



(REFERENCE COPY - Not for submission)

# DTV Engineering STA Application

File Number: **0000095528** | Submit Date: **01/07/2020** | Call Sign: **WTLH** | Facility ID: **23486** | FRN: **0015435399** | State: **Georgia** | City: **BAINBRIDGE**

Service: **DTV** | Purpose: **Engineering STA** | Status: **Superceded** | Status Date: **03/09/2020** | Filing Status: **InActive**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
NEW AGE MEDIA OF TALLAHASSEE LICENSE, LLC Applicant Doing Business As: NEW AGE MEDIA OF TALLAHASSEE LICENSE, LLC	1181 HIGHWAY 315 WILKES-BARRE, PA 18702 United States	+1 (570) 970-5600	jparente1966@gmail.com	Other

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
Esq Daniel A Kirkpatrick A Cicelski FLETCHER, HEALD & HILDRETH, PLC	Paul Cicelski 1300 North 17th St 11th Floor Arlington, VA 22209 United States	+1 (703) 812- 0432	kirkpatrick@fhhlaw. com	Legal Representative
Daniel A Kirkpatrick , Esq . FLETCHER, HEALD & HILDRETH, PLC	1300 North 17th St 11th Floor Arlington, VA 22209 United States	+1 (703) 812- 0432	kirkpatrick@fhhlaw. com	Legal Representative

Channel and  
Facility  
Information

Section	Question	Response
Proposed Community of License	Facility ID	23486
	State	Georgia
	City	BAINBRIDGE
	DTV Channel	50
	Designated Market Area	Tallahassee-Thomasville
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	1227719
Coordinates (NAD83)	Latitude	30° 40' 50.3" N+
	Longitude	083° 58' 20.6" W-
	Structure Type	GTOWER-Guyed Structure Used for Communication Purposes
	Overall Structure Height	608.7 meters
	Support Structure Height	570.0 meters
	Ground Elevation (AMSL)	47.2 meters
Antenna Data	Height of Radiation Center Above Ground Level	598 meters
	Height of Radiation Center Above Average Terrain	597 meters
	Height of Radiation Center Above Mean Sea Level	645.2 meters
	Effective Radiated Power	665 kW

Antenna  
Technical Data

Section	Question	Response
Antenna Type	Antenna Type	Non-Directional
	Do you have an Antenna ID?	Yes
	Antenna ID	90483
Antenna Manufacturer and Model	Manufacturer:	ERI
	Model	ATW30H2-HTOU-49H
	Rotation	
	Electrical Beam Tilt	0.6
	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	

Certification

Section	Question	Response
General Certification Statements	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.).	
	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.	
Authorized Party to Sign	<b>FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID</b> 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. 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).	
	I certify that this application includes all required and relevant attachments.	Yes
	I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	<b>John Parente Parente</b> <i>CEO</i>  01/07/2020

Attachments

File Name	Uploaded By	Attachment Type	Description
<u>WTLH STA Request.docx</u>	Applicant	General Information	WTLH STA Narrative