

Tepper Law Firm, LLC

4900 Auburn Avenue

Suite 100

Bethesda, MD 20814-2632

Telephone (301) 718-1818

Facsimile (301) 718-1820

Of Counsel
Christopher D. Imlay
John C. Trent *

Cary S. Tepper
tepperlaw@aol.com

* not admitted in Maryland

December 9, 2020

Marlene H. Dortch, Secretary
Federal Communications Commission
45 L. Street, NE
Washington, DC 20554

Attn: James Bradshaw (James.Bradshaw@fcc.gov)
Nazifa Sawez (Nazifa.Sawez@fcc.gov)

**Re: KIPA-AM (Facility ID No. 33324)
Hilo, Hawaii
FCC Form 302-AM License Application**

Dear Sir/Madam:

On behalf of CSN International, Inc., licensee of Radio Station KIPA-AM at Hilo, Hawaii, we hereby submit in triplicate the attached FCC Form 302-AM License Application to cover Construction Permit BP-20200806AAF. Since CSN International, Inc. is a noncommercial licensee and Radio Station KIPA-AM has noncommercial license status, no filing fee payment is required for this application.

Please mail back to us the "Stamp & Return" copy of this application in the pre-paid, self-addressed envelope that is enclosed.

If any questions arise concerning this matter, please contact the undersigned counsel.

Sincerely,

Cary Tepper

Cary S. Tepper

Attachments

cc: KIPA Online Public Inspection File
James Bradshaw (FCC – via email)
Nazifa Sawez (FCC – via email)

FOR
FCC
USE
ONLY

FCC 302-AM
APPLICATION FOR AM
BROADCAST STATION LICENSE

(Please read instructions before filling out form.)

FOR COMMISSION USE ONLY
FILE NO.

SECTION I - APPLICANT FEE INFORMATION

1. PAYOR NAME (Last, First, Middle Initial)

CSN International, Inc.

MAILING ADDRESS (Line 1) (Maximum 35 characters)

P.O. Box 391

MAILING ADDRESS (Line 2) (Maximum 35 characters)

4002 N. 3300 E.

CITY

Twin Falls

STATE OR COUNTRY (if foreign address)

ID

ZIP CODE

83303

TELEPHONE NUMBER (include area code)

(208) 733-3133

CALL LETTERS

KIPA

OTHER FCC IDENTIFIER (If applicable)

33324

2. A. Is a fee submitted with this application?

Yes No

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

Governmental Entity

Noncommercial educational licensee

Other (Please explain):

C. If Yes, provide the following information:

Enter in Column (A) the correct Fee Type Code for the service you are applying for. Fee Type Codes may be found in the "Mass Media Services Fee Filing Guide." Column (B) lists the Fee Multiple applicable for this application. Enter fee amount due in Column (C).

(A)

FEE TYPE CODE		

(B)

FEE MULTIPLE			
0	0	0	1

(C)

FEE DUE FOR FEE TYPE CODE IN COLUMN (A)
\$

FOR FCC USE ONLY

--

To be used only when you are requesting concurrent actions which result in a requirement to list more than one Fee Type Code.

(A)

--	--	--

(B)

0	0	0	1
---	---	---	---

(C)

\$

FOR FCC USE ONLY

--

ADD ALL AMOUNTS SHOWN IN COLUMN C, AND ENTER THE TOTAL HERE. THIS AMOUNT SHOULD EQUAL YOUR ENCLOSED REMITTANCE.

TOTAL AMOUNT REMITTED WITH THIS APPLICATION

\$

FOR FCC USE ONLY

--

--

SECTION II - APPLICANT INFORMATION		
1. NAME OF APPLICANT CSN International, Inc.		
MAILING ADDRESS P.O. Box 391, 4002 N. 3300 E.		
CITY Twin Falls	STATE ID	ZIP CODE 83303

2. This application is for:
- Commercial

 Noncommercial
 AM Directional

 AM Non-Directional

Call letters KIPA	Community of License Hilo, Hawaii	Construction Permit File No. BP-20200806AAF	Modification of Construction Permit File No(s).	Expiration Date of Last Construction Permit 11/18/2023
----------------------	--------------------------------------	--	---	---

3. Is the station now operating pursuant to automatic program test authority in accordance with 47 C.F.R. Section 73.1620?

Yes No

Exhibit No.

If No, explain in an Exhibit.

4. Have all the terms, conditions, and obligations set forth in the above described construction permit been fully met?

Yes No

Exhibit No.

If No, state exceptions in an Exhibit.

5. Apart from the changes already reported, has any cause or circumstance arisen since the grant of the underlying construction permit which would result in any statement or representation contained in the construction permit application to be now incorrect?

Yes No

Exhibit No.

If Yes, explain in an Exhibit.

