

Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0386 (July 2002)	FOR FCC USE ONLY
Engineering STA		FOR COMMISSION USE ONLY FILE NO.
Read Instructions/FAQ before filling out form		

Section I - General Information

1.	Legal Name of the Applicant FAMILY STATIONS, INC.		
	Mailing Address 112 NORTH ELM STREET		
	City SHENANDOAH	State or Country (if foreign address) IA	Zip Code 51601 -
	Telephone Number (include area code) 7122465151		E-Mail Address (if available) JBURKHISER@FAMILYRADIO.ORG
	FCC Registration No 0001545607	Call Sign WKDN	Facility ID Number 25095
2.	Contact Representative (if other than licensee/permittee) MATTHEW H. MCCORMICK, ESQ.		Firm or Company Name FLETCHER, HEALD & HILDRETH, P.L.C.
	Mailing Address 1300 NORTH 17TH STREET 11TH FLOOR		
	City ARLINGTON	State or Country (if foreign address) VA	ZIP Code 22209 -
	Telephone Number (include area code) 7038120438		E-Mail Address (if available) MCCORMICK@FHHLAW.COM
3.	Purpose:		
	<input checked="" type="radio"/> Engineering STA		
	<input type="radio"/> Extension of Existing Engineering STA		
	<input type="radio"/> Legal STA		
	<input type="radio"/> Extension of Existing Legal STA		
4.	Service: AM		
5.	Community of License: City: PHILADELPHIA State: PA		
6.	If this application has been submitted without a fee, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114):		
	<input type="radio"/> Governmental Entity <input checked="" type="radio"/> Noncommercial Educational Licensee/Permittee <input type="radio"/> Other		
	<input type="radio"/> N/A (Fee Required)		

TECHNICAL SPECIFICATIONS

Ensure that the specifications below are accurate. Contradicting data found elsewhere in this application will be disregarded. All items must be completed. The response "on file" is not acceptable.

TECH BOX

- 7.0. STA is requested for use of
- ☒ Licensed Antenna system with:

- ☒ Reduced power
☐ Reduced hours of operation
☐ Required equipment out of service
☐ Other variance [Exhibit 13]

☐ Antenna system authorized by Construction Permit: -
 Describe requested modes of operation [Exhibit 14]

☐ Emergency wire antenna. Provide a full description in the Exhibit to Question 8. Do not complete the directional or nondirectional tower subforms.

☐ Other antenna system: (Complete Items 7.1 - 7.7)

7.1. Frequency: 950 kHz

7.2. Class (select one):

A ☐ B ☒ C ☐ D ☐

7.3. Hours of Operation:

☒ Unlimited ☐ Limited ☐ Daytime ☐ Share Time ☐ Specified Hours:

7.4. Daytime: ☒ Yes ☐ No

[Daytime Operation]

7.4. Daytime Operation

a. Power: 6 kW

b. Antenna Location Coordinates: (NAD 27)

Latitude:

Degrees 39 Minutes 58 Seconds 28 ☒ North ☐ South

Longitude:

Degrees 75 Minutes 16 Seconds 19 ☒ West ☐ East

c. and d.

Complete the appropriate following items. If additional space is needed, please provide the [Exhibit 17]
information requested below in an Exhibit.

☐ Nondirectional ☒ Directional

Theoretical RMS: 2095.21

mV/m per kW at 1 km (Nondirectional)

mV/m at 1 km (Directional)

Standard RMS: 2201.05

mV/m at 1 km (Directional Only)

[Nondirectional Tower Subform]

or

[Directional Towers Subform]

7.5. **Nighttime:** ☒ Yes ☐ No
[Nighttime Operation]

7.5. Nighttime Operation

a. Power: 21 kW

b. Antenna Location Coordinates: (NAD 27)

Latitude:

Degrees 40 Minutes 09 Seconds 15 ☒ North ☐ South

Longitude:

Degrees 75 Minutes 22 Seconds 10 ☒ West ☐ East

c. and d.

Complete the appropriate following items. If additional space is needed, please provide the [Exhibit 18]
information requested below in an Exhibit.

