





ANDREW S. KERSTING REGULATORY COUNSEL

(404) 260-6761 ANDY.KERSTING@CUMULUS.COM

February 26, 2019

Accepted / Filed

FEB 26 2019

Federal Communications Commission Office of the Secretary

By Hand

Marlene H. Dortch, Esq.
Secretary
Federal Communications Commission
445 12<sup>th</sup> Street, SW
Washington, DC 20554
Attn: Audio Division

1667834810

Re:

**Application for Broadcast Station License** 

Cumulus Licensing LLC WXQW(AM), Fairhope, AL Facility ID 2541

Dear Ms. Dortch:

Transmitted herewith in triplicate on behalf of Cumulus Licensing LLC, licensee of radio station WXQW(AM), Fairhope, Alabama, is an application submitted on FCC Form 302-AM seeking a new broadcast station license.

Please note that the associated filing fee for this application was paid via the FCC Fee Filer. Accordingly, proof of payment of that filing fee has been included with this submission.

Should any questions arise concerning this application, please contact the undersigned.

Sincerely,

Andrew S. Kersting Regulatory Counsel

Enclosure

# Agency Tracking ID:PGC3215629 Authorization Number:263460 Successful Authorization -- Date Paid: 2/26/19 FILE COPY ONLY!!

| READ INSTRUCTIONS<br>CAREFULLY BEFORE  | REMITTANCE ADVICE   |   | APPROVED BY OMB<br>3060-059                        |                               |  |
|--|---|---|--|-------------------------------|--|
| PROCEEDING   | FORM 159  |   | SPECIA   |                               |  |
|  | PAGE NO 1 OF  |   | ECC III  | SE ONLY                       |  |
| (1) LOCKBOX #979089  | Machorori   |   | FCC US   | SEONLY                        |  |
|  | SECTION A - P   | ayer Information                                |  |                               |  |
| (2) PAYER NAME (if paying by credit card, enter name exactly as it appears on your card)  Cumulus Media Inc. |   |   | (3) TOTAL AMOUNT PAID (dollars and cents) \$725.00 |                               |  |
| (4) STREET ADDRESS LINE NO. 1 3280 Peachtree Road, NW  |   |   |  |                               |  |
| (5) STREET ADDRESS LINE NO. 2<br>Suite 2200  |   |   |  |                               |  |
| (6) CITY<br><b>Atlanta</b>   |   | (7) ST<br><b>GA</b>                             | ATE  | (8) ZIP CODE<br><b>30305</b>  |  |
| (9) DAYTIME TELEPHONE NUMBE <b>404-9490700</b>   | ER (INCLUDING AREA CODE)  | (10) COUNTRY CO<br>US                           | DE (IF NOT IN I                                    | U.S.A.)                       |  |
|  | REGISTRATION NUMBER (FRN) AND TAX                                   |   | R (TIN) REQUI                                      | RED                           |  |
| (11) PAYER (FRN)<br><b>0009621244</b>  |   | (12) FCC USE ONLY                               |  |                               |  |
| IF F   | PAYER NAME AND THE APPLICANT NAM<br>IF MORE THAN ONE APPLICANT, USE | IE ARE DIFFERENT, COMP<br>CONTINUATION SHEETS ( | LETE SECTION<br>FORM 159-C)                        | N B                           |  |
| (13) APPLICANT NAME  Cumulus Licensing LLC   |   |   |  |                               |  |
| (14) STREET ADDRESS LINE NO. 1<br>3280 Peachtree Road, N.W.  |   |   |  |                               |  |
| (15) STREET ADDRESS LINE NO. 2<br>Suite 2200   |   |   |  |                               |  |
| (16) CITY<br>Atlanta   |   | (17) ST<br><b>GA</b>                            | ATE  | (18) ZIP CODE<br><b>30305</b> |  |
| (19) DAYTIME TELEPHONE NUME<br>404-9490700   | BER (INCLUDING AREA CODE)   | (20) COUNTRY CO                                 | ODE (IF NOT IN                                     |                               |  |
| FCC I  | REGISTRATION NUMBER (FRN) AND TAX                                   | IDENTIFICATION NUMBI                            | ER (TIN) REQUI                                     | RED                           |  |
| (21) APPLICANT (FRN)<br>0002834810   |   | (22) FCC USE ONLY                               |  |                               |  |
| COMPLETE   | SECTION C FOR EACH SERVICE, IF MOI                                  | RE BOXES ARE NEEDED, U                          | SE CONTINUAT                                       | TION SHEET                    |  |
| (23A) FCC Call Sign/Other ID   | wxqw  | (24A) Payment Type Code(PT(<br>MM)              | ,  | (25A) Quantity<br>1           |  |
| (26A) Fee Due for (PTC)  | \$725.00  | (27A) Total Fee <b>\$725.</b> 0                 | 00   | FCC Use Only                  |  |
| (28A) FCC CODE 1 25  | 541 (29A)   | FCC CODE 2                                      | CForm302-A   | M                             |  |
| (23B) FCC Call Sign/Other ID   |   | (24B) Payment Type Code(PTC                     | 2)   | (25B) Quantity                |  |
| (26B) Fee Due for (PTC)  |   | (27B) Total Fee                                 |  | FCC Use Only                  |  |
| (28B) FCC CODE 1   | B) FCC CODE 1 (29B) FCC CODE 2                                      |   |  |                               |  |

