



(REFERENCE COPY - Not for submission)

Amendment to a DTV Engineering STA Application

File Number: **0000091889** | Submit Date: **12/02/2019** | Call Sign: **WCAX-TV** | Facility ID: **46728** | FRN: **0018223693** |
 State: **Vermont** | City: **BURLINGTON**
 Service: **DTV** | Purpose: **Engineering STA Amendment** | Status: **Granted** | Status Date: **12/04/2019** | Expiration Date: **07/24/2020** | 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:	

**Applicant
Information**

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
GRAY TELEVISION LICENSEE, LLC	WCAX PO Box 4508 ATLANTA, GA 30319 United States	+1 (404) 504- 9828	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
(3)**

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
Sam Hariton Widely, Inc.	4031 University Drive Fairfax, VA 22030 United States	+1 (339) 222- 8107	sam.hariton@widely.com	Compliance & Project Management
Joan Stewart Wiley Rein LLP	1776 K Street NW 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	46728
	State	Vermont
	City	BURLINGTON
	DTV Channel	20
	Designated Market Area	Burlington-Plattsburgh
Facility Type	Facility Type	Commercial
	Station Type	Main
Zone	Zone	2

Antenna Location Data

Section	Question	Response
Antenna Structure Registration	Do you have an FCC Antenna Structure Registration (ASR) Number?	No
	ASR Number	
Coordinates (NAD83)	Latitude	44° 31' 33.2" N+
	Longitude	072° 48' 55.4" W-
	Structure Type	TOWER-A free standing or guyed struct
	Overall Structure Height	24.4 meters
	Support Structure Height	42 meters
	Ground Elevation (AMSL)	1223 meters
Antenna Data	Height of Radiation Center Above Ground Level	18 meters
	Height of Radiation Center Above Average Terrain	817.8 meters
	Height of Radiation Center Above Mean Sea Level	1241 meters
	Effective Radiated Power	273 kW

**Antenna
Technical Data**

Section	Question	Response
Antenna Type	Antenna Type	Directional Custom
	Do you have an Antenna ID?	No
	Antenna ID	1006023
Antenna Manufacturer and Model	Manufacturer:	DIE
	Model	TFU-16WB-R C160 OS
	Rotation	0 degrees
	Electrical Beam Tilt	0.55
	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	0.096	90	0.318	180	0.978	270	0.949
10	0.087	100	0.448	190	0.941	280	0.878
20	0.080	110	0.574	200	0.908	290	0.789
30	0.076	120	0.686	210	0.895	300	0.687
40	0.080	130	0.787	220	0.908	310	0.574
50	0.087	140	0.876	230	0.940	320	0.447
60	0.097	150	0.947	240	0.977	330	0.317
70	0.128	160	0.990	250	0.999	340	0.203
80	0.204	170	0.999	260	0.991	350	0.127

Additional Azimuths

Degree	V _A
254	1.000
167	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>12/02/2019</p>

Attachments

File Name	Uploaded By	Attachment Type	Description
Amendment Description.pdf	Applicant	Amendment	Amendment description
WCAX-TV STA request ENG 12-02-2019.pdf	Applicant	All Purpose	WCAX-TV emergency antenna STA engineering exhibits