



(REFERENCE COPY - Not for submission)

# Request to Extend a LPTV Translator Engineering STA Application

File Number: **0000107297** | Submit Date: **03/06/2020** | Call Sign: **K40MS-D** | Facility ID: **189407** | FRN: **0022765325**  
 State: **Idaho** | City: **POCATELLO**  
 Service: **LPT** | Purpose: **STA Extension** | Status: **Granted** | Status Date: **03/09/2021** | Expiration Date: **07/25/2021**  
 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
STA Extension	MGL	\$200.00
<b>Total</b>		<b>\$200.00</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>IDAHO BROADCAST PARTNERS LLC</b> Doing Business As: IDAHO BROADCAST PARTNERS LLC	Ron Sweatte 4600 South Regal Street Spokane, WA 99223 United States	+1 (509) 448-2828	ron. sweatte@northwestbroadcasting. com	Limited Liability Company

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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>Dennis P. Corbett</b> Telecommunications Law Professionals PLLC	1025 Connecticut Ave NW Suite 1011 Washington, DC 20036 United States	+1 (202) 789-3115	dcorbett@telecomlawpros.com	Legal Representative
<b>Ron Sweatte</b> <i>Chief Technology Officer</i> Northwest Broadcasting, Inc.	4600 South Regal Street Spokane, WA 99223 United States	+1 (509) 448-2828	ron. sweatte@northwestbroadcasting. com	Technical Representative

**Channel and Facility Information**

Section	Question	Response
Facility ID	189407	
State	Idaho	
City	POCATELLO	
LPT Channel	19	

**Primary station proposed to be rebroadcast:**

Facility Id	Call Sign	City	State
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**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	42° 52' 25.5" N+
	Longitude	112° 30' 49.2" W-
	Structure Type	BPOLE-Building with POLE /ANTENNA on top
	Overall Structure Height	4.5 meters
	Support Structure Height	3.3 meters
	Ground Elevation (AMSL)	1774.9 meters
<b>Antenna Data</b>	Height of Radiation Center Above Ground Level	4.2 meters
	Height of Radiation Center Above Mean Sea Level	1779.1 meters
	Effective Radiated Power	0.330 kW

**Antenna  
Technical Data**

Section	Question	Response
<b>Antenna Type</b>	Antenna Type	Directional Custom
	Do you have an Antenna ID?	Yes
	Antenna ID	1003961
<b>Antenna Manufacturer and Model</b>	Manufacturer:	sca
	Model	CL-1469
	Rotation	108 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	1	90	.010	180	.010	270	.010
10	.947	100	.010	190	.010	280	.010
20	.812	110	.010	200	.010	290	.010
30	.622	120	.010	210	.010	300	.010
40	.361	130	.010	220	.010	310	0.86
50	.086	140	.010	230	.010	320	0.361
60	.010	150	.010	240	.010	330	0.622
70	.010	160	.010	250	.010	340	0.812
80	.010	170	.010	260	.010	350	0.947

**Additional Azimuths**

Degree	V <sub>A</sub>
5	0.947
355	0.947

**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>Ron Sweatte</b>  <i>Chief Technology Officer</i></p> <p>03/06/2020</p>

## Attachments

File Name	Uploaded By	Attachment Type	Description
<a href="#">K40MS-D STA Extension Exhibit (00159258xC33F1).pdf</a>	Applicant	All Purpose	STA Extension Exhibit