

FANVISION ENTERTAINMENT, LLC
60 COLUMBUS CIRCLE
NEW YORK, NEW YORK 10023
TEL. (917) 215-5651

Federal Communications Commission
Media Bureau
Video Division
445 12th Street, S.W.
Washington, DC 20554

**Re: Request for Special Temporary Authority to Operate a Low Power
Television Station on Channel 48 at Norton, Massachusetts**

Dear Sir or Madam:

FanVision Entertainment LLC ("FanVision") hereby respectfully requests Special Temporary Authority to operate a Low Power Television Station on Channel 48 at Norton, Massachusetts for a period of nine (9) days from August 29 – September 6, 2011. FanVision certifies that it will operate the facility in accord with the technical parameters attached hereto as prepared by a certified radio engineer.

FanVision proposes to broadcast Professional Golf Association related programming on a limited basis to the attendees of the PGA Tour's Deutsche Bank Championship event taking place at TPC Boston, a golf course located in Norton, Massachusetts. Because FanVision wishes to broadcast only to those people in the immediate surrounding area of the golf course, FanVision requires a limited service area of a two mile radius from 41-59-05 N, 71-12-58 W.

No one will be harmed by grant of the instant Request. Due to FanVision's proposed limited use of channel 48, it is not likely that FanVision will cause any party significant harmful interference. In the improbable event that FanVision does cause interference to another licensed party, FanVision is aware of its obligation to discontinue service immediately upon discovery of such interference.

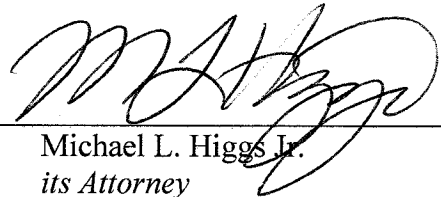
FanVision certifies that it meets all of the qualifications to become a broadcast licensee. FanVision Entertainment LLC is one hundred percent (100%) owned by Stephen M. Ross. Mr. Ross is a United States Citizen. There are no other parties, as defined by the Commission, to this Request.

FanVision, and all parties to this Request, certify that they neither have, nor have had, any interest in, or connection with any broadcast application, or pending broadcast application, in any proceeding where character issues were left unresolved or were resolved adversely against the applicant or parties to the applicant. Neither FanVision, nor any party to this Request, has ever had an adverse finding or final action taken relating to a felony, mass media-related antitrust or unfair competition; fraudulent statements to another governmental unit; or discrimination. FanVision, and all parties to this Request, certify that they are United States Citizens and that the proposed station will offer broadcast program service. Finally, FanVision, and all parties to this Request, certify that they are not subject to denial of federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1998, 21 U.S.C. Section 862.

If you have any questions or require any additional information, please direct them to Mr. Michael L. Higgs Jr., Esq., Higgs Law Group, LLC, 1028 Brice Road, Rockville, Maryland 20852, phone (301) 762-8992, fax (301) 762-8993, e-mail mhiggs@higgslawgroup.com.

Respectfully submitted,
FanVision Entertainment, LLC

By:


Michael L. Higgs Jr.
its Attorney

Dated:

