

1726955-3  
T. Stansbury

# Wiley, Rein & Fielding

DUPLICATE

1776 K Street, N.W.  
Washington, D.C. 20006  
(202) 719-7000

February 24, 2000

Fax: (202) 719-7049  
www.wrf.com

Todd M. Stansbury  
(202) 719-4948  
tstansbu@wrf.com

**BY HAND DELIVERY**

Magalie Roman Salas, Secretary  
Federal Communications Commission  
445 Twelfth Street, S.W.  
12<sup>th</sup> Street Lobby, TW-A325  
Washington, D.C. 20554

RECEIVED

FEB 24 2000

FEDERAL COMMUNICATIONS COMMISSION  
OFFICE OF THE SECRETARY

Re: Minnesota Public Radio  
FCC Form 350  
Application for Covering License  
Noncommercial Educational FM Translator K205DJ, Worthington, Minnesota  
Facility Identification No. 92054


Dear Ms. Salas:

Transmitted herewith, in triplicate, on behalf of Minnesota Public Radio ("MPR"), the licensee of noncommercial educational FM translator K205DJ, is an application on FCC Form 350 for a license to cover a simultaneously filed FCC Form 349 application to correct the station's authorized height of antenna radiation center and the overall structure height above ground of the station's tower. Pursuant to staff advice, MPR is filing FCC Forms 349 and 350 simultaneously in order to expedite the requested correction of the station's authorization.

Because MPR is a noncommercial educational licensee, this application does not require a filing fee.

Please contact the undersigned should you have any questions regarding this application.

Respectfully submitted,



Todd M. Stansbury

Enclosures

cc: James Crutchfield/FCC (By hand)  
Mitzi T Gramling

FOR  
FCC  
USE  
ONLY

**FCC 350**  
**APPLICATION FOR AN**  
**FM TRANSLATOR OR FM BOOSTER**  
**STATION LICENSE**

FOR COMMISSION USE ONLY  
FILE NO.

**1. APPLICANT NAME (Last, First, Middle Initial)**  
Minnesota Public Radio

**MAILING ADDRESS (Line 1) (Maximum 35 characters)**  
45 East Seventh St.

**MAILING ADDRESS (Line 2) (Maximum 35 characters)**

<b>CITY</b> St. Paul	<b>STATE OR COUNTRY (if foreign address)</b> MN	<b>ZIP CODE</b> 55101
<b>TELEPHONE NUMBER (include area code)</b> 651.290.1259	<b>CALL LETTERS</b> K205DJ	

**2. Is a fee submitted with this application?**  Yes  No

If Yes, complete FCC Form 159 (FCC Remittance Advice).

If No, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114).

Governmental Entity  Noncommercial educational licensee  Other (Please explain):

**3. Facilities authorized by construction permit**

This application is for:  FM Translator  FM Booster

**4. Construction permit(s) covered by this application**

File Number(s)	Date of Construction Permit	Construction began	Construction completed
		October 26, 1999	October 26, 1999

Is the station now in satisfactory operating condition and ready for regular operation?  Yes  No

If No, explain in an Exhibit.

Exhibit No.

For applicants that are not the licensee of the primary station, has written authority been obtained from the licensee of the station whose program s are to be retransmitted? N/A  Yes  No

Apart from the apparatus constructed, have all terms, conditions and obligations set forth in the above-described construction permit been fully met?  Yes  No

If No, state exceptions in an Exhibit.

Exhibit No.

5. STATION IDENTIFICATION. Indicate how station identification will be made:

- FSK  
 Amplitude Modulation of FM Aural Carrier  
 Other (Specify)
- By Primary Station  
 Not Required

If identification will be made by primary station, is current information on file with the primary station as to your call letters, exact location of your station, and the name, address and telephone number of the person to be contacted in an emergency to suspend operation of the translator?

Yes  No

ENGINEERING DATA

6. Facilities authorized in construction permit:

a. Output Channel No. 205	Community or Communities being served:  Worthington	Primary Station:
b. Translator Input Channel No. or Call 207		Call: KRSW (FM)
c. Effective Radiated Power (ERP) 0.250 kilowatts (H) 0.250 kilowatts (V)		City: Worthington
State: MN		State: MN

7. Transmitter location

City Worthington	County Nobles	State MN
Address or other description of location 1450 College Way	Geographical coordinates of transmitting antenna to nearest second. (Use NAD 27 datum. See Instructions.)	
	North Latitude 43 ° 37 ' 25 "	West Longitude 95 ° 37 ' 23 "

8. Does the apparatus constructed, the transmitter location, or mode of operation DIFFER from that described in the application for construction permit or in the permit issued by the Commission?

