



(REFERENCE COPY - Not for submission)

# LPTV Translator Engineering STA Application

File Number: **0000063960** | Submit Date: **12/04/2018** | Call Sign: **K39LW-D** | Facility ID: **29112** | FRN: **0002586535**  
 State: **Iowa** | City: **LANSING**  
 Service: **LPT** | Purpose: **Engineering STA** | Status: **Granted** | Status Date: **12/28/2018** | Expiration Date: **06/28/2019**  
 Filing Status: **Active**

## 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?	Yes
	Indicate reason for fee exemption:	Noncommercial educational broadcaster and governmental entity
<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>IOWA PUBLIC BROADCASTING BOARD</b> Doing Business As: IOWA PUBLIC BROADCASTING BOARD	P.O. BOX 6450 JOHNSTON, IA 50131 United States	+1 (515) 725- 9700	MOLLY@IPTV. ORG	Government Entity

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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>Greg Best</b> <i>Consulting Engineer</i> Greg Best Consulting Inc.	16100 Outlook Avenue Stilwell, KS 60885 United States	+1 (816) 792- 2913	gbconsulting54@gmail. com	Technical Representative
<b>WILLIAM T. HAYES</b> <i>DIRECTOR OF ENGINEERING</i> IOWA PUBLIC BROADCASTING BOARD	P.O. BOX 6450 JOHNSTON, IA 50131 United States	+1 (515) 725- 9765	HAYES@IPTV.ORG	Technical Representative
<b>Barry S. Persh</b> GRAY MILLER PERSH LLP	1200 NEW HAMPSHIRE AVE., NW SUITE 410 WASHINGTON, DC 20036 United States	+1 (202) 776- 2458	bpersh@graymillerpersh. com	Legal Representative

**Channel and Facility Information**

Section	Question	Response
Facility ID	29112	
State	Iowa	
City	LANSING	
LPT Channel	31	

**Antenna Location Data**

Section	Question	Response
<b>Antenna Structure Registration</b>	Do you have an FCC Antenna Structure Registration (ASR) Number?	Yes
	ASR Number	1026020
<b>Coordinates (NAD83)</b>	Latitude	43° 20' 59.0" N+
	Longitude	091° 13' 16.0" W-
	Structure Type	TOWER-A free standing or guyed struct
	Overall Structure Height	147.5 meters
	Support Structure Height	138.4 meters
	Ground Elevation (AMSL)	323.1 meters
<b>Antenna Data</b>	Height of Radiation Center Above Ground Level	142 meters
	Height of Radiation Center Above Mean Sea Level	465.1 meters
	Effective Radiated Power	5 kW

**Antenna  
Technical Data**

Section	Question	Response
<b>Antenna Type</b>	Antenna Type	Directional Custom
	Do you have an Antenna ID?	No
	Antenna ID	1004389
<b>Antenna Manufacturer and Model</b>	Manufacturer:	Kathrein
	Model	75010210 (x2)
	Rotation	330 degrees
	Electrical Beam Tilt	0
	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	.956	90	.419	180	.127	270	.423
10	.898	100	.305	190	.083	280	.571
20	.831	110	.220	200	.060	290	.733
30	.883	120	.171	210	.122	300	.883
40	.976	130	.151	220	.143	310	.987
50	.976	140	.154	230	.141	320	.985
60	.874	150	.127	240	.162	330	.893
70	.723	160	.068	250	.215	340	.839
80	.570	170	.093	260	.302	350	.909

**Additional Azimuths**

Degree	V <sub>A</sub>
46	1.000
315	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>William T. Hayes</b>  <i>Director of Engineering and Technology</i></p> <p>12/04/2018</p>

## Attachments

File Name	Uploaded By	Attachment Type	Description
<a href="#"><u>Lansing TV Translator Ch 31 Engineering STA Request.pdf</u></a>	Applicant	General Information	Lansing TV Translator Ch 31 Engineering STA Request
<a href="#"><u>T-Mobile Letter - Lansing, IA TV Translator Fac ID 29112.pdf</u></a>	Applicant	General Information	T-Mobile Letter - Lansing, IA TV Translator Fac ID 29112