



(REFERENCE COPY - Not for submission)

DTV Engineering STA Application

File Number: **0000062911** | Submit Date: **10/16/2018** | Call Sign: **KWHM** | Facility ID: **37105** | FRN: **0027334275** | State: **Hawaii** | City: **WAILUKU**
 Service: **DTV** | Purpose: **Engineering STA** | Status: **Granted** | Status Date: **10/19/2018** | Expiration Date: **04/18/2019**

Filing Status: **Active**

General Information

Section	Question	Response
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Fees, Waivers, and Exemptions

Section	Question	Response
Fees	Is the applicant exempt from FCC application Fees?	No
	Indicate reason for fee exemption:	
Waivers	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	MGT	200.0
Total		200.0

**Applicant
Information**

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
MANGO BROADCASTING COMPANY, LLC Doing Business As: MANGO BROADCASTING COMPANY, LLC	General Manager POST OFFICE BOX 21 HONOLULU, HI 96810 United States	+1 (808) 442-0045	KWHM. TV@GMAIL. COM	Limited Liability Company

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
Kevin T. Fisher <i>Engineering Consultant</i> Smith and Fisher, LLC	Kevin T. Fisher SMITH AND FISHER, LLC 4791 Wintergreen Court Woodbridge, VA 22192 United States	+1 (703) 505- 1751	kevin@smithandfisher. com	Technical Representative
DONALD LAIDLAW <i>MANAGER</i> MANGO BROADCASTING COMPANY, LLC	MANAGER PO Box 21 HONOLULU, HI 96810 United States	+1 (808) 442- 0045	KWHM.TV@GMAIL. COM	Technical Representative

Channel and Facility Information

Section	Question	Response
Proposed Community of License	Facility ID	37105
	State	Hawaii
	City	WAILUKU
	DTV Channel	21
Facility Type	Facility Type	Commercial
	Station Type	Main
Zone	Zone	2

Antenna Location Data

Section	Question	Response
Antenna Structure Registration	Do you have an FCC Antenna Structure Registration (ASR) Number?	No
	ASR Number	
Coordinates (NAD83)	Latitude	20° 46' 32.4" N+
	Longitude	156° 19' 41.9" W-
	Structure Type	UPOLE-Utility POLE /TOWER used to provide service
	Overall Structure Height	29.0 meters
	Support Structure Height	29.0 meters
	Ground Elevation (AMSL)	765 meters
Antenna Data	Height of Radiation Center Above Ground Level	12.2 meters
	Height of Radiation Center Above Average Terrain	-118.5 meters
	Height of Radiation Center Above Mean Sea Level	777.2 meters
	Effective Radiated Power	2.1 kW

**Antenna
Technical Data**

Section	Question	Response
Antenna Type	Antenna Type	Directional Custom
	Do you have an Antenna ID?	Yes
	Antenna ID	1003057
Antenna Manufacturer and Model	Manufacturer:	Jampro
	Model	JUHD-1 Special
	Rotation	290 degrees
	Electrical Beam Tilt	Not Applicable
	Mechanical Beam Tilt	Not Applicable
	toward azimuth	
	Polarization	Horizontal
DTV and DTS: Elevation Pattern	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	

Directional Antenna Relative Field Values (Pre-rotated Pattern)

Degree	V _A (Authorized Value)	Degree	V _A (Authorized Value)	Degree	V _A (Authorized Value)	Degree	V _A (Authorized Value)
0	1.00	90	0.010	180	0.010	270	0.010
10	0.967	100	0.010	190	0.010	280	0.021
20	0.872	110	0.010	200	0.010	290	0.094
30	0.729	120	0.010	210	0.010	300	0.218
40	0.556	130	0.010	220	0.010	310	0.378
50	0.378	140	0.010	230	0.010	320	0.556
60	0.218	150	0.010	240	0.010	330	0.729
70	0.094	160	0.010	250	0.010	340	0.872
80	0.021	170	0.010	260	0.010	350	0.967

Additional Azimuths

Degree	V _A
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Certification

Section	Question	Response
<p>General Certification Statements</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>Authorized Party to Sign</p>	<p>FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID</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>Donald Laidlaw <i>General Manager</i></p> <p>10/16/2018</p>

Attachments

File Name	Uploaded By	Attachment Type	Description
<u>KWHM-DT STA Comprehensive Technical Exhibit.pdf</u>	Applicant	General Information	STA Engineering Exhibit, including justification for request and power density calculation
<u>KWHM STA REQUEST.pdf</u>	Applicant	General Information	KWHM-DT STA REQUEST