**Federal Communications Commission** Washington, D. C. 20554

**FCC 302-AM** 

APPLICATION FOR AM

**BROADCAST STATION LICENSE** 

(Please read instructions before filling out form.

Approved by OMB 3060-0627 Expires 01/31/98

FOR FCC USE ONLY

Accepted / Filed

FEB 26 2019

Federal Communications Commission Office of the Secretary

# FOR COMMISSION USE ONLY

FILE NO. RC-20180228AAX

| SECTION I - APPLICANT FEE                                | INFORMATION                           |                                    |                         |                             |
|--|---------------------------------------|------------------------------------|-------------------------|-----------------------------|
| 1. PAYOR NAME (Last, First, Mid                          | idle Initial)                         |                                    |                         |                             |
| Cumulus Licensing LLC                                    |                                       |                                    |                         |                             |
| MAILING ADDRESS (Line 1) (Max<br>3280 PEACHTREE ROAD, NW | ximum 35 characters)                  |                                    |                         |                             |
| MAILING ADDRESS (Line 2) (Max<br>SUITE 2200              | ximum 35 characters)                  |                                    |                         |                             |
| CITY<br>Atlanta  |                                       | STATE OR COUNTRY (if for GA        | reign address)          | ZIP CODE<br>30305           |
| TELEPHONE NUMBER (include a<br>(404) 949-0700            | area code)                            | CALL LETTERS<br>WXQW               | OTHER FCC IDE           | ENTIFIER (If applicable)    |
| 2. A. Is a fee submitted with this a                     | pplication?                           |                                    |                         | ✓ Yes No                    |
| B. If No, indicate reason for fee                        | exemption (see 47 C.F.R. Section      |                                    |                         |                             |
| Governmental Entity                                      | Noncommercial educ                    | cational licensee Ot               | her (Please explain     | n).                         |
| _  |                                       | battorial ilectione                | and the located explain | 7.                          |
| C. If Yes, provide the following is                      | nformation:                           |                                    |                         |                             |
| Enter in Column (A) the correct Fo                       | ee Type Code for the service you      | are applying for. Fee Type Co      | des may be found        | in the "Mass Media Services |
| Fee Filing Guide." Column (B) list                       | s the Fee Multiple applicable for the | is application. Enter fee amour    | nt due in Column (0     | O).                         |
|  |                                       |                                    |                         |                             |
| (A)  | (B)                                   | (C)                                |                         |                             |
| FEE TYPE   | FEE MULTIPLE                          | FEE DUE FOR FEE                    |                         | FOR FCC USE ONLY            |
| MMR  | 0 0 0 1                               | \$ 725.00                          |                         |                             |
| IVI IVI IX   | 0 0 0 1                               | Ψ 725.00                           |                         |                             |
| To be used only when you are requ                        | esting concurrent actions which re-   | sult in a requirement to list more | e than one Fee Typ      | pe Code.                    |
| (A)  | (B)                                   | (C)                                |                         |                             |
|  | 0 0 0 1                               | \$                                 |                         | FOR FCC USE ONLY            |
|  | 0 0 0 1                               |                                    |                         |                             |
| 7-1  |                                       |                                    |                         |                             |
|  |                                       | TOTAL AMOUNT                       |                         |                             |
| ADD ALL AMOUNTS SHOWN IN AND ENTER THE TOTAL HERE.       | COLUMN C,                             | REMITTED WITH THI APPLICATION      | IS                      | FOR FCC USE ONLY            |
| THIS AMOUNT SHOULD EQUAL                                 | YOUR ENCLOSED                         | \$ 725.00                          |                         |                             |
| REMITTANCE.  |                                       |                                    |                         |                             |

