

(REFERENCE COPY - Not for submission)

LPTV Translator Engineering STA Application

File Number:
OU0185308 Submit Date:
02/24/2022 Call Sign:
K17BA-D Facility ID:
60735 FRN:
0023422728 State:

California
City:
YREKA
Service:
LPT
Purpose:
Engineering STA
Status:
Granted
Status Date:
03/07/2022 Expiration Date:
09/06/2022 Filing Status:

Filing Status:
Active
Status
Status</

General Information	Section	Question	Res	ponse
Fees, Waivers,	Section	Question		ponse
and Exemptions	Fees	Is the applicant exempt from FCC application Fees?		
		Indicate reason for fee exemption:		
	Waivers	Does this filing request a waiver of the Commission's rule(s)?		
		Total number of rule sections involved in this waiver request:		
		'		
	Application Type	Fee Code	Fee Amount	
	Engineering STA	MGL	\$270.00	

Total

\$270.00

Applicant Name, Type, and Contact Information

Applicant Information

Applicant	Address	Phone	Email	Applicant Type
OREGON TV LICENSE COMPANY LLC Doing Business As: OREGON TV LICENSE COMPANY LLC	3282 Northside Parkway Suite 275 ATLANTA, GA 30327 United States	+1 (470) 355- 1944	jburgett@wiley. law	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 (2)	Contact Name	Address	Phone	Email	Contact Type
	John M. Burgett , Esq . Wiley Rein LLP	2050 M Street, NW Washington, DC 20036 United States	+1 (202) 719- 4239	jburgett@wiley.law	Legal Representative
	Joseph Petroni CHIEF OPERATOR Oregon TV License Company, LLC	1090 KNUTSON AVENUE MEDFORD, OR 97504 United States	+1 (541) 773- 1212	josephpetroni@kdrv. com	Technical Representative

Channel and Facility Information	Section	Question	Response
	Facility ID	60735	
	State	California	
	City	YREKA	
	LPT Channel	17	

Antenna Location	Section	Question	Response
Data	Antenna Structure Registration	Do you have an FCC Antenna Structure Registration (ASR) Number?	No
		ASR Number	
	Coordinates (NAD83)	Latitude	41° 36' 37.2" N+
		Longitude	122° 37' 29.6" W-
		Structure Type	LTOWER-Lattice Tower
		Overall Structure Height	45.7 meters
		Support Structure Height	45.7 meters
		Ground Elevation (AMSL)	1792 meters
	Antenna Data	Height of Radiation Center Above Ground Level	27.4 meters
		Height of Radiation Center Above Mean Sea Level	1819.4 meters
		Effective Radiated Power	0.437 kW

Antenna	Section	Question	Response	
Technical Data	Antenna Type	Antenna Type	Directional Custom	
		Do you have an Antenna ID?	Yes	
		Antenna Type Directional Co Do you have an Antenna ID? Yes Antenna ID 20718 and Manufacturer: SCA Model 1X2KBBU Rotation 65 degrees		
	Antenna Manufacturer and	Manufacturer:	SCA	
	Model	Model	1X2KBBU	
		Rotation	65 degrees	
		Electrical Beam Tilt	Not Applicable	
		Mechanical Beam Tilt	Not Applicable	
		toward azimuth		
		Polarization	Horizontal	
Elevatio Pattern	Elevation Radiation Pattern	patterns that vary with azimuth for reasons other than the	No	
		Out-of-Channel Emission Mask:	Simple	

Directional Antenna Relative Field Values (Pre-rotated Pattern)

Degree	Value	Degree	Value	Degree	Value	Degree	Value
0	0.931	90	0.432	180	0.069	270	0.432
10	0.846	100	0.316	190	0.043	280	0.57
20	0.717	110	0.202	200	0.051	290	0.738
30	0.813	120	0.131	210	0.116	300	0.931
40	0.955	130	0.089	220	0.065	310	1
50	1	140	0.065	230	0.089	320	0.955
60	0.931	150	0.116	240	0.131	330	0.813
70	0.738	160	0.051	250	0.202	340	0.717
80	0.57	170	0.043	260	0.316	350	0.846

Additional Azimuths

V _A

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.).			
		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, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith. FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION MAD 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. Failure to meet the construction or coverage requirements. Failure to meet the construction 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 perjuy, that I am an authorized			
	Authorized Party to Sign	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.			
			Yes		
		I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	Robert S. Prather , Prather CEO, Allen Media Broadcasting, LLC		
			02/24/2022		

Attachments	File Name	Uploaded By	Attachment Type	Description
	K17BA-D Reduced Power STA Request.pdf	Applicant	All Purpose	K17BA-D Reduced Power STA Request