

(REFERENCE COPY - Not for submission)

License To Cover for LPTV Station Application

File Number: 0000125079 | Submit Date: 10/27/2020 | Call Sign: WESV-LD | Facility ID: 68043 | FRN: 0001529247

State: Illinois City: CHICAGO

Service: LPD Purpose: License To Cover 0000117892 Status: Granted Status Date: 10/27/2020 Expiration Date:

12/01/2021 Filing Status: Active

General Information

Section	Question	Response
Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Fees, Waivers, and Exemptions

Section	Question	Response
Fees	Is the applicant exempt from FCC application Fees?	No
	Indicate reason for fee exemption:	
	Is the applicant exempt from FCC regulatory Fees?	No
Waivers	Does this filing request a waiver of the Commission's rule(s)?	No
	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?	No

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
Estrella Television License LLC	1845 Empire Avenue Burbank, CA 91504 United States	+1 (818) 729- 5300	bkei@EstrellaMedia. com	Limited Liability Company

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
Kathleen A Kirby Wiley Rein LLP	1776 K Street, NW Washington, DC 20006 United States	+1 (202) 719-3360	KKirby@wiley.law	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 Sharing

Section	Question	Response			
Channel Sharing	Is this filing to disso	Is this filing to dissolve a Channel Sharing Arrangement?			
Enter the Facility ID of the station to be shared:	Facility ID	Call Sign	Service	City	State
Input the Facility ID of station(s) listed in the CSA:	Facility ID	Call Sign	Service	City	State

Channel and Facility Information

Section	Question	Response
Facility ID	68043	
State	Illinois	
City	CHICAGO	
LPD Channel	31	_

Primary station proposed to be rebroadcast:

Facility Id	Call Sign	City	State

Antenna Location Data

Section	Question	Response
Antenna Structure Registration	Do you have an FCC Antenna Structure Registration (ASR) Number?	Yes
	ASR Number	1009013
Coordinates (NAD83)	Latitude	41° 53' 56.1" N+
	Longitude	087° 37' 23.2" W-
	Structure Type	BTWR-Building with TOWER /ANTENNA on top
	Overall Structure Height	425.2 meters
	Support Structure Height	337.4 meters
	Ground Elevation (AMSL)	180.7 meters
Antenna Data	Height of Radiation Center Above Ground Level	349.0 meters
	Height of Radiation Center Above Mean Sea Level	529.7 meters
	Effective Radiated Power	15.0 kW

Antenna Technical Data

Section	Question	Response
Antenna Type	Antenna Type	Directional Custom
	Do you have an Antenna ID?	Yes
	Antenna ID	1007476
Antenna Manufacturer and Model	Manufacturer:	DIE
	Model	TUM-LP-C1-2/2M-1
	Rotation	220 degrees
	Electrical Beam Tilt	1.0
	Mechanical Beam Tilt	Not Applicable
	toward azimuth	
	Polarization	Circular
Elevation Radiation 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	
	Out-of-Channel Emission Mask:	Full Service

Directional Antenna Relative Field Values (Pre-rotated Pattern)

Degree	Value	Degree	Value	Degree	Value	Degree	Value
0	1.000	90	0.010	180	0.010	270	0.010
10	0.967	100	0.010	190	0.010	280	0.021
20	0.872	110	0.010	200	0.010	290	0.094
30	0.729	120	0.010	210	0.010	300	0.218
40	0.556	130	0.010	220	0.010	310	0.378
50	0.378	140	0.010	230	0.010	320	0.556
60	0.218	150	0.010	240	0.010	330	0.729
70	0.094	160	0.010	250	0.010	340	0.872
80	0.021	170	0.010	260	0.010	350	0.967

Additional Azimuths

Degree	$V_{\mathbf{A}}$

Parties to the Application (0)

Information not provided.

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.	
	I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	

Attachments

Information not provided.