



(REFERENCE COPY - Not for submission)

New Analog LPTV Station Construction Permit Application

File Number: **BNPTTL-20000830BMU** | Submit Date: **11/24/2000** | Call Sign: **NEW** | Facility ID: **130399** | FRN:  
**0017045188** | State: **Texas** | City: **LUFKIN**  
Service: **LPA** | Purpose: **Construction Permit** | Status: **Superceded** | Status Date: **10/05/2005** | Filing Status: **InActive**

General Information

| Section     | Question   | Response |
|-------------|--|----------|
| Attachments | Are attachments (other than associated schedules) being filed with this application? |          |

Fees, Waivers, and Exemptions

| Section | Question  | Response |
|---------|---|----------|
| Fees    | Is the applicant exempt from FCC application Fees?  | Yes      |
|         | Indicate reason for fee exemption:  |          |
|         | Is the applicant exempt from FCC regulatory Fees?   |          |
| Waivers | Does this filing request a waiver of the Commission's rule(s)?  |          |
|         | Total number of rule sections involved in this waiver request:  |          |
|         | Are the frequencies or parameters requested in this filing covered by grandfathered privileges, previously approved by waiver, or functionally integrated with an existing station? |          |

Applicant  
Information

Applicant Name, Type, and Contact Information

| Applicant  | Address  | Phone             | Email | Applicant Type |
|--|--|-------------------|-------|----------------|
| JOHN R. POWLEY<br>Applicant<br>Doing Business As: JOHN R. POWLEY | 7588 MANATEE STREET<br>NAVARE, FL 32566<br>United States | +1 (805) 936-6461 |       | 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  
(1)

| Contact Name | Address       | Phone | Email | Contact Type         |
|--------------|---------------|-------|-------|----------------------|
|              | United States |       | NA    | Legal Representative |

Alien Ownership

| Question  | Response |
|---|----------|
| 1) Is the applicant a foreign government or the representative of any foreign government as specified in Section 310(a) of the Communications Act?  |          |
| 2) Is the applicant an alien or the representative of an alien? (Section 310(b)(1))   |          |
| 3) Is the applicant a corporation, or non-corporate entity, that is organized under the laws of any foreign government? (Section 310(b)(2))   |          |
| 4) Is the applicant an entity of which more than one-fifth of the capital stock, or other equity or voting interest, is owned of record or voted by aliens or their representatives or by a foreign government or representative thereof or by any entity organized under the laws of a foreign country? (Section 310(b)(3))  |          |
| 5) Is the applicant directly or indirectly controlled by any other entity of which more than one-fourth of the capital stock, or other equity or voting interest, is owned of record or voted by aliens, their representatives, or by a foreign government or representative thereof, or by any entity organized under the laws of a foreign country? (Section 310(b)(4)) |          |
| 6) Has the applicant received a declaratory ruling(s) under Section 310(b)(4) of the Communications Act?  |          |
| 7) In connection with this application, is the applicant filing a foreign ownership Petition for Declaratory Ruling pursuant to Section 310(b)(4) of the Communications Act?  |          |

Basic Qualifying Questions

| Section                      | Question   | Response |
|------------------------------|--|----------|
| Revoked Application          | Has the Applicant or any party to this application had any FCC station Authorization revoked or had any application for an initial, modification or renewal of FCC station Authorization denied by the Commission? |          |
| State or Federal Convictions | Has the Applicant or any party to this application, or any party directly or indirectly controlling the Applicant, ever been convicted of a felony by any state or federal court?                                  |          |

Channel and Facility Information

| Section     | Question | Response |
|-------------|----------|----------|
| Facility ID | 130399   |          |
| State       | Texas    |          |
| City        | LUFKIN   |          |
| LPA Channel | 46       |          |

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  | 31° 22' 50.6" N+  |
|                                | Longitude   | 094° 42' 25.7" W- |
|                                | Structure Type  |                   |
|                                | Overall Structure Height  | 160 meters        |
|                                | Support Structure Height  |                   |
|                                | Ground Elevation (AMSL)   | 76 meters         |
| Antenna Data                   | Height of Radiation Center Above Ground Level                   | 150 meters        |
|                                | Height of Radiation Center Above Mean Sea Level                 | 226 meters        |
|                                | Effective Radiated Power  | 5 kW              |

Antenna  
Technical Data

| Section                        | Question  | Response        |
|--------------------------------|---|-----------------|
| Antenna Type                   | Antenna Type  | Non-Directional |
|                                | Do you have an Antenna ID?  | Yes             |
|                                | Antenna ID  | 37300           |
| Antenna Manufacturer and Model | Manufacturer:   | PSI             |
|                                | Model   | PSILP80I        |
|                                | Rotation  |                 |
|                                | Electrical Beam Tilt  | Not Applicable  |
|                                | Mechanical Beam Tilt  | Not Applicable  |
|                                | toward azimuth  |                 |
|                                | Polarization  |                 |
| 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:   | Negative        |

**Parties to the  
Application (0)**

Information not provided.



**Attributable Interest**

| Section                        | Question   | Response |
|--------------------------------|--|----------|
| Equity and Financial Interests | Applicant certifies that equity and financial interests not set forth by the applicant parties are non-attributable. |          |
| Other Authorizations           | Does the applicant or any party to the application have an attributable interest in any other broadcast station(s).  |          |

Construction  
Permit  
Certifications

| Section              | Question   | Response |
|----------------------|--|----------|
| Environmental Effect | Would a Commission grant of Authorization for this location be an action which may have a significant environmental effect? (See 47 C.F.R. Section 1.1306) |          |
| Broadcast Facility   | The proposed facility complies with all of the following applicable rule sections. 47 C.F.R. Sections 74.709, 74.793 (e), 74.793(f), 74.793(g), 74.793(h)  |          |

Legal  
Certifications

| Section                            | Question   | Response |
|------------------------------------|--|----------|
| Character Issues                   | <p>Applicant certifies that neither applicant nor any party to the application has or had any interest in, or connection with:</p> <p>(a) any broadcast application in any proceeding where character issues were left in unresolved or were resolved adversely against the applicant or party to the application; or</p> <p>(b) any pending broadcast application in which character issues have been raised.</p> |          |
| Adverse Findings                   | <p>Has the Applicant or any party to this application had an adverse finding or an adverse final action taken by any court or administrative body in a civil or criminal proceeding brought under any law related to the following: any felony; mass media-related antitrust or unfair competition; fraudulent statements to another governmental unit; or discrimination?</p>                                     |          |
| Program Service Certification      | <p>Applicant certifies that it is cognizant of and will comply with its obligations as a Commission licensee to present a program service responsive to the issues of public concern facing the station's community of license and service area.</p>   |          |
| Local Public Notice                | <p>Applicant certifies that it has or will comply with the public notice requirements of 47 C.F.R. Section 73.3580.</p>  |          |
| Equal Employment Opportunity (EEO) | <p>If the applicant proposes to employ five or more full-time employees, applicant certifies that it is filing simultaneously with this application a Model EEO Program Report.</p>  |          |

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         | <b>FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID</b><br>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.<br>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.   | 11/24/2000 |

**Attachments**

Information not provided.