| SECTION II - APPLICAN   | IT INFORMATION   |   |  |  |  |            |
|---|--|---|--|--|--|------------|
| 1. NAME OF APPLICANT CUMULUS LICENSING  | LLC  |   |  |  |  |            |
| MAILING ADDRESS<br>3280 PEACHTREE ROA   | AD, NW, SUITE 2200   | 1   |  |  | The Control of the Co |            |
| CITY Atlanta  |  |   | STATE GA   | ,  | ZIP CODE<br>30305  |            |
| 2. This application is for:   | Commercial  AM Direct  | ional   | Noncomr  | nercial<br>Ion-Directional   |  |            |
| Call letters WXQW   | Community of License Fairhope, AL  |   | ion Permit File No.<br>170118ABN   | Modification of Construction<br>Permit File No(s).<br>N/A  | Expiration Date of L<br>Construction Permi<br>May 31, 2020   |            |
| 3. Is the station in accordance with 47 C.F.  If No, explain in an Exh  |  | to auto   | matic program  | test authority in  | ✓ Yes Exhibit No.  | No         |
| construction permit bee   |  | itions s  | et forth in the  | above described  | Yes Exhibit No.  | No         |
| the grant of the under  | in an Exhibit.  Iges already reported, has alying construction permited in the construction permited in the construction perm  | which v   | would result in  | any statement or   | Yes 🗸  | No         |
| If Yes, explain in an Ex  | chibit.  |   |  |  | Exhibit No.  |            |
|   | led its Ownership Report (ince with 47 C.F.R. Section  |   |  | ership   | ✓ Poes not a   | No<br>pply |
| If No, explain in an Exhi   | ibit.  |   |  |  | Exhibit No.  |            |
| or administrative body v<br>criminal proceeding, bro  | ling been made or an advention with respect to the applicant ought under the provisions elated antitrust or unfair unit; or discrimination?  | nt or pa  | rties to the appli<br>law relating to t  | cation in a civil or<br>he following: any  | Yes √  | No         |
| involved, including an ic<br>(by dates and file num<br>information has been<br>required by 47 U.S.C. S<br>of that previous submis<br>the call letters of the st | attach as an Exhibit a full dentification of the court or obers), and the disposition earlier disclosed in consection 1.65(c), the applica sion by reference to the fitation regarding which the of filing; and (ii) the disposi | admining of the nection and need ile number applications. | strative body ar<br>litigation. Wh<br>with another a<br>only provide: (<br>per in the case<br>ation or Section | nd the proceeding nere the requisite application or as in identification of an application, and an application, application. | Exhibit No.  |            |

| 8. Does the applicant, or any party to the application, have a the expanded band (1605-1705 kHz) or a permit or license expanded band that is held in combination (pursuant to the 5 with the AM facility proposed to be modified herein?   | either in the existing band  | l or   |
|---|--|--|
| If Yes, provide particulars as an Exhibit.  |  | Exhibit No.  |
| The APPLICANT hereby waives any claim to the use of any against the regulatory power of the United States because requests and authorization in accordance with this application amended).  | use of the same, whet  | her by license or otherwise, and   |
| The APPLICANT acknowledges that all the statements maderial representations and that all the exhibits are a material  | de in this application and all part hereof and are inco  | attached exhibits are considered rporated herein as set out in full in   |
| CERTIFIC  | CATION   |  |
| 1. By checking Yes, the applicant certifies, that, in the case of she is not subject to a denial of federal benefits that incluto Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U. case of a non-individual applicant (e.g., corporation, partners association), no party to the application is subject to a definctudes FCC benefits pursuant to that section. For the definition purposes, see 47 C.F.R. Section 1.2002(b). | ides FCC benefits pursual S.C. Section 862, or, in the ship or other unincorporate in all of federal benefits the inition of a "party" for the section in th | nt<br>ne<br>ed<br>at<br>se   |
| and are made in good faith.   |  | The state of the s |
| Name Richard S. Denning   | Signature (Adent) Con  | nes  |
| Executive Vice President & General Counsel  | Date<br>February 25, 2019  | Telephone Number (404) 949-0700  |
| WILLFUL FALSE STATEMENTS ON THIS FORM ARI<br>(U.S. CODE, TITLE 18, SECTION 1001), AND/OR<br>CONSTRU   | REVOCATION OF ANY  | E AND/OR IMPRISONMENT<br>STATION LICENSE OR  |

FCC NOTICE TO INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

The solicitation of personal information requested in this application is authorized by the Communications Act of 1934, as amended. The Commission will use the information provided in this form to determine whether grant of the application is in the public interest. In reaching that determination, or for law enforcement purposes, it may become necessary to refer personal information contained in this form to another government agency. In addition, all information provided in this form will be available for public inspection. If information requested on the form is not provided, the application may be returned without action having been taken upon it or its processing may be delayed while a request is made to provide the missing information. Your response is required to obtain the requested authorization.