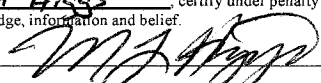
7/6/11

* Application Payment *

READ INSTRUCTIONS CAREFULLY
BEFORE PROCEEDING

FEDERAL COMMUNICATIONS COMMISSION
REMITTANCE ADVICE
FORM 159

Approved by OMB
3060-0589
Page No 1 of 2

(1) LOCKBOX # 979089		SPECIAL USE ONLY	
		FCC USE ONLY	
SECTION A - PAYER INFORMATION			
(2) PAYER NAME (if paying by credit card enter name exactly as it appears on the card) Higgs Law Group, LLC		(3) TOTAL AMOUNT PAID (U.S. Dollars and cents) \$875.00	
(4) STREET ADDRESS LINE NO. 1 1028 Brice Road			
(5) STREET ADDRESS LINE NO. 2			
(6) CITY Rockville		(7) STATE MD	(8) ZIP CODE 20852
(9) DAYTIME TELEPHONE NUMBER (include area code) (301) 762-8992		(10) COUNTRY CODE (if not in U.S.A.)	
FCC REGISTRATION NUMBER (FRN) REQUIRED			
(11) PAYER (FRN) 0009457565		(12) FCC USE ONLY	
IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C) COMPLETE SECTION BELOW FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET			
(13) APPLICANT NAME FanVision Entertainment, LLC			
(14) STREET ADDRESS LINE NO. 1 60 Columbus Circle			
(15) STREET ADDRESS LINE NO. 2			
(16) CITY New York		(17) STATE NY	(18) ZIP CODE 10023
(19) DAYTIME TELEPHONE NUMBER (include area code) (917) 215-5651		(20) COUNTRY CODE (if not in U.S.A.)	
FCC REGISTRATION NUMBER (FRN) REQUIRED			
(21) APPLICANT (FRN) 0019860683		(22) FCC USE ONLY	
COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET			
(23A) CALL SIGN/OTHER ID	(24A) PAYMENT TYPE CODE MGL	(25A) QUANTITY 5	
(26A) FEE DUE FOR (PTC) \$175.00	(27A) TOTAL FEE \$875.00	FCC USE ONLY	
(28A) FCC CODE 1		(29A) FCC CODE 2	
(23B) CALL SIGN/OTHER ID	(24B) PAYMENT TYPE CODE	(25B) QUANTITY	
(26B) FEE DUE FOR (PTC)	(27B) TOTAL FEE	FCC USE ONLY	
(28B) FCC CODE 1		(29B) FCC CODE 2	
SECTION D - CERTIFICATION			
CERTIFICATION STATEMENT I, <u>Michael Higgs</u> , certify under penalty of perjury that the foregoing and supporting information is true and correct to the best of my knowledge, information and belief.			
SIGNATURE <u></u>		DATE <u>7/6/11</u>	
SECTION E - CREDIT CARD PAYMENT INFORMATION			
MASTERCARD _____ VISA _____ AMEX _____ DISCOVER _____			
ACCOUNT NUMBER _____		EXPIRATION DATE _____	
I hereby authorize the FCC to charge my credit card for the service(s)/authorization herein described.			
SIGNATURE _____		DATE _____	

MANUFACTURERS AND TRADERS TRUST COMPANY
REQUEST FOR FUNDS TRANSFER PAYMENT ORDER

06579 Rockville Pike Payment Date: 07/06/11

RECURRING TEMPLATE PAYMENT ORDER:

Template Name:
Amount of Payment:
Additional Information:

ONE TIME PAYMENT ORDER (NO TEMPLATE INVOLVED):

Amount of Payment: \$875.00 ✓
M&T Account to Charge: [REDACTED] ✓
Additional Information:
Currency: US
Cost Center: 6579

Account to Credit: 27000001 ✓
From/By Order Of: HIGGS LAW GROUP

To/For Account Title: FCC

ABA Number: 021030004 ✓
Ref: 0009457565 HIGGS LAW GROUP LLC 301-762-8992 ✓
Application Pay

Test Key:

SOURCE OF FUNDS:

Business Name or Customer Name: *HIGGS LAW GROUP
Authorized Rep(s) of Business: Michael Higgs Jr
Address: 1028 BRICE RD
ROCKVILLE, MD 20852

Telephone No.:

NAME OF BENEFICIARY BANK:

To Bank: TREASURY NYC ✓
Bank Address: (if known) 33 LIBERTY ST
NEW YORK, NY 10045

AUTHORIZATION/ VERIFICATION:

Customer Authorization: *Michael Higgs* *[Signature]*
Print Name of Business or Customer Name Signature of Authorized Rep or Customer Name Title (if applicable)

Customer Authorization: _____
Print Name of Business or Customer Name Signature of Authorized Rep or Customer Name Title (if applicable)

Identification: DL 09/12 H200603488731 MD
Identification:

Customer agrees to the terms & conditions on the In-Person Funds Transfer Agreement provided.

