

Federal Communications Commission Approved by OMB	Washington, D.C. 20554 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 RADIO BROADCASTING SERVICES, INCORPORATED		
	Mailing Address 288 SOUTH RIVER ROAD		
	City BEDFORD	State or Country (if foreign address) NH	Zip Code 03110
	Telephone Number (include area code) 603-668-6400		E-Mail Address (if available) lisab@nebcast.com
	FCC Registration No 0007598147	Call Sign WRSA	Facility ID Number 34812
2.	Contact Representative (if other than licensee/permittee)		Firm or Company Name
	Mailing Address		
	City	State or Country (if foreign address)	ZIP Code
	Telephone Number (include area code)		E-Mail Address (if available)
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: State: ST. ALBANS VERMONT		
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 type="radio"/> Noncommercial Educational Licensee/Permittee <input type="radio"/> Other <input checked="" 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.	<p>STA is requested for use of</p> <ul style="list-style-type: none"> <input checked="" type="radio"/> Licensed Antenna System with: <ul style="list-style-type: none"> <input type="radio"/> Reduced power <input type="radio"/> Reduced hours of operation <input type="radio"/> Reduced equipment out of service <input type="radio"/> Other variance [Exhibit 13] <input type="radio"/> Antenna system authorized by Construction Permit: - Describe requested modes of operation [Exhibit 14] <input type="radio"/> Emergency wire antenna. Provide a full description in the Exhibit to Question 8. Do not complete the directional or nondirectional tower subforms. <input type="radio"/> Other antenna system: (Complete items 7.1 – 7.7)
7.1	Frequency: 1420 khz
7.2	Class (select one): A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input checked="" type="radio"/>
7.3	Hours of Operation: <input checked="" type="radio"/> Unlimited <input type="radio"/> Limited <input type="radio"/> Daytime <input type="radio"/> Share time <input type="radio"/> Specified Hours: <input type="radio"/>

7.4	Daytime: <input checked="" type="radio"/> Yes <input type="radio"/> No [Daytime Operation] 110 Watts	
7.5	Nighttime: <input checked="" type="radio"/> Yes <input type="radio"/> No [Nighttime Operation] 110 Watts	
7.6	Critical Hours Operation: <input type="radio"/> Yes <input checked="" type="radio"/> 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 RF worksheets in Appendix A, an Exhibit is required. 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="radio"/> No See Explanation in [Exhibit 15]
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 1]
9.	Anti-Drug Abuse 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 682.	<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 AARON ISHMAEL	Relationship to Applicant (e.g., Consulting Engineer) ENGINEER	
Signature 	Date (mm/dd/yyyy) 04/19/2023	
Mailing Address 288 S. RIVER ROAD		
City BEDFORD	State or Country (if foreign address) NH	Zip Code 03110
Telephone Number (no dashes or parenthesis, include area code) 603-668-6400	E-Mail Address (if available) aishmael@radiowyo.com	

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 EDWARD FLANAGAN	Typed or Printed Title of Person Signing PRESIDENT
Signature 	Date (mm/dd/yyyy) 04/20/2023

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 1

Description: Details of Engineering STA Request

WRSA has been under a silent STA due to equipment failure at the transmitter site and since that time staff engineering has been working to get the transmitter back to an operational state. As of April 18, 2023, enough parts were obtained to make the WRSA transmitter capable of producing the licensed nighttime power of 110 watts. As it will be some time before the rest of the parts will be available to bring the transmitter back to its full power capability, we are requesting this STA to operate at 110 watts day and night until the final repairs can be completed in order to serve the community of license of St. Albans Vermont. We believe the rest of the repairs can be made within the next six months.
