



(REFERENCE COPY - Not for submission)

# Analog LPTV Engineering STA Application

File Number: **0000048899** | Submit Date: **03/20/2018** | Call Sign: **KWFT-LP** | Facility ID: **58282** | FRN: **0021646880**  
 State: **Arkansas** | City: **FORT SMITH**  
 Service: **LPA** | Purpose: **Engineering STA** | Status: **Granted** | Status Date: **03/28/2018** | Expiration Date: **09/27/2018**  
 Filing Status: **InActive**

**General Information**

Section	Question	Response
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**Fees, Waivers, and Exemptions**

Section	Question	Response
<b>Fees</b>	Is the applicant exempt from FCC application Fees?	No
	Indicate reason for fee exemption:	
<b>Waivers</b>	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	MGL	\$190.00
<b>Total</b>		<b>\$190.00</b>

**Applicant  
Information**

**Applicant Name, Type, and Contact Information**

<b>Applicant</b>	<b>Address</b>	<b>Phone</b>	<b>Email</b>	<b>Applicant Type</b>
<b>KTV MEDIA, LLC</b> Doing Business As: KTV MEDIA	Larry E. Morton 17200 Chenal Parkway Suite 300 - 267 Little Rock, AR 72223 United States	+1 (501) 476- 1507	EQUITYLEM@GMAIL. COM	Corporation

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**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>Jim McPhetridge</b> <i>Broadcast Engineer</i> Jim McPhetridge	Jim McPhetridge 228 Flynn Drive El Paso, TX 79932 United States	+1 (915) 892- 2775	jmcphetridge@sbcglobal. net	Technical Representative
<b>Larry E. Morton , Mr .</b> <i>Manager</i> KALEIDOSCOPE FOUNDATION, INC.	Larry E. Morton 64 Villas Circle LITTLE ROCK, AR 72223 United States	+1 (501) 868- 3535	equitylem@gmail.com	Legal Representative

**Channel and Facility Information**

Section	Question	Response
Facility ID	58282	
State	Arkansas	
City	FORT SMITH	
LPA Channel	34	

**Antenna Location Data**

Section	Question	Response
<b>Antenna Structure Registration</b>	Do you have an FCC Antenna Structure Registration (ASR) Number?	Yes
	ASR Number	1275837
<b>Coordinates (NAD83)</b>	Latitude	35° 31' 30.2" N+
	Longitude	094° 22' 28.2" W-
	Structure Type	TOWER-A free standing or guyed struct
	Overall Structure Height	48.8 meters
	Support Structure Height	44.5 meters
	Ground Elevation (AMSL)	335.6 meters
<b>Antenna Data</b>	Height of Radiation Center Above Ground Level	30 meters
	Height of Radiation Center Above Mean Sea Level	365.6 meters
	Effective Radiated Power	12.6 kW

**Antenna  
Technical Data**

Section	Question	Response
<b>Antenna Type</b>	Antenna Type	Directional Custom
	Do you have an Antenna ID?	Yes
	Antenna ID	1001298
<b>Antenna Manufacturer and Model</b>	Manufacturer:	ANT
	Model	ANTACS16A
	Rotation	0 degrees
	Electrical Beam Tilt	Not Applicable
	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	
	Frequency Offset:	None

**Directional Antenna Relative Field Values (Pre-rotated Pattern)**

Degree	Value	Degree	Value	Degree	Value	Degree	Value
0	0.629	90	0.929	180	0.969	270	0.299
10	0.769	100	0.959	190	0.989	280	0.219
20	0.869	110	0.979	200	0.979	290	0.224
30	0.949	120	1.0	210	0.949	300	0.229
40	0.979	130	0.979	220	0.869	310	0.219
50	0.989	140	0.959	230	0.769	320	0.209
60	0.969	150	0.929	240	0.629	330	0.219
70	0.939	160	0.929	250	0.469	340	0.349
80	0.929	170	0.939	260	0.349	350	0.469

**Additional Azimuths**

Degree	V <sub>A</sub>
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**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>Larry Morton</b> <i>Manager</i></p> <p>03/20/2018</p>

## Attachments

File Name	Uploaded By	Attachment Type	Description
<a href="#">48899.pdf</a>	Internal	All Purpose	
<a href="#">Extraordinary_Circumstance_for_KWFT_Channel_34_STA_.pdf</a>	Applicant	All Purpose	KWFT - Extraordinary Circumstances
<a href="#">KWFT-LP Interference Letter.pdf</a>	Applicant	All Purpose	KWFT Ch 34 Interference Acceptance Letter
<a href="#">Stringent Mask Filter Ch 34.pdf</a>	Applicant	All Purpose	Stringent Mask Filter for Ch 34 Digital