



(REFERENCE COPY - Not for submission)

# Amendment to a LPTV Engineering STA Application

File Number: **0000179604** | Submit Date: **03/10/2022** | Call Sign: **WVUX-LD** | Facility ID: **129306** | FRN: **0023594419**  
State: **West Virginia** | City: **Fairmont**  
Service: **LPD** | Purpose: **Engineering STA Amendment** | Status: **Granted** | Status Date: **03/11/2022** | Expiration Date: **09/07/2022** | 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:	

**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>Michael Karr</b> <i>owner</i> Doing Business As: WVUX	Michael Karr 4810 BROWNS CREEK ROAD ST ALBANS, WV 25177 United States	+1 (304) 539- 7975	Michaelfkarr@gmail. com	Individual

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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  
(3)**

Contact Name	Address	Phone	Email	Contact Type
<b>Michael Karr</b> <i>Owner</i> MICHAEL KARR	4810 BROWNS CREEK ROAD ST ALBANS, WV 25177 United States	+1 (304) 539- 7975	Michaelfkarr@gmail. com	Owner
<b>Jim McPhetridge</b> <i>Broadcast Engineer</i> Jm McPhetridge	Jim McPhetridge 104 Woodmont Montgomery, TX 77356 United States	+1 (915) 892- 2775	jmcphetridge@sbcglobal. net	Technical Representative
<b>Jennifer Scragg Karr</b> <i>Attorney</i> Jennifer Scragg Karr Attorney at Law	PO Box 194 Scott Depot, WV 25560 United States	+1 (304) 389- 9795	jdscragg@yahoo.com	Legal Representative

**Channel and Facility Information**

Section	Question	Response
Facility ID	129306	
State	West Virginia	
City	Fairmont	
LPD Channel	10	

**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	39° 16' 34.5" N+
	Longitude	080° 17' 37.1" W-
	Structure Type	UTOWER-Unguyed - Free Standing Tower
	Overall Structure Height	15.24 meters
	Support Structure Height	15.24 meters
	Ground Elevation (AMSL)	481 meters
<b>Antenna Data</b>	Height of Radiation Center Above Ground Level	12.19 meters
	Height of Radiation Center Above Mean Sea Level	493.19 meters
	Effective Radiated Power	.25 kW

**Antenna  
Technical Data**

Section	Question	Response
<b>Antenna Type</b>	Antenna Type	Directional Custom
	Do you have an Antenna ID?	No
	Antenna ID	1009363
<b>Antenna Manufacturer and Model</b>	Manufacturer:	Kathrein
	Model	DRV
	Rotation	0 degrees
	Electrical Beam Tilt	Not Applicable
	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:	Stringent

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

Degree	Value	Degree	Value	Degree	Value	Degree	Value
0	0.631	90	0.451	180	0.112	270	0.128
10	0.776	100	0.313	190	0.084	280	0.117
20	0.896	110	0.198	200	0.059	290	0.085
30	0.975	120	0.100	210	0.053	300	0.038
40	0.997	130	0.029	220	0.055	310	0.036
50	0.964	140	0.045	230	0.053	320	0.118
60	0.875	150	0.093	240	0.062	330	0.219
70	0.749	160	0.120	250	0.089	340	0.339
80	0.525	170	0.127	260	0.116	350	0.480

**Additional Azimuths**

Degree	V <sub>A</sub>
39	1.0

**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>Jennifer Scragg Karr</b> <i>Attorney</i></p> <p>03/10/2022</p>

## Attachments

File Name	Uploaded By	Attachment Type	Description
<a href="#">Amendment to WVUX Ch 10 STA.pdf</a>	Applicant	Amendment	Amendment Exhibit
<a href="#">Form 854 ASR Application.pdf</a>	Applicant	Amendment	ASR application submitted
<a href="#">WVUX ANT-1.pdf</a>	Applicant	All Purpose	ANT-1
<a href="#">WVUX Ch 10 STA Amendment Exhibit2.pdf</a>	Applicant	Amendment	WVUX STA Amendment 2
<a href="#">WVUX Ch10 STA No IX TVStudy rpt.pdf</a>	Applicant	All Purpose	TVStudy NoIX Report
<a href="#">WVUX Ch 10 STA Tower Exhibit2.pdf</a>	Applicant	All Purpose	WVUX Ch 10 STA Tower Exhibit 2
<a href="#">WVUX Extraordinary Circumstances for STA 2.pdf</a>	Applicant	All Purpose	Extraordinary Circumstance
<a href="#">WVUX-LD Ch 10 STA Engineering Statement 2.pdf</a>	Applicant	All Purpose	WVUX Ch 10 STA Engineering Statement