p>09/12/2019</p>

Attachments

File Name	Uploaded By	Attachment Type	Description
<u>WTAP-TV STA request for interim antenna ENG 09-12-2019.pdf</u>	Applicant	All Purpose	WTAP-TV STA engineering exhibits