



(REFERENCE COPY - Not for submission)

# LPTV Engineering STA Application

File Number: **0000080939** | Submit Date: **09/05/2019** | Call Sign: **W20DD-D** | Facility ID: **66386** | FRN: **0003828712**  
 State: **North Carolina** | City: **MARION, ETC.**  
 Service: **LPD** | Purpose: **Engineering STA** | Status: **Granted** | Status Date: **09/05/2019** | Expiration Date:  
 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>North Carolina Broadcasting Partners Applicant</b> Doing Business As: North Carolina Broadcasting Partners	C/O Amy Elizabeth Pittenger One Television Place Charlotte, NC 28205 United States	+1 (704) 632-7227	apittenger@bahakel.com	Other

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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>Louis R duTreil , Jr .</b> <i>Technical Consultant</i> duTreil Lundin & Rackley Inc	3135 Southgate Circle Sarasota, FL 34239 United States	+1 (941) 329- 6004	bobjr@DLR.com	Technical Consultant
<b>M. Anne Swanson Anne Swanson</b> Wilkinson Barker Knauer, LLP	1800 M Street, NW Suite 800N Washington, DC 20036 United States	+1 (202) 383- 3342	aswanson@wbklaw. com	Legal Representative

**Channel and Facility Information**

Section	Question	Response
Facility ID	66386	
State	North Carolina	
City	MARION, ETC.	
LPD Channel	20	

**Antenna Location Data**

Section	Question	Response
<b>Antenna Structure Registration</b>	Do you have an FCC Antenna Structure Registration (ASR) Number?	Yes
	ASR Number	1008484
<b>Coordinates (NAD83)</b>	Latitude	35° 42' 33.0" N+
	Longitude	081° 31' 31.9" W-
	Structure Type	TOWER-A free standing or guyed struct
	Overall Structure Height	106.1 meters
	Support Structure Height	103.6 meters
	Ground Elevation (AMSL)	641.0 meters
<b>Antenna Data</b>	Height of Radiation Center Above Ground Level	62.5 meters
	Height of Radiation Center Above Mean Sea Level	703.5 meters
	Effective Radiated Power	5.25 kW

**Antenna  
Technical Data**

Section	Question	Response
<b>Antenna Type</b>	Antenna Type	Directional Custom
	Do you have an Antenna ID?	Yes
	Antenna ID	17025
<b>Antenna Manufacturer and Model</b>	Manufacturer:	AND
	Model	ALP8L4-HSER
	Rotation	15 degrees
	Electrical Beam Tilt	1
	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	1	90	0.725	180	0.147	270	0.725
10	1	100	0.624	190	0.136	280	0.815
20	1	110	0.529	200	0.085	290	0.886
30	1	120	0.428	210	0.067	300	0.946
40	1	130	0.293	220	0.146	310	0.988
50	0.988	140	0.146	230	0.293	320	1
60	0.946	150	0.067	240	0.428	330	1
70	0.886	160	0.085	250	0.529	340	1
80	0.815	170	0.136	260	0.624	350	1

**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>Beverly B Poston B Poston</b>  <i>President of Managing Partner of Noth Carolina Broadcasting Partners</i></p> <p>09/05/2019</p>

## Attachments

File Name	Uploaded By	Attachment Type	Description
<a href="#"><u>UNC Interference Agreement (W20DD letterofacceptance).pdf</u></a>	Applicant	All Purpose	UNC Interference Agreement
<a href="#"><u>W20DD_20_STA_RF_Hazard_Statement.pdf</u></a>	Applicant	All Purpose	RF HAZARD STATEMENT
<a href="#"><u>W20DD_20_STA_Technical_Summary.pdf</u></a>	Applicant	General Information	TECHNICAL SUMMARY
<a href="#"><u>W20DD_20_STA_TVStudy_Analysis.pdf</u></a>	Applicant	All Purpose	TVSTUDY ANALYSIS
<a href="#"><u>WSOC-TV Interference Agreement (W20DD letterofacceptance).pdf</u></a>	Applicant	All Purpose	WSOC-TV Interference Agreement