Bank Initiator/Authorized # *Clairice Lopes Ribeiro* *[Signature]* *Br. Mg.*
Print Name Signature Title

Bank Authorized # 2: _____
Print Name Signature Title

Initiator / Authorized # 1 must call in Wire Transfer to PAYMENT SERVICES @ 1-888-672-1000 record below

Person in Payments Services that accepted the Wire Transfer: *Donna* LRN Number: *3050* Time: *1:25 pm*

Record Payment Services Call back information below
First Person in Payments Services that called back to verify Wire Transfer: _____ Branch Verifier: _____ Time: _____

Second Person in Payments Services that called back to verify Wire Transfer: _____ Branch Verifier: _____ Time: _____

CG2

Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0016 (February 2005)	FOR FCC USE ONLY
FCC 346		FOR COMMISSION USE ONLY FILE NO.
APPLICATION FOR AUTHORITY TO CONSTRUCT OR MAKE CHANGES IN A LOW POWER TV, TV TRANSLATOR OR TV BOOSTER STATION		-
Read INSTRUCTIONS Before Filling Out Form		

Section I - General Information

1.	Legal Name of the Applicant FANVISION, INC. <i>Entertainment, LLC</i>		
	Mailing Address 60 COLUMBUS CIRCLE		
	City NEW YORK	State or Country (if foreign address) NY	ZIP Code 10023 -
	Telephone Number (include area code) 9172155651	E-Mail Address (if available)	
	FCC Registration Number:	Call Sign NEW	Facility ID Number 187931
2.	Contact Representative (if other than Applicant) MICHAEL L. HIGGS JR.		Firm or Company Name HIGGS LAW GROUP, LLC
	Mailing Address 1028 BRICE ROAD		
	City ROCKVILLE	State or Country (if foreign address) MD	ZIP Code 20852 -
	Telephone Number (include area code) 3017628992	E-Mail Address (if available) MHIGGS@HIGGSLAWGROUP.COM	
3.	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)		
4.	Facility Information a. <input type="radio"/> Low Power TV Station <input type="radio"/> TV Translator <input type="radio"/> TV Booster <input checked="" type="radio"/> Digital Low Power TV <input type="radio"/> Digital TV Translator b. Community of License: City: NORTON State: MA		
5.	Application Purpose <input checked="" type="radio"/> New station <input type="radio"/> Major Modification of construction permit <input type="radio"/> Major Change in licensed facility <input type="radio"/> Minor Modification of construction permit <input type="radio"/> Minor Change in licensed facility <input type="radio"/> Amendment to pending application <input type="radio"/> Digital Flash Cut <input type="radio"/> Digital Companion Channel <input type="radio"/> Displacement [Exhibit 1] <input type="radio"/> Analog <input type="radio"/> Digital a. File number of original construction permit or pending application: -		

If an amendment, **submit as an Exhibit** a listing by Section and Question Number the portions of the pending application that are being revised.

[Exhibit 2]

NOTE: In addition to the information called for in this section, an explanatory exhibit providing full particulars must be submitted for each question for which a "No" response is provided.

