

CHANGE PARENT FACILITY K265DW
K265DW 156757
MOUNT PLEASANT, TX
BRAZOS TV, INC.

BRAZOS TV, INC, ("BRAZOS") filed to modify the parent facility of K265DW in 2020 with the transfer application to acquire the facility, BALFT20200626AAH, granted 9-29-2020. The parent facility BRAZOS specified was KETE FID#166035, which is the parent facility to this day. See the following pages for the original application and pertinent exhibits.

Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0075 (April 2017)	FOR FCC USE ONLY
FCC 345		
APPLICATION FOR TRANSFER OF CONTROL OF A CORPORATE LICENSEE OR PERMITTEE, OR FOR ASSIGNMENT OF LICENSE OR PERMIT OF TV OR FM TRANSLATOR STATION OR LOW POWER TELEVISION STATION		FOR COMMISSION USE ONLY FILE NO. BALFT - 20200626AAH
Read INSTRUCTIONS Before Filling Out Form		

Section I - General Information

1.	Legal Name of the Licensee/Permittee NORTH TEXAS RADIO GROUP, L.P.		
	Mailing Address 5946 CLUB OAKS DRIVE		
	City DALLAS	State or Country (if foreign address) TX	ZIP Code 75248 -
	Telephone Number (include area code) 9729316055	E-Mail Address (if available) WITKEAUX@YAHOO.COM	
	FCC Registration Number: 0006806780	Call Sign K265DW	Facility Identifier 156757
2.	Contact Representative (if other than Licensee/Permittee) NORTH TEXAS RADIO GROUP, L.P.	Firm or Company Name	
	Mailing Address 5946 CLUB OAKS DRIVE		
	City DALLAS	State or Country (if foreign address) TX	ZIP Code 75248 -
	Telephone Number (include area code) 9729316055	E-Mail Address (if available) WITKEAUX@YAHOO.COM	
3.	If this application has been submitted without a fee, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114): <input type="radio"/> Governmental Entity <input type="radio"/> Noncommercial Educational Licensee/Permittee <input checked="" type="radio"/> Other AMENDMENT <input type="radio"/> N/A (Fee Required)		
4.	Were any of the authorizations that are the subject of this application obtained through the Commission's competitive bidding procedures (see 47 C.F.R. Sections 1.2111(a) and 73.5001)?		<input type="radio"/> Yes <input checked="" type="radio"/> No
	[Exhibit 1]		
	If Yes, list pertinent authorizations in an Exhibit.		

NOTE: In addition to the information called for in this section, an explanatory exhibit providing full particulars must be submitted for each question for which a "No" response is provided.