6. Has the permittee filed its Ownership Report (FCC Form 323) or ownership certification in accordance with 47 C.F.R. Section 73.3615(b)?

Yes No

Does not apply

Exhibit No.

If No, explain in an Exhibit.

7. 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

Exhibit 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.

8. Does the applicant, or any party to the application, have a petition on file to migrate to the expanded band (1605-1705 kHz) or a permit or license either in the existing band or expanded band that is held in combination (pursuant to the 5 year holding period allowed) with the AM facility proposed to be modified herein?

Yes No

If Yes, provide particulars as an Exhibit.

Exhibit No.

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 use of the same, whether by license or otherwise, and requests and authorization in accordance with this application. (See Section 304 of the Communications Act of 1934, as amended).


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

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 Shannon Scholten	Signature 	
Title President	Date 12/9/20	Telephone Number (208) 733-3133

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

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.

SECTION III -- LICENSE APPLICATION ENGINEERING DATA

Name of Applicant	CSN INTERNATIONAL
-------------------	--------------------------

PURPOSE OF AUTHORIZATION APPLIED FOR: (check one)

Station License
 Direct Measurement of Power

1. Facilities authorized in construction permit					
Call Sign	File No. of Construction Permit (if applicable)	Frequency (kHz)	Hours of Operation	Power in kilowatts	
KIPA	BP-20200806AAF	1060	DAYTIME	Night ---	Day 1.0
2. Station location					
State			City or Town		
HAWAII			HILO		
3. Transmitter location					
State	County		City or Town	Street address (or other identification)	
HI	HAWAII		HILO	FCC ASR# 1011944	
4. Main studio location					
State	County		City or Town	Street address (or other identification)	
---	NO LONGER REQUIRED		---	---	
5. Remote control point location (specify only if authorized directional antenna)					
State	County		City or Town	Street address (or other identification)	
---	---		---	---	

6. Has type-approved stereo generating equipment been installed?

Yes No

7. Does the sampling system meet the requirements of 47 C.F.R. Section 73.68?

Yes No

NON DIRECTIONAL - NOT APPLICABLE

Not Applicable

Attach as an Exhibit a detailed description of the sampling system as installed.

Exhibit No.

8. Operating constants:	
RF common point or antenna current (in amperes) without modulation for night system	RF common point or antenna current (in amperes) without modulation for day system
---	6.14
Measured antenna or common point resistance (in ohms) at operating frequency	Measured antenna or common point reactance (in ohms) at operating frequency
Night --- Day 26.5	Night --- Day 0.0

Antenna indications for directional operation						
Towers	Antenna monitor Phase reading(s) in degrees		Antenna monitor sample current ratio(s)		Antenna base currents	
	Night	Day	Night	Day	Night	Day
---	---	---	---	---	---	---

Manufacturer and type of antenna monitor:	DOES NOT APPLY
---	-----------------------

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 UNIFORM CROSS-SECTION, GUYED, STEEL TOWER WITH TOP LOADING	Overall height in meters of radiator above base insulator, or above base, if grounded. 54.86	Overall height in meters above ground (without obstruction lighting) 55.5	Overall height in meters above ground (include obstruction lighting) 56.4	If antenna is either top loaded or sectionalized, describe fully in an Exhibit. <div style="border: 1px solid black; padding: 2px; display: inline-block;">Exhibit No. FIG 1</div>
--	--	---	---	--

Excitation Series Shunt **TOWER SKETCH OF THE TOP LOADED STRUCTURE IS PROVIDED IN THE TECHNICAL/ENGINEERING NARRATIVE STATEMENT AS FIGURE 1**

Geographic coordinates to nearest second. For directional antenna give coordinates of center of array. For single vertical radiator give tower location.

North Latitude	19 ° 41 ' 48 "	West Longitude	155 ° 03 ' 05 "
----------------	-----------------------	----------------	------------------------

If not fully described above, attach as an Exhibit further details and dimensions including any other antenna mounted on tower and associated isolation circuits.

Exhibit No.

Also, if necessary for a complete description, attach as an Exhibit a sketch of the details and dimensions Of ground system.

Exhibit No.

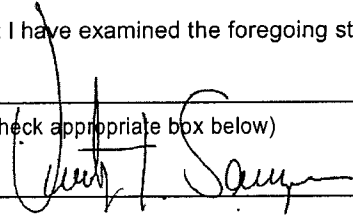
10. In what respect, if any, does the apparatus constructed differ from that described in the application for construction permit or in the permit?

NO CHANGES ARE REPORTED

11. Give reasons for the change in antenna or common point resistance.

NO CHANGES ARE REPORTED - CP REDUCES DAYTIME POWER - NONDIRECTIONAL DAYTIME ONLY OPERATION - NO MODIFICATIONS TO THE ANTENNA SYSTEM OCCURRED.