Yes  No

If Yes, describe in detail in an Exhibit the nature of the changes, particularly with regard to type of transmitter, transmitting antenna, antenna orientation, transmission line, or increase in overall height above ground in meters of either the transmitting or receiving antenna structure. Show recomputation of effective radiated power resulting from any such changes.

Exhibit No.  
N/A

NOTE: FM translator and booster applicants are not permitted to use this form to change the technical parameters set forth in the construction permit. See 47 C.F.R. Section 74.1251.

9. If antenna obstruction painting and lighting specifications were made a part of the construction permit, have these been installed as prescribed and in proper working order? N/A

Yes  No

If No, explain in an Exhibit.

Exhibit No.  
N/A

10. Is the transmitting antenna mounted on a tower that has been registered with the Commission?

Yes  No

If Yes, give the eight digit Antenna Structure Registration Number:

N/A

Exhibit No.  
Tower is under  
200 feet.

If No, attach as an Exhibit an explanation of why antenna structure registration is not required.

NOTE: Effective July 1, 1996, the Commission adopted rules which require Antenna Structure owners to apply for a registration number whenever antenna structures meet FAA notification criteria. As owners register these structures they are required to provide licensees with a copy of FCC Form 854R which provides the antenna structure registration number. (If you need additional information, contact the FCC's Consumer Assistance Branch at 1-800-311-1117 for a copy of FACT SHEET 3154, Antenna Structure Registration.)

11. Give name, address, ZIP Code, and telephone number of person(s) to contact if transmitter must be turned off in event of emergency:

Vincent Fuhs, 2329 S. Mockingbird Circle, Sioux Falls, SD 57101  
605.988.0092

12. The applicant certifies that it will comply with applicable station identification rules. See 47 C.F.R. Sections 73.1201 and 74.1283.

Yes  No

13. For applicants using directional antennas, the applicant certifies that the antenna is mounted in accordance with the specific instructions provided by the antenna manufacturer and is mounted in the proper orientation. See 47 C.F.R. Sections 73.316 and 74.1235(i).

Yes  No N/A

14. Has an adverse finding been made or an adverse final action been taken by any court or administrative body with respect to the applicant or parties to the application in a civil or criminal proceeding, brought under the provisions of any law relating to the following: any felony; mass media related antitrust or unfair competition; fraudulent statements to another governmental unit; or discrimination?

Yes  No

If the answer is Yes, attach as an Exhibit a full disclosure of the persons and matters involved, including an identification of the court or administrative body and the proceeding (by dates and file numbers), and the disposition of the litigation. Where the requisite information has been earlier disclosed in connection with another application, or as required by 47 U.S.C. Section 1.65(c), the applicant need only provide: (i) an identification of that previous submission by reference to the file number in the case of an application, the call letters of the station regarding which the application or Section 1.65 information was filed, and the date of filing; and (ii) the disposition of the previously reported matter.

Exhibit No.  
N/A

The APPLICANT hereby waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and requests an authorization in accordance with this application. (See Section 304 of the Communications Act of 1934, as amended.)

The APPLICANT represents that this application is not filed for the purpose of impeding, obstructing, or delaying determination on any other application with which it may be in conflict.

The APPLICANT acknowledges that all the statements made in this application and attached exhibits are considered material representations, and that all exhibits are a material part hereof and are incorporated herein as if set out in full in the application.

CERTIFICATION

1. By checking Yes, the applicant certifies, that, in the case of an individual applicant, he or she is not subject to a denial of federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862, or, in the case of a non-individual applicant (e.g., corporation, partnership or other unincorporated association), no party to the application is subject to a denial of federal benefits that includes FCC benefits pursuant to that section. For the definition of a "party", for these purposes, see 47 C.F.R. Section 1.2002(b).

Yes  No

2. 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.

Name	Signature	
Minnesota Public Radio	Thomas J Kargin	
Title	Date	Telephone Number
Executive Vice President	00.01.14	651.290.1554

**WILLFUL FALSE STATEMENTS MADE 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 FOREFEITURE (U.S. CODE, TITLE 47, SECTION 503))**