



(REFERENCE COPY - Not for submission)

# LPTV Translator Engineering STA Application

File Number: **0000024836** | Submit Date: **06/07/2017** | Call Sign: **K22HN-D** | Facility ID: **131081** | FRN: **0018223693**  
 State: **Alaska** | City: **ANCHORAGE**  
 Service: **LPT** | Purpose: **Engineering STA** | Status: **Granted** | Status Date: **06/14/2017** | Expiration Date: **12/14/2017**  
 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	\$190.00
<b>Total</b>		<b>\$190.00</b>

**Applicant  
Information**

**Applicant Name, Type, and Contact Information**

Applicant	Address	Phone	Email	Applicant Type
<b>GRAY TELEVISION LICENSEE, LLC</b> Doing Business As: GRAY TELEVISION LICENSEE, LLC	4370 PEACHTREE ROAD, NE ATLANTA, GA 30319 United States	+1 (404) 504-9828	robert. folliard@gray. 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>Joseph M. Davis , P.E. .</b> <i>Consulting Engineer</i> Chesapeake RF Consultants, LLC	207 Old Dominion Road Yorktown, VA 23692 United States	+1 (703) 650- 9600	Joseph.Davis@RF- consultants.com	Technical Representative
<b>Joan Stewart</b> <i>FCC Counsel</i> Wiley Rein LLP	1776 K Street NW Washington, DC 20006 United States	+1 (202) 719- 7438	jstewart@wileyrein.com	Legal Representative

**Channel and Facility Information**

Section	Question	Response
Facility ID	131081	
State	Alaska	
City	ANCHORAGE	
LPT Channel	22	

**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	61° 11' 07.0" N+
	Longitude	149° 52' 25.0" W-
	Structure Type	BMAST-Building with MAST /ANTENNA on top
	Overall Structure Height	19.5 meters
	Support Structure Height	14.0 meters
	Ground Elevation (AMSL)	33.8 meters
<b>Antenna Data</b>	Height of Radiation Center Above Ground Level	18.9 meters
	Height of Radiation Center Above Mean Sea Level	52.7 meters
	Effective Radiated Power	0.63 kW

**Antenna  
Technical Data**

Section	Question	Response
<b>Antenna Type</b>	Antenna Type	Directional Custom
	Do you have an Antenna ID?	No
	Antenna ID	1001269
<b>Antenna Manufacturer and Model</b>	Manufacturer:	KAT
	Model	K723147 1x2
	Rotation	0 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	0.119	90	0.943	180	0.832	270	0.129
10	0.069	100	1.000	190	0.960	280	0.095
20	0.095	110	0.960	200	1.000	290	0.069
30	0.129	120	0.832	210	0.943	300	0.119
40	0.199	130	0.727	220	0.742	310	0.048
50	0.317	140	0.850	230	0.570	320	0.045
60	0.431	150	0.931	240	0.431	330	0.070
70	0.570	160	0.852	250	0.317	340	0.045
80	0.743	170	0.727	260	0.199	350	0.048

**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>Robert Folliard</b> <i>Assistant Secretary</i></p> <p>06/07/2017</p>

## Attachments

File Name	Uploaded By	Attachment Type	Description
<a href="#">20170614100335-923.pdf</a>	Internal	All Purpose	
<a href="#">K22HN-D STA request ENG 06-07-2017.pdf</a>	Applicant	All Purpose	K22HN-D STA Engineering Exhibits
<a href="#">Purpose of STA K22HN.pdf</a>	Applicant	General Information	K22HN STA Purpose