

(REFERENCE COPY - Not for submission)

DTV Engineering STA Application

File Number: BD	STA-20141103AEM	Submit	Date: 11/03/2014	Call Sign: KHGI-TV	Facility ID: 21160 FRN:
0009529157 State: Nebraska City		City: KE	ARNEY		
Service: DTV	Purpose: Engineer	ing STA	Status: Granted	Status Date: 11/06/2014	Expiration Date: 02/14/2015
Filing Status: InActive					

General	Section	Question	Response
Information			
Fees, Waivers,	Section	Question	Response
and Exemptions	Fees Waivers	Is the applicant exempt from FCC application Fees?	No
		Indicate reason for fee exemption:	
		Does this filing request a waiver of the Commission's rule(s)?	
		Total number of rule sections involved in this waiver request:	

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
PAPPAS TELECASTING OF CENTRAL NEBRASKA, A DEL LP Applicant Doing Business As: PAPPAS TELECASTING OF CENTRAL NEBRASKA, A DEL LP	823 WEST CENTER AVENUE VISALIA, CA 93291 United States	+1 (559) 733-7800	FCCMAIL@PAPPASTV. 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	Contact Name	Address	Phone	Email	Contact Type
Representatives (2)	TIMOTHY J. WILLIAMS DIRECTOR OF ENGINEERING	1078 25TH ROAD AXTEL, NE 68924 United States	+1 (308) 743- 2494	TWILLIAMS@NEBRASKA. TV	Technical Representative
	KATHLEEN VICTORY FLETCHER HEALD & HILDRETH, PLC	1300 N. 17TH STREET SUITE 1100 ARLINGTON, VA 22209 United States	+1 (703) 812- 0400	VICTORY@FHHLAW. COM	Legal Representative

Channel and	Section	Question	Response
Facility Information	Proposed Community of	Facility ID	21160
	License	State	Nebraska
		City	KEARNEY
		DTV Channel	13
		Designated Market Area	Lincoln & Hastings-Krny
	Facility Type	Facility Type	
		Station Type	Main
	Zone	Zone	

Antenna Location	Section	Question	Response
Data	Antenna Structure Registration	Do you have an FCC Antenna Structure Registration (ASR) Number?	
		ASR Number	
	Coordinates (NAD83)	Latitude	
		Longitude	
		Structure Type	
		Overall Structure Height	
		Support Structure Height	
		Ground Elevation (AMSL)	
	Antenna Data	Height of Radiation Center Above Ground Level	
		Height of Radiation Center Above Average Terrain	
		Height of Radiation Center Above Mean Sea Level	0.0 meters
		Effective Radiated Power	

Antenna	Section	Question	Response
Technical Data	Antenna Type	Antenna Type	
		Do you have an Antenna ID?	
		Antenna ID	
	Antenna Manufacturer and	Manufacturer:	
	Model	Model	
	DTV and DTS: Elevation Pattern	Rotation	
		Electrical Beam Tilt	
		Mechanical Beam Tilt	
		toward azimuth	
		Polarization	
		Does the proposed antenna propose elevation radiation patterns that vary with azimuth for reasons other than the use of mechanical beam tilt?	
		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	 FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID 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.	
		I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	DAVID P. STAPLETON

F	File Name	Uploaded By	Attachment Type	Description
-	<u>1656889_1274517.txt</u>	Applicant	All Purpose	EXPLANATION
	D:\data\prod\cdbs\letters\\54\A-1656889_F-21160_L-54181-BDSTA- 20141103AEM.pdf	Internal	All Purpose	imported letter