Section II - Legal

1.	Certification. Applicant certifies that it has answered each question in this application based on its review of the application instructions and worksheets. Applicant further certifies that where it has made an affirmative certification below, this certification constitutes its representation that the application satisfies each of the pertinent standards and criteria set forth in the application instructions and worksheets.	<input checked="" type="radio"/> Yes <input type="radio"/> No										
2.	Parties to the Application. List the applicant and all parties to the application. If other than natural persons, list officers, directors, stockholders with interests of 1% or more, general and limited partners and/or members.											
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; vertical-align: top; padding: 2px;"> a. Name and address of the applicant and, if applicable, its officers, directors, stockholders with interests of 1% or greater, or partners (if other than individual also show name, address and citizenship of natural person authorized to vote the stock). List the applicant first, officers next, then directors and, thereafter remaining stockholders and partners. </td> <td style="width: 60%; vertical-align: top; padding: 2px;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; vertical-align: top; padding: 2px;">b.</td> <td style="padding: 2px;">Citizenship.</td> </tr> <tr> <td style="vertical-align: top; padding: 2px;">c.</td> <td style="padding: 2px;">Positional Interest: Officer, director, general partner, limited partner, LLC member, etc.</td> </tr> <tr> <td style="vertical-align: top; padding: 2px;">d.</td> <td style="padding: 2px;">Percentage of votes.</td> </tr> <tr> <td style="vertical-align: top; padding: 2px;">e.</td> <td style="padding: 2px;">Percentage of equity.</td> </tr> </table> </td> </tr> </table>	a. Name and address of the applicant and, if applicable, its officers, directors, stockholders with interests of 1% or greater, or partners (if other than individual also show name, address and citizenship of natural person authorized to vote the stock). List the applicant first, officers next, then directors and, thereafter remaining stockholders and partners.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; vertical-align: top; padding: 2px;">b.</td> <td style="padding: 2px;">Citizenship.</td> </tr> <tr> <td style="vertical-align: top; padding: 2px;">c.</td> <td style="padding: 2px;">Positional Interest: Officer, director, general partner, limited partner, LLC member, etc.</td> </tr> <tr> <td style="vertical-align: top; padding: 2px;">d.</td> <td style="padding: 2px;">Percentage of votes.</td> </tr> <tr> <td style="vertical-align: top; padding: 2px;">e.</td> <td style="padding: 2px;">Percentage of equity.</td> </tr> </table>	b.	Citizenship.	c.	Positional Interest: Officer, director, general partner, limited partner, LLC member, etc.	d.	Percentage of votes.	e.	Percentage of equity.	
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d.	Percentage of votes.											
e.	Percentage of equity.											
	<div style="text-align: center;"> <p>[Enter Parties Information]</p> <p>Parties to the Application</p> <p>Parties to the Application. List the applicant and all parties to the application. If other than natural persons, list officers, directors, stockholders with interests of 1% or more, general and limited partners and/or members.</p> <p>a. Name and address of the applicant and, if applicable, its officers, directors, stockholders with interests of 1% or greater, or partners (if other than individual also show name, address, and citizenship of natural person authorized to vote the stock). List the applicant first, officers next, then directors and, thereafter, remaining stockholders and partners.</p> <p>b. Citizenship.</p> <p>c. Positional Interest: Officer, director, general partner, limited partner, LLC member, etc.</p> <p>d. Percentage of votes.</p> <p>e. Percentage of equity.</p> </div> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 40%;">(a) Name and Address</th> <th style="width: 10%;">(b) Citizenship</th> <th style="width: 15%;">(c) Positional Interest</th> <th style="width: 15%;">(d) Percentage of Votes</th> <th style="width: 20%;">(e) Percentage of Equity</th> </tr> </thead> <tbody> <tr> <td>STEPHEN M. ROSS</td> <td>US</td> <td>MEMBER</td> <td>100</td> <td>100</td> </tr> </tbody> </table>		(a) Name and Address	(b) Citizenship	(c) Positional Interest	(d) Percentage of Votes	(e) Percentage of Equity	STEPHEN M. ROSS	US	MEMBER	100	100
(a) Name and Address	(b) Citizenship	(c) Positional Interest	(d) Percentage of Votes	(e) Percentage of Equity								
STEPHEN M. ROSS	US	MEMBER	100	100								
3.	Character Issues. Applicant certifies that neither applicant nor any party to the application has or has had any interest in or connection with:	<input checked="" type="radio"/> Yes <input type="radio"/> No										