I certify that I represent the applicant in the capacity indicated below and that I have examined the foregoing statement of technical information and that it is true to the best of my knowledge and belief.

Name (Please Print or Type) TIMOTHY Z. SAWYER	Signature (check appropriate box below) 
T Z SAWYER TECHNICAL CONSULTANTS 2130 HUTCHISON GROVE COURT, SUITE 100 FALLS CHURCH, VA 22043	Date 12/07/2020
	Telephone No. (Include Area Code) (703) 848-2130

- Technical Director
- Chief Operator
- Other (specify) **CONSULTING ENGINEER**
- Registered Professional Engineer
- Technical Consultant

T Z SAWYER TECHNICAL CONSULTANTS

2130 HUTCHISON GROVE COURT, SUITE 100
FALLS CHURCH, VA 22043 USA
Tel: (703) 848-2130 / (202) 642-2130

KIPA (AM) 1060 KHZ
CLASS D AM STATION
HILO, HAWAII
FCC FACILITY ID: 33324

CSN INTERNATIONAL
CONSTRUCTION PERMIT: BP-20200806AAF

LICENSE TO COVER - ENGINEERING STATEMENT

All specifications and conditions set forth in the KIPA (AM) Construction Permit have been fully met, and the facility is ready for licensing.

The construction permit authorized a simple reduction in daytime operating power to 1-kilowatt and the deletion of the nighttime operation. The station operating class is changed from Class B to Class D. The facility operates with a non-directional antenna system. No modification or construction occurred, this application covers a simply reduction in daytime non-directional operating power and a change in operating hours to DAYTIME only.

No changes or deviations from that authorized in the underlying construction permit have occurred. No “changes” are reported. The construction permit contained FOUR special operating conditions.

The licensee/applicant accepts all special operating conditions as listed on the construction permit and affirms the following:

Special Operating Condition #1:

“Permittee shall install a type accepted transmitter, or submit application (FCC Form 301) along with data prescribed in Section 73.1660(b) should non-type accepted transmitter be proposed” – A “type accepted transmitter” has been installed or is in use at this facility.

Special Operating Condition #2:

“A license application (FCC Form 302) to cover this construction permit must be filed with the Commission pursuant to Section 73.3536 of the Rules before the permit expires.” – This application is timely filed.

Special Operating Condition #3:

“The permittee/licensee in coordination with other users of the site must reduce power or cease operation as necessary to protect persons having access to the site, tower or antenna from radiofrequency electromagnetic fields in excess of FCC guidelines.” – Applicant is in compliance and accepts this condition

Station License Application
KIPA (AM) 1060 KHZ
HILO, HAWAII
Page 2

Special Operating Condition #4:

“Licensee shall be responsible for satisfying all reasonable complaints of blanketing interference within the 1 V/m contour as required by Section 73.88 of the Commission's rules. – Applicant is in compliance and accepts this condition

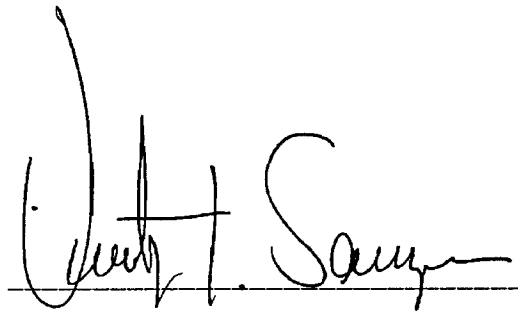
Existing Top-Loaded Antenna/Tower Used:

A detailed sketch of the top loading arrangement of the radiator is provided in Figure 1. No changes to the existing system occurred. No new construction occurred at the site. Reduction in power only.

The station is operating under the provision of automatic program test authority as authorized in the underlying construction permit and 47 CFR §73.1620(a)(1).

December 7, 2020

Timothy Z. Sawyer, Consulting Engineer
T Z Sawyer Technical Consultants
2130 Hutchison Grove Court, Suite 100
Falls Church, VA 22043