Public reporting burden for this collection of information is estimated to average 639 hours and 53 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, can be sent to the Federal Communications Commission, Records Management Branch, Paperwork Reduction Project (3060-0627), Washington, D. C. 20554. Do NOT send completed forms to this address.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, P.L. 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3), AND THE PAPERWORK REDUCTION ACT OF 1980, P.L. 96-511, DECEMBER 11, 1980, 44 U.S.C. 3507.

| PURPOSE OF   | AUTHORIZATION APPLIED FOR   | : (check one)   | P TA COTT THE PERSON AS A TO   | n a en an a  | r Gerin M   |  |
|--|---|---|--|--|---|--|
| 7  | Station License   | Direct Mea  | asurement of Power   |  |   |  |
| n <sup>a</sup> n n   | uthorized in construction permit  |   |  |  | - 1211  |  |
| Call Sign<br>WXQW  | File No. of Construction Permit<br>(if applicable)<br>BP-20170118ABN  | Frequency<br>(kHz) 660  | Hours of Operation Unlimited   | Night 0.019  | Day 10.0  |  |
| 2. Station loca  | ation   |   |  |  |   |  |
| State<br>Alabama   |   |   | City or Town Fairhope  |  |   |  |
| 3. Transmitter   | rlocation   |   |  |  |   |  |
| State County AL Baldwin  |   | City or Town Daphne   |  | Street address<br>(or other identification)<br>104 Newman Lane |   |  |
| 4. Main studio   | olocation   |   |  |  |   |  |
| State<br>AL  | tate County   |   | City or Town<br>Mobile   | Street address<br>(or other identifi<br>2800 Dauph             | cation)<br>in Rd., Ste 104  |  |
| 5. Remote co   | entrol point location (specify only if a  | uthorized directio  | nal antenna)   |  |   |  |
| State  | 1,2 1,1   | County  |  | Street address   | Street address (or other identification)  |  |
| 6. Has type-a  | approved stereo generating equipme  |   |  |  | Yes No  |  |
| 6. Has type-a 7. Does the s  | pproved stereo generating equipme   | ents of 47 C.F.R.   | ?<br>Section 73.68?  | (or other identif  | Yes V No  |  |
| <ul><li>6. Has type-a</li><li>7. Does the s</li><li>Attach as ar</li></ul>   | approved stereo generating equipme<br>campling system meet the requirement<br>on Exhibit a detailed description of the  | ents of 47 C.F.R.   | ?<br>Section 73.68?  | (or other identif  | Yes No Yes No Not Applicable  |  |
| 6. Has type-a 7. Does the s Attach as ar 8. Operating RF common p  | approved stereo generating equipme sampling system meet the requirement in Exhibit a detailed description of the constants:   | ents of 47 C.F.R. e sampling syster   | ?<br>Section 73.68?  | (or other identif  | Yes V No Yes No Not Applicable thibit No. N/A                                   |  |
| 6. Has type-a 7. Does the s Attach as ar 8. Operating RF common p modulation for Measured ant operating freq Night                   | approved stereo generating equipme sampling system meet the requirement in Exhibit a detailed description of the constants:  point or antenna current (in amperes in right system  1.0  tenna or common point resistance (in page 1)  | ents of 47 C.F.R. e sampling system  i) without n ohms) at                        | RF common point or an modulation for day system.  Measured antenna or coperating frequency.                      | tenna current (in ampe   | Yes V No Yes No Not Applicable thibit No. N/A  res) without                     |  |