a.any broadcast application in any proceeding where character issues were left unresolved or were resolved adversely against the applicant or party to the application; or b.any pending broadcast application in which character issues have been raised.	See Explanation in [Exhibit 3]
4. Adverse Findings. Applicant certifies that, with respect to the applicant and any party to the application, no adverse finding has been made, nor has an adverse final action been taken related to the following: any felony; mass media-related antitrust or unfair competition; fraudulent statements to another governmental unit; or discrimination.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 4]
5. Alien Ownership and Control. Applicant certifies that it complies with the provisions of Section 310 of the Communications Act of 1934, as amended, relating to interests of aliens and foreign governments.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 5]
6. Program Service Certification. (For Low Power Television Applicants Only) Applicant certifies that this station will offer a broadcast program service.	<input checked="" type="radio"/> Yes <input type="radio"/> No
7. Local Public Notice. (For new station and major change Applicants Only) Applicant certifies that it has or will comply with the public notice requirements of 47 C.F.R. Section 73.3580.	<input checked="" type="radio"/> Yes <input type="radio"/> No
8. Rebroadcast Certification. (For Applicants proposing translator rebroadcasts that are not the licensee of the primary station) Applicant certifies that written authority has been obtained from the licensee of the station whose programs are to be retransmitted.	<input type="radio"/> Yes <input type="radio"/> No
9. Auction Authorization. If the application is being submitted to obtain a construction permit for which the applicant was the winning bidder in an auction, then the applicant certifies, pursuant to 47 C.F.R. Section 73.5005(a), that it has attached an exhibit containing the information required by 47 C.F.R. Sections 1.2107(d), 1.2110(i), 1.2112(a) and 1.2112(b), if applicable.	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A
An exhibit is required unless this question is inapplicable.	[Exhibit 6]
10. 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 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. I hereby waive any claim to the use of any particular frequency as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and request an authorization in accordance with this application. (See Section 304 of the Communications Act of 1934, as amended.)	
Typed or Printed Name of Person Signing STEPHEN M. ROSS	Typed or Printed Title of Person Signing STEPHEN M. ROSS
Signature	Date 7/6/2011

SECTION III - ENGINEERING DATA (Digital)									
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									
1.	Channel Number: 48								
2.	Translator Input Channel No. :								
3.	Primary station proposed to be rebroadcast: <table border="1" data-bbox="175 1730 1436 1771"> <tr> <td>Facility Identifier</td> <td>Call Sign</td> <td>City</td> <td>State</td> <td>Channel</td> </tr> </table>				Facility Identifier	Call Sign	City	State	Channel
Facility Identifier	Call Sign	City	State	Channel					
4.	Antenna Location Coordinates: (NAD 27) Latitude: Degrees 41 Minutes 59 Seconds 05 <input checked="" type="radio"/> North <input type="radio"/> South								