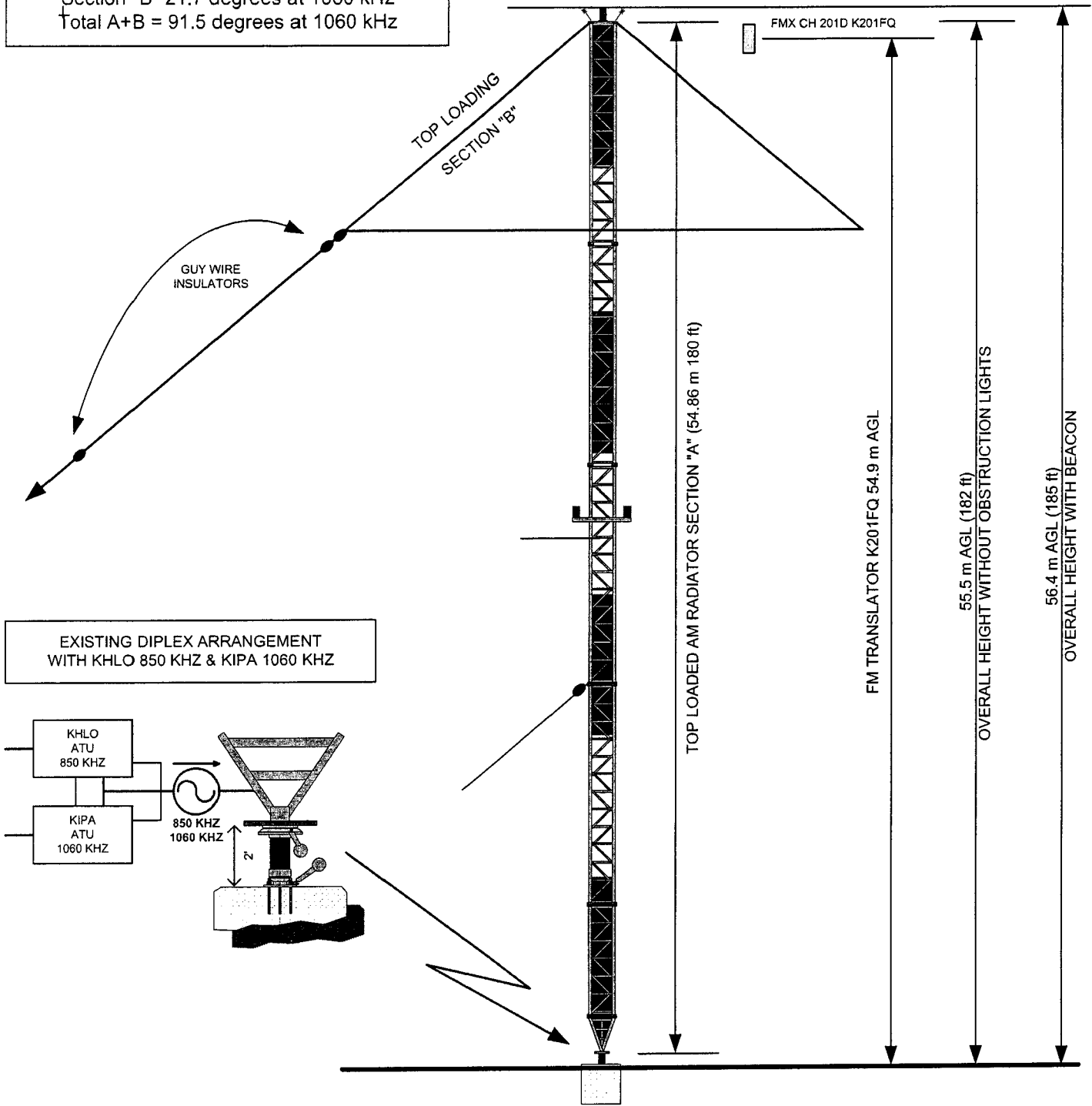
A handwritten signature in black ink, appearing to read "Timothy Z. Sawyer", is written over a horizontal line.

Writers Direct Dial Number: 703-848-2130
e-Mail to: tzsawyer@tzsawyer.com

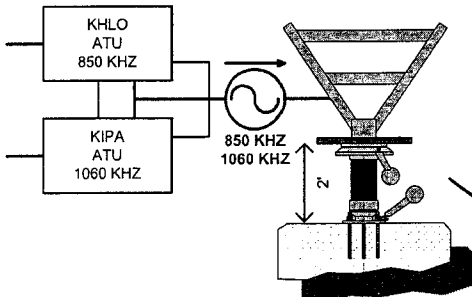
TOP LOADED AM RADIATOR

Above Base Insulator
 Section "A" 69.8 degrees at 1060 kHz
 Section "B" 21.7 degrees at 1060 kHz
 Total A+B = 91.5 degrees at 1060 kHz

EXISTING STRUCTURE NO CHANGE
 FCC ASR # 1011944



EXISTING DIPLEX ARRANGEMENT
 WITH KHLO 850 KHZ & KIPA 1060 KHZ



T Z SAWYER TECHNICAL CONSULTANTS Tel.: (703) 848-2130 www.tzsawyer.com	KIPA AM VERTICAL SKETCH OF RADIATOR				FIGURE 1
	HILO, HAWAII				
FALL CHURCH, VIRGINIA 22043-2555	SIZE A	CAGE NO N/A	DWG NO 20200804KIPA.F2	REV NONE	
(c) 2020, ALL RIGHTS RESERVED	SCALE 1" = 25' VERTICAL ONLY	AUGUST 2020		SHEET	