



(REFERENCE COPY - Not for submission)

# LPTV Engineering STA Application

File Number: **0000058619** | Submit Date: **07/27/2018** | Call Sign: **K41FJ-D** | Facility ID: **34861** | FRN: **0001582782** | State: **Idaho** | City: **COEUR D'ALENE**  
 Service: **LPD** | Purpose: **Engineering STA** | Status: **Dismissed** | Status Date: **10/10/2018** | 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>KING BROADCASTING COMPANY Applicant</b> Doing Business As: KING BROADCASTING COMPANY	Denise Branson, Sr. Paralegal TEGNA, Inc. 7950 Jones Branch Drive McLean, VA 22107 United States	+1 (703) 873-6606	dbranson@TEGNA.com	Other

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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>Esq Jennifer Johnson Johnson , Esq .</b> Covington & Burling, LLP	Jennifer Johnson Covington & Burling, LLP One CityCenter, 850 Tenth St. NW Washington, DC 20001 United States	+1 (202) 662- 5552	FCCParalegals@cov. com	Legal Representative
<b>Ryan C Wilhour C Wilhour</b> Kessler and Gehman Associates, Inc.	507 NW 60th ST STE D Gainesville, FL 32607 United States	+1 (352) 332- 3157	ryan@kesslerandgehman. com	Technical Representative

**Channel and Facility Information**

Section	Question	Response
Facility ID	34861	
State	Idaho	
City	COEUR D'ALENE	
LPD Channel	30	

**Antenna Location Data**

Section	Question	Response
<b>Antenna Structure Registration</b>	Do you have an FCC Antenna Structure Registration (ASR) Number?	No
	ASR Number	
<b>Coordinates (NAD83)</b>	Latitude	47° 43' 53.6" N+
	Longitude	116° 43' 50.6" W-
	Structure Type	NNTANN-Antenna tower
	Overall Structure Height	30.5 meters
	Support Structure Height	30.5 meters
	Ground Elevation (AMSL)	1244 meters
<b>Antenna Data</b>	Height of Radiation Center Above Ground Level	17 meters
	Height of Radiation Center Above Mean Sea Level	1261 meters
	Effective Radiated Power	2.7 kW

**Antenna  
Technical Data**

Section	Question	Response
<b>Antenna Type</b>	Antenna Type	Directional Custom
	Do you have an Antenna ID?	No
	Antenna ID	1003972
<b>Antenna Manufacturer and Model</b>	Manufacturer:	SWR
	Model	SWEDL4MLS/30
	Rotation	0 degrees
	Electrical Beam Tilt	0.75
	Mechanical Beam Tilt	Not Applicable
	toward azimuth	
	Polarization	Horizontal
<b>Elevation Radiation 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	
	Out-of-Channel Emission Mask:	Full Service

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

Degree	Value	Degree	Value	Degree	Value	Degree	Value
0	0.032	90	0.032	180	0.790	270	0.790
10	0.032	100	0.032	190	0.940	280	0.545
20	0.032	110	0.032	200	0.980	290	0.275
30	0.032	120	0.032	210	0.965	300	0.080
40	0.032	130	0.032	220	0.980	310	0.032
50	0.032	140	0.032	230	0.980	320	0.032
60	0.032	150	0.080	240	0.965	330	0.032
70	0.032	160	0.275	250	0.980	340	0.032
80	0.032	170	0.545	260	0.940	350	0.032

**Additional Azimuths**

Degree	V <sub>A</sub>
225	1.000

**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>Akin S. Harrison Esq S. Harrison , Esq .</b>  <i>Secretary</i></p> <p>07/27/2018</p>

**Attachments**

<b>File Name</b>	<b>Uploaded By</b>	<b>Attachment Type</b>	<b>Description</b>
<a href="#"><u>K41FJ-D channel 30 SWR SWEDL4ML.pdf</u></a>	Applicant	All Purpose	TVStudy V2.2.5 IX Study Summary
<a href="#"><u>K41FJ-D STA Request - Expedite.pdf</u></a>	Applicant	General Information	STA Request - Expedite