

LPTV Engineering STA Application

 File Number:
 OU0041750 Submit Date:
 02/09/2018 Call Sign:
 WNYT Facility ID:
 73363 FRN:
 0005828736 State:

 New York
 City:
 ALBANY
 Expiration Date:
 Status:
 Status:

General Information	Section	Question	Respon	se
Fees, Waivers,	Section	Question	Respon	se
and Exemptions	Fees	Is the applicant exempt from FCC application Fees?		
		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	\$190.00	

Total

\$190.00

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
WNYT-TV, LLC Applicant Doing Business As: WNYT-TV, LLC	Steve P. Baboulis 715 N. Pearl St. Albany, NY 12204 United States	+1 (518) 207-4701	sbaboulis@wnyt.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 (1)	Bill LeBeau LeBeau Holland & Knight LLP	Bill LeBeau 800 17th St. NW Washington DC, DC 20006 United States	+1 (202) 868- 5965	bill.lebeau@hklaw. com	Legal Representative

Channel and Facility Information	Section	Question	Response	
	Proposed Community of	Facility ID	73363	
	License	State	New York	
	City LPD Channel Designated Market Area	City	ALBANY	
		LPD Channel	45	
		Designated Market Area	Albany-Schenectady-Troy	

Antenna Location Data	Section	Question	Response
	Antenna Structure Registration	Do you have an FCC Antenna Structure Registration (ASR) Number?	Yes
		Pe Do you have an FCC Antenna Structure Registration (ASR) Number? Yes ASR Number 1200269 D83) Latitude 43° 18' 17.0' Longitude 073° 45' 05.0' Structure Type TOWER-A fr guyed struct Overall Structure Height 68.0 meters Support Structure Height 68.0 meters Ground Elevation (AMSL) 402.3 meters	
	Coordinates (NAD83)	Latitude	43° 18' 17.0" N+
		Longitude	073° 45' 05.0" W-
		Structure Type	TOWER-A free standing or guyed struct
		Overall Structure Height	68.0 meters
		Support Structure Height	68.0 meters
		Ground Elevation (AMSL)	402.3 meters
	Antenna Data	Height of Radiation Center Above Ground Level	40 meters
		Height of Radiation Center Above Mean Sea Level	442.3 meters
		Effective Radiated Power	15 kW

Antenna	Section	Question	Response			
Technical Data	Antenna Type	Antenna Type	Directional Custom			
		Do you have an Antenna ID?	Yes			
		Antenna Type Directional Custom Do you have an Antenna ID? Yes Antenna ID 103801 Manufacturer: DIE				
	Antenna Manufacturer and	Manufacturer:	DIE			
	Model	Model	TLP-12W/VP-R(SP)			
		Rotation	0 degrees			
		Electrical Beam Tilt	1.6			
		Mechanical Beam Tilt	Not Applicable			
		toward azimuth				
		Anufacturer:DIEAnufacturer:DIEAnufacturer:TLP-12W/VP-R(SP)Anufacturer:0 degreesAnufacturer:0 degreesAnufacturer:1.6Anufacturer:Not ApplicableAnufacturer:HorizontalAnufacturer:HorizontalAnufacturer:NoAnufacturer:NoAnufacturer:NoAnufacturer:NoAnufacturer:Anufacturer:Anufacturer:NoAnufacturer: <td< td=""></td<>				
	Elevation Radiation Pattern	patterns that vary with azimuth for reasons other than the	No			
		Out-of-Channel Emission Mask:	Stringent			

Directional Antenna Relative Field Values (Pre-rotated Pattern)

Degree	Value	Degree	Value	Degree	Value	Degree	Value
0	0.845	90	0.985	180	0.975	270	0.253
10	0.922	100	1	190	0.922	280	0.241
20	0.975	110	0.985	200	0.845	290	0.253
30	0.997	120	0.951	210	0.758	300	0.302
40	0.99	130	0.925	220	0.68	310	0.397
50	0.959	140	0.929	230	0.605	320	0.51
60	0.929	150	0.959	240	0.51	330	0.605
70	0.925	160	0.99	250	0.397	340	0.68
80	0.951	170	0.997	260	0.302	350	0.758

Additional Azimuths

Degree	V _A
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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.	Yes
		I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	DAVID A. JONES A. JONES VICE PRESIDENT
			02/09/2018

Attachments

File Name	Uploaded By	Attachment Type	Description
<u>41750.pdf</u>	Internal	All Purpose	
WNYT Digital Replacement Translator - STA Request - Exhibit 1 - February 2018.pdf	Applicant	General Information	Exhibit 1