Longitude: Degrees 71 Minutes 12 Seconds 58 <input checked="" type="radio"/> West <input type="radio"/> East																																																																																																											
5.	Antenna Structure Registration Number: <input checked="" type="checkbox"/> Not Applicable [Exhibit 10] <input type="checkbox"/> Notification filed with FAA																																																																																																										
6.	Antenna Location Site Elevation Above Mean Sea Level: 41 meters																																																																																																										
7.	Overall Tower Height Above Ground Level: 14 meters																																																																																																										
8.	Height of Radiation Center Above Ground Level: 13 meters																																																																																																										
9.	Maximum Effective Radiated Power (ERP): 0.08 kW																																																																																																										
10.	Transmitter Output Power: 0.08 kW																																																																																																										
11.	<p>a. Transmitting Antenna: Before selecting Directional "Off-the-Shelf", refer to "Search for Antenna Information" under CDBS Public Access (http://licensing.fcc.gov/prod/cdbs/pubacc/prod/cdbs_pa.htm). Make sure that the Standard Pattern is marked Yes and that the relative field values shown match your values. Enter the Manufacturer (Make) and Model exactly as displayed in the Antenna Search. <input checked="" type="radio"/> Nondirectional <input type="radio"/> Directional "Off-the-shelf" <input type="radio"/> Directional composite</p> <p>Manufacturer KAT Model 767 006</p> <p>b. Electrical Beam Tilt: degrees <input checked="" type="checkbox"/> Not Applicable</p> <p>c. Directional Antenna Relative Field Values: <input checked="" type="checkbox"/> N/A (Nondirectional or Directional "Off-the-shelf")</p> <p>Rotation (Degrees): <input type="checkbox"/> No Rotation</p> <table border="1"> <thead> <tr> <th>Degrees</th><th>Value</th><th>Degrees</th><th>Value</th><th>Degrees</th><th>Value</th><th>Degrees</th><th>Value</th><th>Degrees</th><th>Value</th><th>Degrees</th><th>Value</th></tr> </thead> <tbody> <tr><td>0</td><td></td><td>10</td><td></td><td>20</td><td></td><td>30</td><td></td><td>40</td><td></td><td>50</td><td></td></tr> <tr><td>60</td><td></td><td>70</td><td></td><td>80</td><td></td><td>90</td><td></td><td>100</td><td></td><td>110</td><td></td></tr> <tr><td>120</td><td></td><td>130</td><td></td><td>140</td><td></td><td>150</td><td></td><td>160</td><td></td><td>170</td><td></td></tr> <tr><td>180</td><td></td><td>190</td><td></td><td>200</td><td></td><td>210</td><td></td><td>220</td><td></td><td>230</td><td></td></tr> <tr><td>240</td><td></td><td>250</td><td></td><td>260</td><td></td><td>270</td><td></td><td>280</td><td></td><td>290</td><td></td></tr> <tr><td>300</td><td></td><td>310</td><td></td><td>320</td><td></td><td>330</td><td></td><td>340</td><td></td><td>350</td><td></td></tr> <tr><td colspan="2">Additional Azimuths</td><td colspan="10"></td></tr> </tbody> </table>											Degrees	Value	Degrees	Value	Degrees	Value	Degrees	Value	Degrees	Value	Degrees	Value	0		10		20		30		40		50		60		70		80		90		100		110		120		130		140		150		160		170		180		190		200		210		220		230		240		250		260		270		280		290		300		310		320		330		340		350		Additional Azimuths											
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Relative Field Polar Plot

NOTE: In addition to the information called for in this section, an explanatory exhibit providing full particulars must be submitted for each question for which a "No" response is provided.	
12.	Out-of-channel Emission Mask: <input type="radio"/> Simple <input checked="" type="radio"/> Stringent
CERTIFICATION	
13.	<p>Interference : The proposed facility complies with all of the following applicable rule sections. 47.C.F.R Sections 74.709, 74.793(e), 74.793(f), 74.793(g), 74.793(h), 74.794(b) and 73.1030.</p> <p style="text-align: right;"><input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 11]</p>
14.	<p>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 RF compliance, an Exhibit is required.</p> <p style="text-align: right;"><input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 12]</p> <p>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</p>

the site, tower or antenna from radiofrequency electromagnetic exposure in excess of FCC guidelines.

15. **Channels 52-59.** If the proposed channel is within channels 52-59, the applicant certifies compliance with the following requirements, as applicable:

- ☐ The applicant is applying for a digital companion channel for which no suitable channel from channel 2-51 is available.
- ☐ Pursuant to Section 74.786(d), the applicant has notified, within 30 days of filing this application, all commercial wireless licenses of the spectrum comprising the proposed TV channel and the first adjacent channels thereto, for which the proposed digital LPTV or TV translator antenna site lies inside the licensed geographic boundaries of the wireless licensees or within 75 miles and 50 miles, respectively, of the geographic boundaries of co-channel and adjacent-channel wireless licensees.