| 6. Has type-a 7. Does the s Attach as ar 8. Operating RF common p modulation for Measured ant operating freq Night 18.               | approved stereo generating equipmes ampling system meet the requirement in Exhibit a detailed description of the constants:  point or antenna current (in amperes in right system  1.0  tenna or common point resistance (in puency  Day  18.   | ents of 47 C.F.R. e sampling system  i) without n ohms) at                        | RF common point or an modulation for day system Measured antenna or coperating frequency                         | tenna current (in ampe   | Yes / No Yes No Not Applicable chibit No. N/A                                   |  |
| 6. Has type-a 7. Does the s Attach as ar 8. Operating RF common p modulation for Measured ant operating freq Night 18. Antenna indic | approved stereo generating equipmes campling system meet the requirement in Exhibit a detailed description of the constants:  constants: coint or antenna current (in amperest right system  1.0 tenna or common point resistance (in guency Day .5 18.stations for directional operation Antenna                       | ents of 47 C.F.R. e sampling system  i) without n ohms) at                        | RF common point or an modulation for day system.  Measured antenna or coperating frequency.                      | tenna current (in amperem 23,2 common point reactance Day      | Yes V No Yes No Not Applicable thibit No. N/A  res) without                     |  |
| 6. Has type-a 7. Does the s Attach as ar 8. Operating RF common p modulation for Measured ant operating freq Night 18. Antenna indic | approved stereo generating equipments ampling system meet the requirement in Exhibit a detailed description of the constants:  Doint or antenna current (in amperest in right system  1.0  Deenna or common point resistance (in puency  Day  18.0  Antenna   | ents of 47 C.F.R. e sampling system b) without n ohms) at                         | RF common point or an modulation for day system Measured antenna or coperating frequency Night -j42.5            | tenna current (in amperem 23.2 common point reactance Day -j   | Yes V No Yes No Not Applicable chibit No. N/A  res) without e (in ohms) at      |  |
| 6. Has type-a 7. Does the s Attach as ar 8. Operating RF common p modulation for Measured ant operating freq Night 18. Antenna indic | approved stereo generating equipment ampling system meet the requirement in Exhibit a detailed description of the constants:  constants:  coint or antenna current (in amperes in right system  1.0  tenna or common point resistance (in quency  Day  5 18.6  attions for directional operation  Antenna phase reading | ents of 47 C.F.R. e sampling system b) without n ohms) at monitor g(s) in degrees | RF common point or an modulation for day system operating frequency Night   Antenna monitor sam current ratio(s) | tenna current (in amperem 23.2 pmmon point reactance Day -j    | Yes V No Yes No Not Applicable chibit No. N/A  res) without e (in ohms) at 42.5 |  |
| 6. Has type-a 7. Does the s Attach as ar 8. Operating RF common p modulation for Measured ant operating freq Night 18. Antenna indic | approved stereo generating equipment ampling system meet the requirement in Exhibit a detailed description of the constants:  constants:  coint or antenna current (in amperes in right system  1.0  tenna or common point resistance (in quency  Day  5 18.6  attions for directional operation  Antenna phase reading | ents of 47 C.F.R. e sampling system b) without n ohms) at monitor g(s) in degrees | RF common point or an modulation for day system operating frequency Night   Antenna monitor sam current ratio(s) | tenna current (in amperem 23.2 pmmon point reactance Day -j    | Yes No Yes No Not Applicable thibit No. N/A  res) without e (in ohms) at 42.5   |  |

