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

#### Section I - General Information

1.	Legal Name of the Applicant William Robert Scharnhorst and Kim Paris Scharnhorst					
	Mailing Address					
	719 Oakmont Ave.					
	City Steubenville	State or Country (if foreign address) OH	Zip Code 43952			
	Telephone Number (include area code) 740-278-6966		E-Mail Address (if available)			
	FCC Registration No 0028052363	Call Sign WIXZ	Facility ID Number 73769			
2.	Contact Representative (if other than licensee/permittee) DAN J. ALPERT		Firm or Company Name THE LAW OFFICE OF DAN J. ALPERT			
	Mailing Address 2120 N. 21ST RD.					
	City ARLINGTON	State or Country (if foreign address) VA	ZIP Code 22201 -			
			E-Mail Address (if available) DJA@COMMLAW.TV			
3.	Purpose: Engineering STA					
	Extension of Existing Engineering STA File Number: BSTA-20220411AAB					
	Legal STA					
	Extension of Existing Legal STA					
4.	The state of the s					
5.						
6.						
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.  See Explanation in [Exhibit 33]					
	users of the site, will reduce power	plicant also certifies that it, in coordination with other er or cease operation as necessary to protect persons r antenna from radiofrequency electromagnetic exposure				

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 34]
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.	• Yes No

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 William Robert Scharnhorst	Typed or Printed Title of Person Signing William Robert Scharnhorst	
Signature /William Robert Scharnhorst/	Date (mm/dd/yyyy) 9/22/2022	

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 34

**Description: JUSTIFICATION** 

Due to damage from lightning, the station is operating 250 watts non-directional during the day and 8.75 watts at night non-directionally. Coax needs to be replaced to Tower 2, which is not yet completed due to problems with rocks and concrete floor where an old barn at one time sat and was covered up.

Attachment 34



# Commission Registration System (CORES)

Associate Username to FRN
| Manage Existing
| FRNs & FRN Financial
| Register New FRN | Reset
| FRN Password
| Search for FRN

# **FCC Registration**

 $\underline{\mathsf{FCC}} > \underline{\mathsf{FCC}} \, \mathsf{Registration} > \underline{\mathsf{Manage}} \, \underline{\mathsf{Existing}} \, \underline{\mathsf{FRNs}} > \underline{\mathsf{FRN}} \, \underline{\mathsf{Financial}} > \underline{\mathsf{View}/\mathsf{Pay}} > \mathsf{Payment} \, \mathsf{Confirmation}$ 

Logged In As: dja@commlaw.tv | Logout

# **Online Payment Confirmation**

Print

## **Online Payment Confirmation**

 Total Amount
 \$290.00

 Payer FRN
 0003777588

 Payer Name
 dja@commlaw.tv

 Remittance ID
 3944888

 Treasury Tracking ID
 271V5U20

Thank you for your payment!

View Form159 Go Back

### **Customer Service**

Help Frequently Asked Questions Privacy Statement

FCC Home Page

For assistance, please submit a help request at <a href="https://www.fcc.gov/wireless/available-support-services">https://www.fcc.gov/wireless/available-support-services</a> or call 877-480-3201 (Mon.-Fri. 8 a.m.-6 p.m. ET).

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