

## Request to Extend a LPTV Engineering STA Application File Number: 0000029624 Submit Date: 09/01/2017 Call Sign: NEW Facility ID: 182177 FRN: 0014962377 State: Utah City: NEPHI

Service: LPDPurpose: STA ExtensionStatus: GrantedStatus Date: 09/06/2017Expiration Date:Filing Status:InActive

| General<br>Information           | Section | Question   | Response          |
|----------------------------------|---------|--|-------------------|
|                                  |         |  |                   |
| Fees, Waivers,<br>and Exemptions | Section | Question   | Response          |
|                                  | Fees    | Is the applicant exempt from FCC application Fees?             | Yes               |
|                                  |         | Indicate reason for fee exemption:                             | Government Entity |
|                                  | Waivers | Does this filing request a waiver of the Commission's rule(s)? | No                |
|                                  |         | Total number of rule sections involved in this waiver request: |                   |

## Applicant Name, Type, and Contact Information

| Applicant   | Address  | Phone                 | Email                        | Applicant<br>Type |
|---|--|-----------------------|------------------------------|-------------------|
| JUAB COUNTY<br>Applicant<br>Doing Business As: JUAB<br>COUNTY | 160 NORTH MAIN<br>STREET<br>NEPHI, UT 84648<br>United States | +1 (435) 623-<br>3408 | mauriparsons@hotmail.<br>com | 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<br>Representatives<br>(2) | Contact Name   | Address  | Phone                 | Email                        | Contact Type                |
|-----------------------------------|--|--|-----------------------|------------------------------|-----------------------------|
|                                   | Mauri Kent Parsons Kent<br>Parsons<br>MP Electronics | P.O. BOX 473<br>390 SOUTH 500<br>EAST<br>MONROE, UT 84754<br>United States | +1 (435) 527-<br>3508 | MAURIPARSONS@HOTMAIL.<br>COM | Technical<br>Representative |
|                                   | MIKE Seely Seely<br>JUAB COUNTY                      | 160 NORTH MAIN<br>STREET<br>NEPHI, UT 84648<br>United States               | +1 (435) 623-<br>3408 | mike@co.juab.ut.us           | Legal<br>Representative     |

| Channel and             | Section     | Question | Response |
|-------------------------|-------------|----------|----------|
| Facility<br>Information | Facility ID | 182177   |          |
|                         | State       | Utah     |          |
|                         | City        | NEPHI    |          |
|                         | LPD Channel | 43       |          |

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

| Certification | Section                             | Question  | Response  |
|---------------|-------------------------------------|---|---|
|               | General Certification<br>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<br>other party to the application is subject to a denial of Federal<br>benefits pursuant to §5301 of the Anti-Drug Abuse Act of<br>1988, 21 U.S.C. §862, because of a conviction for<br>possession or distribution of a controlled substance. This<br>certification does not apply to applications filed in services<br>exempted under §1.2002(c) of the rules, 47 CFR . See §1.<br>2002(b) of the rules, 47 CFR §1.2002(b), for the definition of<br>"party to the application" as used in this certification §1.2002<br>(c). The Applicant certifies that all statements made in this<br>application and in the exhibits, attachments, or documents<br>incorporated by reference are material, are part of this<br>application, and are true, complete, correct, and made in<br>good faith.  |   |
|               | Authorized Party to Sign            | <ul> <li>FAILURE TO SIGN THIS APPLICATION MAY RESULT IN<br/>DISMISSAL OF THE APPLICATION AND FORFEITURE<br/>OF ANY FEES PAID</li> <li>Upon grant of this application, the Authorization Holder may<br/>be subject to certain construction or coverage requirements.</li> <li>Failure to meet the construction or coverage requirements<br/>will result in automatic cancellation of the Authorization.</li> <li>Consult appropriate FCC regulations to determine the<br/>construction or coverage requirements that apply to the type<br/>of Authorization requested in this application.</li> <li>WILLFUL FALSE STATEMENTS MADE ON THIS FORM<br/>OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND<br/>/OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR<br/>REVOCATION OF ANY STATION AUTHORIZATION (U.S.<br/>Code, Title 47, §312(a)(1)), AND/OR FORFEITURE (U.S.<br/>Code, Title 47, §503).</li> </ul> |   |
|               |                                     | I certify that this application includes all required and relevant attachments.   | Yes   |
|               |                                     | I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.  | Mauri Parsons Parsons<br>Technical Representative<br>09/01/2017 |

| File Name                       | Uploaded By | Attachment Type     | Description |
|---------------------------------|-------------|---------------------|-------------|
| <u>29624.pdf</u>                | Internal    | All Purpose         |             |
| Extraordinary Circumstances.pdf | Applicant   | General Information |             |

Attachments