## SECTION III - Page 2

9. Description of antenna system ((f directional antenna is used, the information requested below should be given for each element of the array. Use separate sheets if necessary.)

| Type Radiator guyed, uniform, cross-section steel radiator | Overall height in meters of radiator above base insulator, or above base, if grounded.  64.6 | Overall height in meters above ground (without obstruction lighting) | Overall height in mabove ground (included obstruction lighting) | ude loaded or sectionalized,      |
|--|--|--|---|-----------------------------------|
| Excitation   | ✓ Series   | Shunt  | ates of center of array   | For single vertical radiator give |
| tower location.  |  |  |   |                                   |
| North Latitude 3   | 35 '   | 50 " West Longit   | 100e 8/   | 52 58 "                           |
|  | bove, attach as an Exhibit furt<br>ower and associated isolation of                          |  | including any other   | Exhibit No.<br>N/A                |
| Also, if necessary for dimensions of ground                | a complete description, atta   | ch as an Exhibit a sketch  | of the details and  | Exhibit No.<br>N/A                |
| 10. In what respect, if                                    | any, does the apparatus cons   | tructed differ from that descri                                      | ribed in the application  | for construction permit or in the |
| permit2  | gineering statement  |  |   |                                   |
| OCC CITY   | gineering statement  | trogularing contain  |   |                                   |
|  |  |  |   |                                   |
| 11 Give reasons for t                                      | he change in antenna or comm   | non point resistance.  |   |                                   |
|  | in the night from a  |  | a to a nondire  | ctional antenna                   |
| Change   | III the riight from a  | directional anterm   | a to a nonano   | ottoria: antonna.                 |
|  |  | ц  |   |                                   |
| I will the I   | -4 the southeast in the consoli  | u indicated below and that   | I have examined the   | foregoing statement of technica   |
| information and that it                                    | is true to the best of my knowle   | edge and belief.   | I flave examined the  | foregoing statement of technica   |
|  |  |  | - 1/2   | Ox a                              |
| Name (Please Print or                                      |  | signature (cr  | neck appropriate box  | (Selow)                           |
| Cynthia M. Jac   |  | ynru   | at the of   | NIAIA MARIE                       |
| Address (include ZIP (                                     |  | Date   | OF 2040 *H  | Lic. No. 027914                   |
| Carl T. Jones C  | Corporation  | Februa   | ry 25, 2019 强   | 0.02/914                          |
| 7901 Yarnwood  | Court  | Telephone N  | lo. (Include Area Conto   |                                   |
| Springfield, VA  | 22153  | (703) 5  | 669-7704  | ONAL TENTOTE DE                   |
|  |  |  |   | 36.803486VSa                      |
| Technical Direct   | or   | √ Registe  | ered Professional Eng   | ineer                             |
| 1111   |  | النبا  |   |                                   |
| Chief Operator   |  | Technic  | cal Consultant  |                                   |
|  |  |  |   |                                   |

FCC 302-AM (Page 5) August 1995

# ENGINEERING EXHIBIT IN SUPPORT OF AN APPLICATION FOR LICENSE WXQW(AM) - FAIRHOPE, ALABAMA 660 kHz - 10.0 KW DAY/ 0.019 kW NIGHT - ND-U FACILITY ID: 2541

Licensee: Cumulus Licensing LLC

February, 2019





ENGINEERING STATEMENT OF CYNTHIA M. JACOBSON, P.E.
IN SUPPORT OF AN
APPLICATION FOR LICENSE
WXQW - FAIRHOPE, ALABAMA
660 kHz - 10.0 kW DAY/0.019 kW NIGHT - ND-U
FACILITY ID: 2514

Applicant: Cumulus Licensing LLC

I am a Radio Engineer, an employee in the firm of Carl T. Jones Corporation, with offices located in Springfield, Virginia.

My education and experience are a matter of record with the Federal Communications Commission. I am a Registered Professional Engineer in the Commonwealth of Virginia, Registration No. 027914.

### **GENERAL**

This office has been authorized by Cumulus Licensing LLC ("Cumulus"), licensee of Standard Broadcast Station WXQW, Fairhope, Alabama, to prepare this statement and FCC Form 302-AM (Section III) in support of an Application for License to cover the facilities authorized in the outstanding construction permit, FCC File No. BP-20170118ABN.

WQXW is licensed to operate on 660 kHz with a power of 10.0 kW daytime using a nondirectional antenna and 0.85 kW nighttime using a three tower directional antenna.

tel: (703) 569-7704

fax: (703) 569-6417

email: info@ct/c.com

www.ctjc.com

The outstanding construction permit authorizes a reduction in the night power to 0.019 kW while using a nondirectional antenna. Both day and night nondirectional modes will use the most southern tower, ASR # 1055372. The center tower has been removed and the northern tower has been de-tuned. A slight correction in coordinates was necessary to specify the actual nondirectional tower versus the previous center of array for the directional array.

The construction permit authorization contained a condition requiring a partial proof-or-performance to establish that the radiation pattern is essentially omnidirectional. Subsequent conversations by this office with the FCC staff determined that the condition was unnecessary, provided that the north tower was properly detuned. The north tower has been successfully detuned so as not to have an effect on the nondirectional operation.

The base impedance of the nondirectional tower was measured at Z = 18.5 – j42.5 ohms. The WXQW transmitter output has been adjusted such that the nondirectional base current indicates 23.2 amperes for the daytime power level of 10,000 Watts and 1.0 amperes for the nighttime power level of 19 Watts.

## <u>SUMMARY</u>

It is submitted that the WXQW antenna system is in full compliance with the terms of the station's construction permit.

STATEMENT OF CYNTHIA M. JACOBSON, P.E. WXQW – FAIRHOPE, ALABAMA Page 3 of 3

The engineering statement and Section III of FCC Form 302-AM were prepared by me or under my direct supervision and are believed to be true and correct.

DATED: February 25, 2019