FCC Form 854 Main Form

Purpose of Filing

1) Enter the application purpose: (NT)

Approved by OMD – 3060-0139 See instructions for public burden estimate

Application for Antenna Structure Registration

AM – Amendment of a Pending Application AU – Administrative Update CA – Cancellation of an Antenna Structure Registrati DI – Notification of an Antenna Structure Dismantlem DU – Request for a Duplicate Antenna Structure Registration MD – Modification of a Antenna Structure Registration	NE – Registration of a New Anten NT – Required Construction/Alter OC – Ownership Change RE – Registration of a Replaceme WD – Withdrawal of a Pending Ap	ation Notification ent Antenna Structure	
2a) If the answer to 1 is AU, CA, DI, DU, MD, NT, O Registration (ASR) Number.	FCC ASR Number: 1061651		
2b) If the answer to 1 is AM or WD, provide the File	File Number:		
2c) If the answer to 1 is MD or NT, provide the date was last altered (mm/dd/yyyy).	Date: 01/01/1962		
2d) If the answer to 1 is DI, provide the date the Antonia	Date:		
Antenna Structure Ownership Information			,
3) Select one of the entity types:			
() Individual () Unincorporated Asso) Trust () Government Entity		
(X) Corporation () Limited Liability Com	pany () General Partnership () Lim	nited Partnership
() Consortium () Limited Liability Partnership () Other:			
4) FCC Registration Number (FRN): 0002433340	5) Assignor FCC Registration Number (FRN):		
6) First Name (if individual):	MI:	Last Name:	Suffix:
7) Legal Entity Name (if not an individual): Duhamel Broadcasting Enterprises			
8) Attention To:		9) P.O. Box:	And/Or
10a) Street Address 1:	10b) Street Ad	ddress 2:	
518 St. Joseph Street	-		
11) City: Rapid City	12) State: SD	13) Zip Code: 57701	
14) Telephone Number (xxx-xxx-xxxx): (605) 342-2000		15) Fax Number: (xxx-xxx-xxxx):	
16) E-mail Address:			
looskota@kotatv.com			

Contact Representative Information				
17) First Name (if individual): Monte	MI:	Last Name: Loos		Suffix:
18) Business Name: Duhamel Broadcasting Enterprises	<u> </u>			I
19) Attention To:	20) P.O. Bo)X		And/Or
21a) Street Address 1:		21b) Street Address 2): :	
518 St. Joseph Street		,		
22) City: Rapid City	23) State: SD	24) Zip Code: 57701		
25) Telephone Number (xxx-xxx-xxxx): (605) 342-2000		26) Fax Number: (xxx	-xxx-xxxx):	
27) E-mail Address: looskota@kotatv.com				
Intenna Structure Information				
28a) Latitude (DD-MM-SS.S):		28b) North or South:		
44- 29- 33.9 29a) Longitude (DDD-MM-SS.S):		North 29b) East or West:		
103- 50- 06.9		West		
30) Street Address or Geographic Location 1.2 MI E ON LOOKOUT MOUNTAIN	n:	31) City: SPEARFISH		
32) County:	33) State: SOUTH DAKOT	A	34) Zip Code: 57783	
LAWRENCE 35) Elevation of site above mean sea leve				1364.9 meters
36) Overall height above ground level (AC	GL) of the supporting stru	icture without appurtenanc	ces:	15.2 meters
	21) (1)			
37) Overall height above ground level (AGL) of the antenna structure including all appurtenances:				16.5 meters
38) Overall height above mean sea level (add items 35 and 37 together):				1381.4 meters
39a) Enter the type of structure on which	the antenna will be mour	nted: (LTOWER)		
B – Building BANT – Building with Antenna on Top BMAST – Building with Mast BPIPE – Building with Pipe BPOLE – Building with Pole BRIDG – Bridge BTWR – Building with Tower		NNLTANN – Lattice NNMTANN – Monop PIPE – Any type of POLE – Any type of RIG – Oil or Other T SIGN – Any type of SILO – Any type of S	oole Array Pipe Pole ype of Rig Sign or Billboard Silo	
GTOWER – Guyed Structure Used For Co LTOWER – Lattice Tower MAST – Mast MTOWER – Monopole NNGTANN – Guyed Tower Array	ommunication Purposes	STACK – Smoke St TANK – Any type of TREE – When used UPOLE – Utility Pole (electric, t	Tank (water, gas, eas a support for an	antenna
39b) Number of Towers in Array:		39c) Position of this Tow	er in the Array:	

41b) East or West:

41a) Array Center Longitude (DDD-MM-SS.S):

Prop	posed Marking and/or Lighting					
	Enter the proposed marking and/or See Form 854 Item 42 Instructions	lighting: (1)	iting information.			
2) F	None 4) FAA Style B 7) FAA Style E Paint Only 5) FAA Style D 8) FAA Style F Other 6) FAA Style C 9) FAA Style G					
FAA	Notification					
43)	43) FAA Study Number: 44) Date Issued: 05/16/2018					
Envi	ronmental Compliance					
			lles for environmental notice prior to	() \	es or No
46a) If the answer to 45 is No, is another federal agency taking responsibility for environmental review of the Antenna Structure?) \	Yes or No
46b	46b) If the answer to 46a is Yes, indicate why:) 1	1 or 2
1)	The Antenna Structure is on Fede environmental review of the Anten		ding agency is taking responsibility for the			
2)	Another federal agency has agree review of the Antenna Structure.	ed with the FCC in writing	g to take responsibility for the environmental			
46c) If the answer to 46a is Yes, provide the name of the federal agency taking responsibility for the environmental review of the Antenna Structure.					ne:	
47) If the answers to 45 and 46a are No, provide the National Notice Date for the application to be posted on the FCC's website (mm/dd/yyyy).					e:	
48)	48) Is the applicant submitting an environmental assessment?					es or No
49)	49) Does the applicant certify that grant of Authorizations at this location would not have a significant environmental effect pursuant to Section 1.1307 of the FCC's rules?					es or No
50)	50) If the answer to 49 is Yes, select the basis for this certification.			() 1	1, 2, 3, 4
1)			(other than due to another agency's review) 1.1307(a) or (b) of the FCC's rules?			
2)	2) The construction is exempt from environmental notification due to another agency's review, and the other agency has issued a Finding of No Significant Impact.					
3)	Environmental Assessment is not i	required under Section 1	e FCC has notified the applicant that an .1307(c) or (d) of the FCC's rules, and the ection 1.1307(a) or (b) of the FCC's rules.			
4)	The FCC has issued a Finding of N	No Significant Impact.				

51) If the answer to 50 is 3 or 4, enter the date that Local Notice was provided (mm/dd/yyyy).

Date:

Certification Statements

- 1) The applicant certifies that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.
- 2) The applicant certifies that neither the applicant nor any other party to the application is subject to a denial of Federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. § 862, because of a conviction for possession or distribution of a controlled substance. See Section 1.2002(b) of the rules, 47 CFR § 1.2002(b), for the definition of "party to the application" as used in this certification

Signature (Typed or Printed Name of Party Authorized to Sign)

	First Name: William	MI: F	Last Name: Duhamel	Suffix: Sr	
53)	Title: President			<u>'</u>	
54)	Signature: William F Duhamel Sr			55) Date: May 17, 2018	

WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS 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).