

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

**Section I - General Information**

1.	Legal Name of the Applicant <b>William Robert Scharnhorst and Kim Paris Scharnhorst</b>		
	Mailing Address <b>719 Oakmont Ave.</b>		
	City <b>Steubenville</b>	State or Country (if foreign address) <b>OH</b>	Zip Code <b>43952</b>
	Telephone Number (include area code) <b>740-278-6966</b>		E-Mail Address (if available) <b></b>
	FCC Registration No <b>0028052363</b>	Call Sign <b>WIXZ</b>	Facility ID Number <b>73769</b>
2.	Contact Representative (if other than licensee/permittee) <b>DAN J. ALPERT</b>		Firm or Company Name <b>THE LAW OFFICE OF DAN J. ALPERT</b>
	Mailing Address <b>2120 N. 21ST RD.</b>		
	City <b>ARLINGTON</b>	State or Country (if foreign address) <b>VA</b>	ZIP Code <b>22201 -</b>
	Telephone Number (include area code) <b>7032438690</b>		E-Mail Address (if available) <b>DJA@COMMLAW.TV</b>
3.	Purpose: <input type="checkbox"/> Engineering STA <input checked="" type="radio"/> Extension of Existing Engineering STA      File Number: <b>BSTA-20220411AAB</b> <input type="checkbox"/> Legal STA <input type="checkbox"/> Extension of Existing Legal STA		
4.	Service: <b>AM</b>		
5.	Community of License: City: <b>OH</b> State: <b>Steubenville</b>		
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="checkbox"/> Governmental Entity <input type="checkbox"/> Noncommercial Educational Licensee/Permittee <input type="checkbox"/> Other <input checked="" type="radio"/> N/A (Fee Required)		
7.	<b>Environmental Protection Act.</b> 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 <b>Exhibit is required.</b>  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.		<input checked="" type="radio"/> Yes <input type="checkbox"/> No  See Explanation in [Exhibit 33]

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.	<input checked="" type="radio"/> Yes <input type="radio"/> 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 <b>William Robert Scharnhorst</b>	Typed or Printed Title of Person Signing <b>William Robert Scharnhorst</b>
Signature <b>/William Robert Scharnhorst/</b>	Date (mm/dd/yyyy) <b>3/28/2023</b>

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.

All the damaged co-ax is now replaced. The licensee is having problems in tuning the array to the original licensed parameters. The licensee needs additional time to get the array into specs.

Attachment 34



# Commission Registration System (CORES)

Associate Username to FRN  
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## FCC Registration

[FCC](#) > [FCC Registration](#) > [Manage Existing FRNs](#) > [FRN Financial](#) > [View/Pay](#) > Payment 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!

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

THE LAW OFFICE OF DAN J ALPERT  
2120 N 21ST RD  
ARLINGTON, VA 22201  
(703)243-8690

SALE

MasterCard

XXXXXXXXXXXX9546

10/14/2022 12:40:57 AM

Entry Method : Keyed

Invoice : 13645199-15

Approval Code : 04753B

Invoice Total : \$ 290.00

Tax Total : \$ 0.00

=====

Amount Paid : \$ 290.00

I agree to pay above total amount according to card issuer agreement (Merchant agreement if credit voucher)

X

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Customer Copy

Thank You!