



(REFERENCE COPY - Not for submission)

Analog LPTV Engineering STA Application

File Number: **0000111493** | Submit Date: **04/03/2020** | Call Sign: **KIJR-LP** | Facility ID: **14152** | FRN: **0003766847** | State: **California** | City: **LUCERNE VALLEY**
 Service: **LPA** | Purpose: **Engineering STA** | Status: **Granted** | Status Date: **04/10/2020** | Expiration Date: **10/10/2020**
 Filing Status: **Active**

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	MGL	\$200.00
Total		\$200.00

**Applicant
Information**

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
BIRACH BROADCASTING CORPORATION Applicant Doing Business As: BIRACH BROADCASTING CORPORATION	Sima Birach, President 21700 NORTHWESTERN HWY STE 1190 TOWER 14 SOUTHFIELD, MI 48075 United States	+1 (248) 557-3500	sima@provide. net	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
Bruce Bellamy <i>Consulting Engineer</i> Munn-Reese	Bruce Bellamy PO Box 220 Coldwater, MI 49036 United States	+1 (517) 278- 7339	bruce@munn-reese. com	Technical Representative
John C Trent , Esq. . <i>Counsel</i> Putbrese Hunsaker & Trent, P.C.	John C. Trent, Esq. 200 South Church Street Woodstock, VA 22664 United States	+1 (540) 459- 7646	fccman3@shentel. net	Legal Representative

Channel and Facility Information

Section	Question	Response
Facility ID	14152	
State	California	
City	LUCERNE VALLEY	
LPA Channel	30	

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?	No
	ASR Number	
Coordinates (NAD83)	Latitude	33° 51' 58.0" N+
	Longitude	116° 26' 03.0" W-
	Structure Type	GTOWER-Guyed Structure Used for Communication Purposes
	Overall Structure Height	15 meters
	Support Structure Height	15 meters
	Ground Elevation (AMSL)	463 meters
Antenna Data	Height of Radiation Center Above Ground Level	10 meters
	Height of Radiation Center Above Mean Sea Level	473 meters
	Effective Radiated Power	.15 kW

**Antenna
Technical Data**

Section	Question	Response
Antenna Type	Antenna Type	Directional Custom
	Do you have an Antenna ID?	Yes
	Antenna ID	20059
Antenna Manufacturer and Model	Manufacturer:	MCI
	Model	955314
	Rotation	165 degrees
	Electrical Beam Tilt	Not Applicable
	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	
	Frequency Offset:	Zero

Directional Antenna Relative Field Values (Pre-rotated Pattern)

Degree	Value	Degree	Value	Degree	Value	Degree	Value
0	1	90	1	180	0.01	270	0.01
10	0.947	100	0.967	190	0.01	280	0.021
20	0.793	110	0.872	200	0.01	290	0.094
30	0.756	120	0.729	210	0.01	300	0.218
40	0.902	130	0.556	220	0.01	310	0.378
50	0.902	140	0.378	230	0.01	320	0.556
60	0.756	150	0.218	240	0.01	330	0.729
70	0.793	160	0.094	250	0.01	340	0.872
80	0.947	170	0.021	260	0.01	350	0.967

Additional Azimuths

Degree	V _A
65	0.74
45	0.933
25	0.74

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>Sima Birach <i>President</i></p> <p>04/03/2020</p>

Attachments

File Name	Uploaded By	Attachment Type	Description
KIJR April 2020 STA Circumstances.pdf	Applicant	General Information	STA circumstances