



(REFERENCE COPY - Not for submission)

DTV Engineering STA Application

File Number: **0000116784** | Submit Date: **07/01/2020** | Call Sign: **WHYY-TV** | Facility ID: **72338** | FRN: **0004061909**
State: **Delaware** | City: **WILMINGTON**
Service: **DTV** | Purpose: **Engineering STA** | Status: **Granted** | Status Date: **07/02/2020** | Expiration Date:
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
WHYY, INC. Applicant Doing Business As: WHYY, INC.	KYRA G. MCGRATH 150 N 6TH STREET PHILADELPHIA, PA 19106 United States	+1 (215) 351- 1200	kmcgrath@whyy. org	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
(3)**

Contact Name	Address	Phone	Email	Contact Type
Kyra McGrath <i>Executive VP/President, New Ventures and Enterprises</i> WHYY, Incorporated	150 North 6th Street Philadelphia, PA 19106 United States	+1 (215) 351-1200	kmcgrath@whyy.org	Executive VP
Esq Melodie Virtue Virtue , Esq . Foster Garvey PC	1000 Potomac Street, N.W. Suite 200 Washington, DC 20007 United States	+1 (202) 298-2527	melodie.virtue@foster. com	Legal Representative
Ryan C Wilhour C Wilhour Kessler and Gehman Associates, Inc.	507 NW 60TH ST STE D Gainesville, FL 32607 United States	+1 (352) 332-3157	ryan@kesslerandgehman. com	Technical Representative

Channel and Facility Information

Section	Question	Response
Proposed Community of License	Facility ID	72338
	State	Delaware
	City	WILMINGTON
	DTV Channel	13
	Designated Market Area	PHILADELPHIA
Facility Type	Facility Type	Noncommercial Educational
	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	1027110
Coordinates (NAD83)	Latitude	40° 02' 30.9" N+
	Longitude	075° 14' 21.9" W-
	Structure Type	GTOWER-Guyed Structure Used for Communication Purposes
	Overall Structure Height	332.8 meters
	Support Structure Height	311.8 meters
	Ground Elevation (AMSL)	67.0 meters
Antenna Data	Height of Radiation Center Above Ground Level	189 meters
	Height of Radiation Center Above Average Terrain	188.1 meters
	Height of Radiation Center Above Mean Sea Level	256.0 meters
	Effective Radiated Power	24 kW

**Antenna
Technical Data**

Section	Question	Response
Antenna Type	Antenna Type	Directional Custom
	Do you have an Antenna ID?	No
	Antenna ID	1007006
Antenna Manufacturer and Model	Manufacturer:	Propagation Systems, Inc.
	Model	PSIVLP8DMC-12/13
	Rotation	85 degrees
	Electrical Beam Tilt	0.75
	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	1.000	90	0.990	180	0.900	270	0.530
10	0.996	100	0.990	190	0.810	280	0.560
20	0.992	110	0.990	200	0.715	290	0.595
30	0.991	120	0.991	210	0.650	300	0.650
40	0.990	130	0.992	220	0.595	310	0.715
50	0.990	140	0.996	230	0.560	320	0.810
60	1.000	150	1.000	240	0.530	330	0.900
70	0.990	160	0.990	250	0.520	340	0.960
80	0.990	170	0.960	260	0.520	350	0.995

Additional Azimuths

Degree	V _A
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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>Kyra McGrath McGrath <i>Executive VP/President,</i> <i>New Ventures and</i> <i>Enterprises</i></p> <p>07/01/2020</p>

Attachments

File Name	Uploaded By	Attachment Type	Description
WHYY Engineering STA Narrative.pdf	Applicant	All Purpose	WHYY Engineering STA Narrative