☐ Nondirectional ☒ Directional

Theoretical RMS: 1587.35

mV/m per kW at 1 km (Nondirectional)
mV/m at 1 km (Directional)

Standard RMS: 1669.3 (Augmented)

mV/m at 1 km (Directional Only)

[Nondirectional Tower Subform]

or

[Directional Towers Subform]

7.6. **Critical Hours Operation:** ☐ Yes ☒ No
[Critical Hours Operation]

7.7. **Environmental Protection Act.** The proposed facility is excluded from environmental processing under 47. C.F.R. Section 1.1306 (i.e., The facility will not have a significant environmental impact and complies with the maximum permissible radiofrequency electromagnetic exposure limits for controlled and uncontrolled environments). Unless the applicant can determine compliance through the use of the RF worksheets in Appendix A, an **Exhibit is required.**

☒ Yes ☐ No

See Explanation in
[Exhibit 15]

	By checking "Yes" above, the applicant also certifies that it, in coordination with other users of the site, will reduce power or cease operation as necessary to protect persons having access to the site, tower or antenna from radiofrequency electromagnetic exposure in excess of FCC guidelines.	
8.	Please explain in detail the "extraordinary circumstances" which warrant temporary operations at variance from the Commission's Rules. In addition, please specify 1) the specific rules and/or policies from which the applicant seeks temporary relief; 2) how the public interest will be furthered by grant; and 3) the expected duration of the STA and the licensee's plan for restoration of licensed operation. If requesting variance with other than authorized technical facilities, please specify the exact facilities sought.	[Exhibit 16]
9.	Anti-Drug Abuse Act Certification. Applicant certifies that neither applicant nor any party to the application is subject to denial of federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862.	<input checked="" type="radio"/> Yes <input type="radio"/> No

I certify that I have prepared Engineering Data on behalf of the applicant, and that after such preparation, I have examined and found it to be accurate and true to the best of my knowledge and belief.

Name DAVID SHANTZ		Relationship to Applicant (e.g., Consulting Engineer) DIRECTOR OF ENGINEERING	
Signature		Date (mm/dd/yyyy) 09/22/2022	
Mailing Address 4057 RURAL PLAINS CIRCLE, STE 300B			
City FRANKLIN	State or Country (if foreign address) TN	Zip Code 37064 -	
Telephone Number (No dashes or parentheses, include area code) 5109087518	E-Mail Address (if available) DSHANTZ@FAMILYRADIO.ORG		

I hereby certify that the statements in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge that all certifications and attached Exhibits are considered material representations.

Typed or Printed Name of Person Signing THOMAS EVANS	Typed or Printed Title of Person Signing PRESIDENT
Signature	Date (mm/dd/yyyy) 09/22/2022

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

Exhibits

Exhibit 15

Description: WKDN PHILADELPHIA, PA - ENVIRONMENTAL PROTECTION ACT EXHIBIT

THE OPERATION OF WKDN AS PROPOSED UNDER THIS STA REQUEST WILL NOT HAVE A SIGNIFICANT ENVIRONMENTAL IMPACT AND COMPLIES WITH THE MAXIMUM PERMISSIBLE RADIOFREQUENCY ELECTROMAGNETIC EXPOSURE LIMITS FOR CONTROLLED AND UNCONTROLLED ENVIRONMENTS. THE LICENSEE OF WKDN ALSO CERTIFIES THAT IT, IN COORDINATION WITH OTHER USERS OF THE RELEVANT SITE, WILL REDUCE POWER OR CEASE OPERATION AS NECESSARY TO PROTECT PERSONS HAVING ACCESS TO

THE SITE, TOWER OR ANTENNA FROM RADIOFREQUENCY ELECTROMAGNETIC EXPOSURE IN EXCESS OF FCC GUIDELINES.

Attachment 15

Exhibit 16

Description: WKDN PHILADELPHIA, PA - ENGINEERING STA REQUEST EXHIBIT

WKDN (FIN: 25095) LICENSED TO FAMILY STATION, INC. (FSI) TO SERVE THE PHILADELPHIA COMMUNITY, EXPERIENCED POWER MODULE FAILURE ADVERSELY AFFECTING THE STATION AS A RESULT OF DAMAGE FROM A LIGHTNING STRIKE IMPACTING ITS AIR CONDITIONING UNITS AND IS CURRENTLY OPERATING AT ABOUT 14% DAY POWER OF THAT AUTHORIZED (OR 6,000 WATTS) ON 8/23/2022. ITS LICENSEE, FAMILY STATION, INC. (FSI) GAVE THE COMMISSION NOTICE OF ITS LOW POWER STATUS IN A LETTER DATED 9/2/2022.

THE LICENSEE HAS ORDERED NEW HVAC UNITS THAT ARE ANTICIPATED TO ARRIVE WITHIN 17 WEEKS. AFTER INSTALLATION OF SUCH UNITS, RESUMPTION OF ITS LICENSE FACILITIES' OPERATIONS IS ANTICIPATED. IN THE INTERIM, THE LICENSEE RESPECTFULLY REQUESTS COMMISSION GRANT OF AN ENGINEERING STA TO OPERATE WKDN AT REDUCED POWER TO CONTINUE TO SERVE THE PUBLIC INTEREST OF PHILADELPHIA WITH MINIMAL IMPACT.

Attachment 16