



(REFERENCE COPY - Not for submission)

# DTV Engineering STA Application

File Number: **0000041025** | Submit Date: **01/31/2018** | Call Sign: **WMTJ** | Facility ID: **2174** | FRN: **0001731298** | State: **Puerto Rico** | City: **FAJARDO**  
Service: **DTV** | Purpose: **Engineering STA** | Status: **Granted** | Status Date: **02/23/2018** | Expiration Date: **08/23/2018**  
Filing Status: **InActive**

## General Information

Section	Question	Response
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## Fees, Waivers, and Exemptions

Section	Question	Response
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
<b>SISTEMA UNIVERSITARIO ANA G. MENDEZ, INC.</b> Doing Business As: SISTEMA UNIVERSITARIO ANA G. MENDEZ, INC.	P. O. BOX 21345 SAN JUAN, PR 00928 United States	+1 (787) 766-2600	ca_adiaz@suagm. edu	Private Not-for-Profit Educational Institution

**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>Todd D. Gray</b> Gray Miller Persh LLP	1200 New Hampshire Ave., NW Suite 410 Washington, DC 20036 United States	+1 (202) 776- 2571	tgray@graymillerpersh. com	Legal Representative
<b>Benjamin Pidek</b> <i>Consulting Engineer</i> Mid-State Consultants	6197 Miller Rd., Suite 1 Swartz Creek, MI 48473 United States	+1 (810) 226- 0750	bpidek@mscon.com	Technical Representative

**Channel and Facility Information**

Section	Question	Response
Facility ID	2174	
State	Puerto Rico	
City	FAJARDO	
DTV Channel	16	
<b>Facility Type</b>	Facility Type	Noncommercial Educational
	Station Type	Main
<b>Zone</b>	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?	No
	ASR Number	
<b>Coordinates (NAD83)</b>	Latitude	18° 18' 27.8" N+
	Longitude	065° 47' 41.5" W-
	Structure Type	TOWER-A free standing or guyed struct
	Overall Structure Height	60 meters
	Support Structure Height	60 meters
	Ground Elevation (AMSL)	1005 meters
<b>Antenna Data</b>	Height of Radiation Center Above Ground Level	53.2 meters
	Height of Radiation Center Above Average Terrain	852.1 meters
	Height of Radiation Center Above Mean Sea Level	1058.2 meters
	Effective Radiated Power	17.7 kW

**Antenna  
Technical Data**

Section	Question	Response
<b>Antenna Type</b>	Antenna Type	Directional Custom
	Do you have an Antenna ID?	Yes
	Antenna ID	87689
<b>Antenna Manufacturer and Model</b>	Manufacturer:	DIE
	Model	TFU-16DSC-R S300
	Rotation	0 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
0	0.458	90	0.353	180	0.332	270	0.986
10	0.392	100	0.368	190	0.392	280	0.999
20	0.331	110	0.354	200	0.458	290	0.986
30	0.276	120	0.314	210	0.534	300	0.943
40	0.229	130	0.262	220	0.618	310	0.878
50	0.204	140	0.217	230	0.709	320	0.797
60	0.217	150	0.204	240	0.797	330	0.709
70	0.262	160	0.229	250	0.878	340	0.619
80	0.314	170	0.276	260	0.944	350	0.534

**Additional Azimuths**

Degree	V <sub>A</sub>
278	1

**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>Margarita T. Millan</b>  <i>Vice President and General Manager</i></p> <p>01/31/2018</p>

## Attachments

File Name	Uploaded By	Attachment Type	Description
<a href="#"><u>WMTJ Exhibit for Reduced Power Operations.pdf</u></a>	Applicant	General Information	

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