



(REFERENCE COPY - Not for submission)

# Analog LPTV Translator Engineering STA Application

File Number: **0000120414** | Submit Date: **08/14/2020** | Call Sign: **WMNE-LP** | Facility ID: **47717** | FRN: **0021665070**  
 State: **Maine** | City: **PORTLAND**  
 Service: **LPX** | Purpose: **Engineering STA** | Status: **Superseded** | Status Date: **09/09/2020** | Filing Status: **InActive**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
Engineering STA	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>DIGITAL NETWORKS-NORTHEAST, LLC</b> Doing Business As: DIGITAL NETWORKS-NORTHEAST, LLC	Timothy K Hurley PO BOX 11409 CHATTANOOGA, TN 37401 United States	+1 (423) 468- 5100	thurley@luken. tv	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>Jeremy D Ruck , PE .</b> <i>Consulting Engineer</i> Jeremy Ruck & Associates, Inc.	PO Box 415 Canton, IL 61520 United States	+1 (309) 647- 1200	jeremy@jeremyruck. com	Technical Representative
<b>Aaron P Shainis , Esq .</b> <i>FCC Counsel</i> Shainis & Peltzman, Chartered	1850 M Street NW Suite 240 Washington, DC 20036 United States	+1 (202) 293- 0011	aaron@s-plaw.com	Legal Representative

**Channel and Facility Information**

Section	Question	Response
Facility ID	47717	
State	Maine	
City	PORTLAND	
LPX Channel	32	

**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?	Yes
	ASR Number	1022679
<b>Coordinates (NAD83)</b>	Latitude	43° 51' 06.0" N+
	Longitude	070° 19' 37.5" W-
	Structure Type	TOWER-A free standing or guyed struct
	Overall Structure Height	223.4 meters
	Support Structure Height	210.3 meters
	Ground Elevation (AMSL)	139.5 meters
<b>Antenna Data</b>	Height of Radiation Center Above Ground Level	175 meters
	Height of Radiation Center Above Mean Sea Level	314.5 meters
	Effective Radiated Power	2.0 kW

**Antenna  
Technical Data**

Section	Question	Response
<b>Antenna Type</b>	Antenna Type	Directional Custom
	Do you have an Antenna ID?	Yes
	Antenna ID	1004356
<b>Antenna Manufacturer and Model</b>	Manufacturer:	PSI
	Model	PSILP12OI
	Rotation	200 degrees
	Electrical Beam Tilt	1.0
	Mechanical Beam Tilt	Not Applicable
	toward azimuth	
	Polarization	Horizontal
<b>DTV and DTS: Elevation 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	
	Frequency Offset:	None

**Directional Antenna Relative Field Values (Pre-rotated Pattern)**

Degree	Value	Degree	Value	Degree	Value	Degree	Value
0	1.000	90	0.660	180	0.670	270	0.660
10	1.000	100	0.630	190	0.670	280	0.710
20	0.980	110	0.610	200	0.660	290	0.760
30	0.950	120	0.600	210	0.640	300	0.820
40	0.910	130	0.600	220	0.620	310	0.870
50	0.870	140	0.620	230	0.600	320	0.910
60	0.820	150	0.640	240	0.600	330	0.950
70	0.760	160	0.660	250	0.610	340	0.980
80	0.710	170	0.670	260	0.630	350	1.000

**Additional Azimuths**

Degree	V <sub>A</sub>
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**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>Joel Wertman</b>  <i>COO</i></p> <p>08/14/2020</p>

## Attachments

File Name	Uploaded By	Attachment Type	Description
<a href="#">WMNE-LD STA REQ Technical Exhibit 08142020.pdf</a>	Applicant	General Information	WMNE-LD STA Request Technical Exhibit (08-2020)