16. **Channels 60-69.** If the proposed channel is within channels 60-69, the applicant certifies compliance with the following requirements, as applicable:

- ☐ Pursuant to Section 74.786(e), the applicant has notified, within 30 days of filing this application, all commercial wireless licenses of the spectrum comprising the proposed TV channel and the first adjacent channels thereto, for which the proposed digital LPTV or TV translator antenna site lies inside the licensed geographic boundaries of the wireless licensees or within 75 miles and 50 miles, respectively, of the geographic boundaries of co-channel and adjacent-channel wireless licensees.
- ☐ Pursuant to Section 74.786(e), the applicant proposing operation on channel 63, 64, 68 and 69 ("public safety channels") has secured a coordinated spectrum use agreements(s) with 700 MHz public safety regional planning committee(s) and state administrator(s) of the region(s) and state(s) within which the antenna site of the digital LPTV or TV translator station is proposed to locate, and those adjoining regions and states with boundaries within 75 miles of the proposed station location.
- ☐ Pursuant to Section 74.786(e), the applicant for a channel adjacent to channel 63, 64, 68 or 69 has notified, within 30 days of filing this application, the 700 MHz public safety regional planning committee(s) and state administrator(s) of the region and state containing the proposed digital LPTV or TV translator antenna site and regions and states whose geographic boundaries lie within 50 miles of the proposed LPTV or TV translator antenna site.

PREPARERS CERTIFICATION ON PAGE 3 MUST BE COMPLETED AND SIGNED.

SECTION III PREPARER'S CERTIFICATION

I certify that I have prepared Section III (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 MEL FREEDMAN		Relationship to Applicant (e.g., Consulting Engineer) CONSULTING RADIO ENGINEER	
Signature		Date 6/22/2011	
Mailing Address 2612 PORTSMOUTH LANE			
City MODESTO	State or Country (if foreign address) CA		Zip Code 95355 - 3915

Telephone Number (include area code) 2095221180	E-Mail Address (if available) MELENGR@SBCGLOBAL.NET
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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

A routine check of the coordinates, heights, and structure type you provided indicates that this structure does not require registration.

*** NOTICE ***

TOWAIR's findings are not definitive or binding, and we cannot guarantee that the data in TOWAIR are fully current and accurate. In some instances, TOWAIR may yield results that differ from application of the criteria set out in 47 C.F.R. Section 17.7 and 14 C.F.R. Section 77.13. A positive finding by TOWAIR recommending notification should be given considerable weight. On the other hand, a finding by TOWAIR recommending notification either for or against notification is not conclusive. It is the responsibility of each ASR participant to exercise due diligence to determine if it must coordinate its structure with the FAA. TOWAIR is only one tool designed to assist ASR participants in exercising this due diligence, and further investigation may be necessary to determine if FAA coordination is appropriate.

DETERMINATION Results

PASS SLOPE(100:1)NO FAA REQ - 1909.0 Meters (6263.05 Feet)away & below slope by 0.0 Meters (0.0 Feet)

Type	C/R	Latitude	Longitude	Name	Address	Lowest Elevation (m)	Runway Length (m)
AIRP	R	41-59- 56.00N	071-12- 11.00W	MANSFIELD MUNI	BRISTOL MANSFIELD, MA	36.6	1066.8

PASS SLOPE(100:1)NO FAA REQ - 2295.0 Meters (7529.43 Feet)away & below slope by 4.0 Meters (13.1199 Feet)

Type	C/R	Latitude	Longitude	Name	Address	Lowest Elevation (m)	Runway Length (m)
AIRP	R	42-00- 9.00N	071-12- 7.00W	MANSFIELD MUNI	BRISTOL MANSFIELD, MA	36.6	1066.8

Your Specifications

NAD83 Coordinates

Latitude 41-59-05.0 north

Longitude 071-12-58.0 west

Measurements (Meters)

Overall Structure Height (AGL) 14

Support Structure Height (AGL) 0

Site Elevation (AMSL) 41

Structure Type

TOWER - Free standing or Guyed Structure used for Communications Purposes