

License To Cover for Analog LPTV Translator Application File Number: BLTTV-2067 Call Sign: K12GP-D Facility ID: 52498 FRN: 0014325781 State: Montana City: DODSON

Service: LPXPurpose: License To CoverStatus: GrantedStatus Date: 01/01/1900Expiration Date: 04/01/2022Filing Status: InActive

General	Section	Question	Response
Information	Attachments	Are attachments (other than associated schedules) being filed with this application?	
Fees, Waivers,	Section	Question	Response
and Exemptions	Fees	Is the applicant exempt from FCC application Fees?	No
		Indicate reason for fee exemption:	
		Is the applicant exempt from FCC regulatory Fees?	
	Waivers	Does this filing request a waiver of the Commission's rule(s)?	
		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 weiver, or functionally integrated with an existing station?	
		waiver, or functionally integrated with an existing station?	

Applicant Name, Type, and Contact Information

Applicant	Address	Phone Email	Applicant Type
PHILLIPS COUNTY TV TRANSLATOR DISTRICT Applicant	PO BOX 387 MALTA, MT		Other
Doing Business As: PHILLIPS COUNTY TV TRANSLATOR DISTRICT	59538 United States		

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.

Information not provided.

Contact Representatives (0)

Alien Ownership	Question	Response
	 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?	

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?	

Basic Qualifying Questions

Channel and	
Facility	
Information	

Section	Question	Response
Facility ID	52498	
State	Montana	
City	DODSON	
LPX Channel	12	-

Primary station proposed to be rebroadcast:

Facility Id	Call Sign	City	State
34412		GREAT FALLS	МТ

Antenna Location Data	Section	Question	Response			
	Antenna Structure Registration	Do you have an FCC Antenna Structure Registration (ASR) Number?	No			
		Do you have an FCC Antenna Structure Registration (ASR) No				
	Coordinates (NAD83)	Number?ASR NumberLatitudeLatitudeLongitudeStructure TypeOverall Structure HeightSupport Structure Height				
	Structure Type	Structure Type				
		Overall Structure Height				
		Support Structure Height				
		Ground Elevation (AMSL)				
	Antenna Data	Height of Radiation Center Above Ground Level				
		Height of Radiation Center Above Mean Sea Level	712 meters			
		Effective Radiated Power	0.002 kW			

Antenna	Section	Question	Response			
Technical Data	Antenna Type	Antenna Type	Directional Custom			
		Do you have an Antenna ID?	Yes			
		Antenna Type Directional Custom Do you have an Antenna ID? Yes Antenna ID 24536				
	Antenna Manufacturer and	Manufacturer:	СМ			
	Model	Model	*A			
		Do you have an Antenna ID?YesAntenna ID24536r and ModelManufacturer:Model*ARotation269 degreesElectrical Beam TiltNot ApplicableMechanical Beam TiltNot Applicabletoward azimuthHorizontalPolarizationHorizontalDoes the proposed antenna propose elevation radiation patterns that vary with azimuth for reasons other than the use of mechanical beam tilt?NoUploaded file for elevation antenna (or radiation) patternYes				
		Electrical Beam Tilt Not Applicable				
		Mechanical Beam Tilt	Not Applicable			
		toward azimuth				
		Polarization	Horizontal			
	DTV and DTS: Elevation Pattern	Pattern patterns that vary with azimuth for reasons other than the				
		Frequency Offset:	None			

Directional Antenna Relative Field Values (Pre-rotated Pattern)

Degree	Value	Degree	Value	Degree	Value	Degree	Value
0		90		180		270	
10		100		190		280	
20		110		200		290	
30		120		210		300	
40		130		220		310	
50		140		230		320	
60		150		240		330	
70		160		250		340	
80		170		260		350	

Additional Azimuths

Degree	V _A

Operating Constants	Section	Question	Response
	Transmitter and Transmission Line	Transmitter Power Output (TPO): (average power at input to transmission line, after any filter attached to the transmitter, if used)	
		Transmission Line Loss (LL):	
	Antenna Input Power (AIP):		
		Max. Antenna Power Gain (AG)	
		Effective Radiated Power (ERP) (Average Power)	-26.99 dBk 0.002 kW

Information not provided.

Parties to the Application (0)

Attributable Interest	Section	Question	Response
	Equity and Financial Interests	Applicant certifies that equity and financial interests not set forth by the applicant parties are non-attributable.	
	Other Authorizations	Does the applicant or any party to the application have an attributable interest in any other broadcast station(s).	

License Certifications	Section	Question	Response
	Constructed Facility	The facility constructed as authorized in the underlying construction permit.	
	Special Operating Conditions	The facility was constructed in compliance with all special operating conditions, terms, and obligations described in the construction permit. An exhibit may be required. Review the underlying construction permit.	

<section-header></section-header>	Section	Question	Response
	Obligations	Licensee/Permittee certifies that all terms, conditions, and obligations set forth in the underlying construction permit have been fully met.	
		Licensee/Permittee certifies that, apart from changes already reported, no cause or circumstance has arisen since the grant of the underlying construction permit which would result in any statement or representation contained in the construction permit application to be now incorrect.	
	Character Issues	 Applicant certifies that neither applicant nor any party to the application has or had any interest in, or connection with: (a) any broadcast application in any proceeding where character issues were left in unresolved or were resolved adversely against the applicant or party to the application; or (b) any pending broadcast application in which character issues have been raised. 	
	Adverse Findings	Has the Applicant or any party to this application had an adverse finding or an adverse final action taken by any court or administrative body in a civil or criminal proceeding brought under any law related to the following: any felony; mass media-related antitrust or unfair competition; fraudulent statements to another governmental unit; or discrimination?	

	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.	

Information not provided.

Attachments