

Federal Communications Commission

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Account number: 496921

Description: WDSE FORM 387 UPDATE APRIL 2009
Application Reference Number: 20090402AJN
Successfully filed at Apr 2 2009 12:19PM

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Federal Communications Commission Washington, D C 20554	Approved by OMB 3060-1105 (February 2009)	FOR FCC USE ONLY
FCC 387		
DTV TRANSITION STATUS REPORT		FOR COMMISSION USE ONLY FILE NO - 20090402AJN
PLEASE READ INSTRUCTIONS BEFORE COMPLETING THIS FORM		

NOTE: Each Licensee/Permittee is responsible for the continuing accuracy and completeness of the information furnished in this Form. Each Licensee/Permittee must update this Form, as necessary, until such Licensee/Permittee reports the completion of its transition (i.e., that it has begun operating its full, authorized facility as defined in the post-transition DTV Table, 47 C.F.R. 73.622(i), and accompanying Appendix B).

SECTION I - GENERAL INFORMATION

Licensee/Permittee Information			
1.	Legal Name of the Licensee/Permittee DULUTH-SUPERIOR AREA EDUCATIONAL TELEVISION CORPORATION		
	Mailing Address 632 NIAGARA COURT		
	City DULUTH	State or Country (if foreign address) MN	ZIP Code 55811 - 3098
	Telephone Number (include area code) 2187248567	E-Mail Address (if available) EMAIL@WDSE.ORG	
Contact Information (if different from licensee/permittee)			
2.	Contact Representative THEODORE D. FRANK		Firm or Company Name ARNOLD & PORTER LLP

portions of the pending application that are being revised.

SECTION II - CURRENT STATUS

1. Currently Assigned Channels:		
a. NTSC Channel:	8	
b. Post-Transition DTV Channel:	8	
c. Pre-Transition DTV Channel (if different from Post-Transition channel.)	38	
2. Relevant FCC File No. for Post-Transition Authorization, if on file with Commission (or indicate "Not Yet Filed"):		
FCC File No.	BPEDT- 20080324AHU	<input type="checkbox"/> Not Yet Filed
3. Current Construction Deadline:		6/12/2009

SECTION III - POST-TRANSITION FACILITY (Complete all items unless otherwise indicated.)

1. Operational Status:	
Is the Licensee/Permittee now operating its fully authorized final, DTV (post-transition) facility?	
<input type="radio"/> Yes <input checked="" type="radio"/> No (If YES, go to Section V; If NO, go to Item 2.)	
2. If Item 1 is NO (i.e., not fully operational), then indicate operational status of final, DTV (post-transition) facility and indicate date Licensee/Permittee expects to begin full, authorized post-transition operations: (check one)	
<input type="radio"/> (i) Licensee/Permittee is operating its post-transition facility pursuant to program test authority; see 47 C.F.R. § 73.1620(a). If checked, indicate date Licensee/Permittee expects to file its license to cover (FCC Form 302) application.	Expected Operational Date: 6/12/2009 (mm/dd/yyyy)
<input type="radio"/> (ii) Licensee/Permittee is operating its post-transition facility pursuant to special temporary authority (STA) or at a reduced facility. If checked, indicate power level and percentage of analog population covered by reduced facility.	Power Level kW Population: %
<input checked="" type="radio"/> (iii) Licensee/Permittee is not operating its post-transition facility.	
3. Construction Status:	
Has the Licensee/Permittee completed construction of its final, DTV (post-transition) facility?	
<input type="radio"/> Yes <input checked="" type="radio"/> No (If YES, skip Items 4-5 and go to Item 6(a); If NO, go to Item 4.)	
4. If Item 3 is NO (i.e., not fully constructed), then indicate construction status of final, DTV (post-transition) facility and indicate date Licensee/Permittee expects to complete construction: (check all that apply)	
<input type="checkbox"/> (i) Licensee/Permittee has not begun construction of its post-transition facility.	Expected Construction Date: (mm/dd/yyyy)
<input checked="" type="checkbox"/> (ii) Licensee/Permittee is now constructing its post-transition facility.	
<input type="checkbox"/> (iii) Licensee/Permittee has constructed a reduced post-transition facility and additional construction is needed to complete Licensee/Permittee's fully authorized facility.	
5. Construction Permit Status:	
Does the Licensee/Permittee hold a license or construction permit for its final, DTV (post-transition) facility?	
<input checked="" type="radio"/> Yes <input type="radio"/> No (If YES, go to Item 6(a); If NO, skip Item 6(a) and go to Item 6(b).)	
6. a. Does the Licensee/Permittee need to modify its license or construction permit in order to match the post-transition	

facilities defined for the Licensee/Permittee in the new DTV Table of Allotments, 47 C.F.R. § 73.622(i), as adopted in the Seventh Report and Order in MB Docket No. 87-268?

Yes No (If YES, go to 6(b); If NO, skip Item 6(b) and go to Section IV.)

b. Has the Licensee/Permittee filed an application for a new or modified construction permit for its final, DTV (post-transition) facility? (If YES, indicate relevant FCC File No. and date filed; If NO, indicate date Licensee/Permittee

the transition date. If checked, indicate relevant FCC File No. and proposed date service will cease.

SECTION VI – DTV TRANSITION PLAN For Licensees/Permittees that are not fully constructed or operational.

Licensee/Permittee must describe in detail its plans for ceasing analog broadcasting by the June 12, 2009 transition date and for completing construction of its post-transition facility by the deadline. For example, plan must include a detailed time line of the Licensee/Permittee's plans to complete construction and any necessary testing of the Licensee/Permittee's full, authorized post-transition facility.	[Exhibit 4]
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SECTION VII – ANTI-DRUG ABUSE ACT CERTIFICATION

Filer certifies that neither it nor any party to the form 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
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SECTION VIII – CERTIFICATION

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 ALLEN D. HARMON	Typed or Printed Title of Person Signing PRESIDENT AND GENERAL MANAGER
Signature <i>Allen D Harmon</i>	Date 10/10/2008 4/2/2009

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 2
Description: EXHIBIT 2

STATION MUST TERMINATE ANALOG OPERATIONS ON POST-TRANSITION DIGITAL CHANNEL.

Attachment 2

Description
WDSE Form 387 Exhibit 2 update July 2008
WDSE Form 387 Exhibit 2 Update October 2008

Exhibit 4
Description: EXHIBIT 4

STATION WILL END ANALOG BROADCASTS EARLY MORNING JUNE 12. 2009 AND PLACE DIGITAL. _

Description
WDSE Form 387 Exhibit 4 update July 2008
WDSE Form 387 Exhibit 4 Update October 2008
