

Request to Extend a LPTV Engineering STA Application

 File Number:
 BESTA-20140609AAY
 Submit Date:
 06/09/2014
 Call Sign:
 K38ON-D
 Facility ID:
 182269
 FRN:

 0009452178
 State:
 Utah
 City:
 GARFIELD, ETC.
 Expiration Date:
 01/05/2015

 Service:
 LPD
 Purpose:
 STA
 Extension
 Status:
 Granted
 Status Date:
 06/12/2014
 Expiration Date:
 01/05/2015

 Filing Status:
 InActive
 Inactive
 Inactive
 Inactive
 Inactive
 Inactive
 Inactive

General Information	Section	Question	Response
Fees, Waivers,	Section	Question	Response
and Exemptions	Fees	Is the applicant exempt from FCC application Fees?	Yes
		Indicate reason for fee exemption:	Governmental Entity
	Waivers	Does this filing request a waiver of the Commission's rule(s)?	
		Total number of rule sections involved in this waiver request:	

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
GARFIELD COUNTY Applicant Doing Business As: GARFIELD COUNTY	COURTHOUSE BUILDING PANGUITCH, UT 84759 United States	+1 (435) 676-8826		Other

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	Contact Name	Address	Phone	Email	Contact Type
Representatives (1)	GARFIELD COUNTY GARFIELD COUNTY	COURTHOUSE BUILDING PANGUITCH, UT 84759 United States	+1 (435) 676-8826		Legal Representative

Channel and Facility Information	Section	Question	Response
	Facility ID	182269	
	State	Utah	
	City	GARFIELD, ETC.	
	LPD Channel		

Antenna Location Data	Section	Question	Response
	Antenna Structure Registration	Do you have an FCC Antenna Structure Registration (ASR) Number?	
		ASR Number	
	Coordinates (NAD83)	Latitude	
		Longitude	
		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	0.0 meters
		Effective Radiated Power	

Antenna	Section	Question	Response
Technical Data	Antenna Type	Antenna Type	
		Do you have an Antenna ID?	
		Antenna ID	
	Antenna Manufacturer and	Manufacturer:	
	Model	Model	
	Elevation Radiation Pattern	Rotation	
		Electrical Beam Tilt	
		Mechanical Beam Tilt	
		toward azimuth	
		Polarization	
		Does the proposed antenna propose elevation radiation patterns that vary with azimuth for reasons other than the use of mechanical beam tilt?	
		Uploaded file for elevation antenna (or radiation) pattern data	
		Out-of-Channel Emission Mask:	

General Certification Statements The Applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the previous use of the same, whether by authorization or otherweike, and requests in Authorization is accordance with this application (See Section 304 of the Communications Act or 1934, as amended.). The Applicant certifies that netther the Applicant ror any other party to the application is adjust 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 file of in services exempted under \$1,2002(c) of the rules, 47 CFR \$-See \$1. Authorized Party to Sign (c). The Applicant certifies that all statements made in this application, and are true, complete, correct, and made in good faith. Authorized Party to Sign (c). The Applicant certifies that all statements made in this application and are true, complete, correct, and made in good faith. FALURE TO SIGN THIS APPLICATION MAP RESULT IN in court party to the construction or coverage requirements Failure to meet the construction or coverage requirements for any part of this application. the Authorization. Consult appropriate FCC regulations to determine the construction requested in this application. Mathorized Party to Sign (Fig. 47, \$3312, (11), AND/OR FORFEITURE (U.S. Code, Title 47, \$3312, ((11), AND/OR FORFEITU	Certification	Section	Question	Response
other party to the application is subject to a denial of Federal benefits pursuant to \$301 of the Ani-Dug Abuse Act of 1989, 21 U.S. (\$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(b) of the rules, 47 CFR \$1.2002(b), for the definition of "party to the application" as used in this certification \$12002 (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 FALURE 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. 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 will result in automatic cancellation. THIS PORM OR ANY ATTACHMENTS ARE UPUNENABLE BY FINE AND OR THEY FINE AND OR FORFEITURE (U.S. Code, Title 47, \$312(a)(1), AND/OR FORFEITURE (U.S. Code, Title 47, \$312(a)(1), AND/OR FORFEITURE (U.S. Code, Title 47, \$312(a)			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	
DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAIDUpon 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.			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	
relevant attachments.		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.	
representative of the above-named applicant for the			relevant attachments. I declare, under penalty of perjury, that I am an authorized	MAURI KENT PARSONS

Attachments

File Name	Uploaded By	Attachment Type	Description
<u>1638632_1247868.txt</u>	Applicant	All Purpose	K13ZM-D, REQUEST FOR CH 38 STA
<u>1638632_1247869.txt</u>	Applicant	All Purpose	SECTION III, QUESTION 5, ANTENNA TOWER REGISTRATION
<u>1638632_1247870.txt</u>	Applicant	All Purpose	CIRCUMSTANCES
D:\data\prod\cdbs\letters\A-1638632_F-182269_L- 49830-BESTA-20140609AAY.pdf	Internal	All Purpose	Requested: 06/12/14 14:13:46