Section II - Assignor/Transferor

1.	<p>Certification. Licensee/permittee certifies that it has answered each question in this application based on its review of the application instructions and worksheets. Licensee further certifies that where it has made an affirmative certification below, this certification constitutes its representation that the application satisfies each of the pertinent standards and criteria set forth in the application instructions and worksheets.</p>	<input checked="" type="radio"/> Yes <input type="radio"/> No								
2.	<p>Application for (check only one box for A and B):</p> <p>A. <input type="radio"/> Consent to Assignment of Construction Permit <input type="radio"/> Consent to Transfer Control of Permittee <input type="radio"/> Consent to Assignment of License <input type="radio"/> Consent to Transfer Control of Licensee <input checked="" type="radio"/> Amendment to pending application If an amendment, submit as an Exhibit a listing by Section and Question Number of the portions of the pending application that are being revised. [Exhibit 2]</p> <p>B. <input type="radio"/> TV Translator <input type="radio"/> Low Power TV Station <input checked="" type="radio"/> FM Translator <input type="radio"/> Digital Low Power TV <input type="radio"/> Digital TV Translator</p>									
3.	<p>Legal Name of the Assignor/Transferor NORTH TEXAS RADIO GROUP, L.P.</p> <p>Mailing Address 5946 CLUB OAKS DRIVE</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 33%;">City DALLAS</td> <td style="width: 33%;">State or Country (if foreign address) TX</td> <td style="width: 34%;">Zip Code 75248 -</td> </tr> <tr> <td>Telephone Number (include area code) 9729316055</td> <td colspan="2">E-Mail Address (if available) WITKEAUX@YAHOO.COM</td> </tr> </table> <p>If more than one transferor, submit the information requested in question 1 for each transferor. [Exhibit 3]</p>		City DALLAS	State or Country (if foreign address) TX	Zip Code 75248 -	Telephone Number (include area code) 9729316055	E-Mail Address (if available) WITKEAUX@YAHOO.COM			
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4.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Contact Representative (if other than assignee)</td> <td style="width: 40%;">Firm or Company Name</td> </tr> <tr> <td colspan="2">Mailing Address</td> </tr> <tr> <td>City</td> <td>State or Country (if foreign address)</td> </tr> <tr> <td>Telephone Number (include area code)</td> <td>E-Mail Address (if available)</td> </tr> </table>		Contact Representative (if other than assignee)	Firm or Company Name	Mailing Address		City	State or Country (if foreign address)	Telephone Number (include area code)	E-Mail Address (if available)
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Mailing Address										
City	State or Country (if foreign address)									
Telephone Number (include area code)	E-Mail Address (if available)									
5.	<p>Authorizations to be Assigned/Transferred. List call signs, locations and facility identifiers of all authorizations to be assigned/transferred. Include construction permits and file numbers. List main station authorizations and any FM and/or TV translator stations, LPTV stations, SCA, FM and/or TV booster stations, and associated auxiliary service stations.</p> <p>[Enter Station Information]</p> <hr/> <p>List the authorized stations and construction permits to be assigned/transferred. Provide the Facility Identification Number and the Call Sign, or the Facility Identification Number and the File Number of the Construction Permit, and the location, for each station to be assigned/transferred. Include main stations, FM and/or TV translator stations, LPTV stations, FM and/or TV booster stations.</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 20%;">Facility ID Number</td> <td style="width: 20%;">Call Sign</td> <td style="width: 30%;">or Construction Permit File Number</td> <td style="width: 20%;">City</td> <td style="width: 10%;">State</td> </tr> </table>		Facility ID Number	Call Sign	or Construction Permit File Number	City	State			
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156757	K265DW -	MOUNT PLEASANT	TX
6. Agreements for Sale/Transfer of Station. Licensee/permittee certifies that: a. it has placed in its station records and submitted to the Commission as an Exhibit to this application copies of all agreements for the sale/transfer of the station(s); b. these documents embody the complete and final understanding between licensee/permittee and assignee/transferee; and c. these agreements comply fully with the Commission's rules and policies.		<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 4]	
7. Character Issues. Licensee/permittee certifies that neither licensee/permittee nor any party to the application has or has had any interest in or connection with: a. any broadcast application in any proceeding where character issues were left unresolved or were resolved adversely against the applicant or party to the application; or b. any pending broadcast application in which character issues have been raised.		<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 5]	
8. Adverse Findings. Licensee/permittee certifies that, with respect to the licensee/permittee and any party to the application, no adverse finding has been made, nor has an adverse final action been taken by any court or administrative body in a civil or criminal proceeding brought under the provisions of any law related to the following: any felony; mass media-related antitrust or unfair competition; fraudulent statements to another government unit; or discrimination.		<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 6]	
9. Local Public Notice. Licensee/permittee certifies that it has or will comply with the public notice requirements of 47 C.F.R. Section 73.3580.		<input checked="" type="radio"/> Yes <input type="radio"/> No	
10. Auction Authorization. Licensee/permittee certifies that more than five years have passed since the issuance of the construction permit for the station being assigned/transferred, where that permit was acquired in an auction through the use of a bidding credit or other special measure.		<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A See Explanation in [Exhibit 7]	
11. Anti-Drug Abuse Act Certification. Licensee/permittee certifies that neither licensee/permittee nor any party to the application 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	
12. Anti-Discrimination Certification. Licensee/permittee certifies that neither licensee/permittee nor any party to the application have violated the Commission's prohibition against discrimination on the basis of race, color, religion, national origin or sex in the sale of commercially operated FM translator, TV translator, or low power television stations.		<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A See Explanation in [Exhibit 8]	

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.

Typed or Printed Name of Person Signing RICHARD E WITKOVSKI	Typed or Printed Title of Person Signing MANAGING MEMBER
Signature	Date 09/14/2020

NOTE: In addition to the information called for in this section, an explanatory exhibit providing full particulars must be submitted for each question for which a "No" response is provided.

Section III - Assignee/Transferee

1.	<p>Certification. Assignee/transferee certifies that it has answered each question in this application based on its review of the application instructions and worksheets. <input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>Assignee/transferee further certifies that where it has made an affirmative certification below, this certification constitutes its representation that the application satisfies each of the pertinent standards and criteria set forth in the application instructions and worksheets.</p>													
2.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3">Legal Name of the Assignee/Transferee BRAZOS TV, INC.</td> </tr> <tr> <td colspan="3">Mailing Address 5624 PECAN CIRCLE</td> </tr> <tr> <td style="width: 30%;">City ALVARADO</td> <td style="width: 40%;">State or Country (if foreign address) TX</td> <td style="width: 30%;">Zip Code 76009 -</td> </tr> <tr> <td colspan="2">Telephone Number (include area code) 9728277531</td> <td>E-Mail Address (if available) SDENNY@BRAZOS.TV</td> </tr> </table> <p>If more than one transferee, submit the information requested in question 1 for each transferor. [Exhibit 9]</p>	Legal Name of the Assignee/Transferee BRAZOS TV, INC.			Mailing Address 5624 PECAN CIRCLE			City ALVARADO	State or Country (if foreign address) TX	Zip Code 76009 -	Telephone Number (include area code) 9728277531		E-Mail Address (if available) SDENNY@BRAZOS.TV	
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		-												
Telephone Number (include area code)		E-Mail Address (if available)												
4.	<p>Nature of Applicant. Assignee/transferee is:</p> <p> <input type="radio"/> an individual <input type="radio"/> a general partnership <input type="radio"/> a for-profit corporation <input type="radio"/> a limited partnership <input checked="" type="radio"/> a not-for-profit corporation <input type="radio"/> a limited liability company (LLC/LC) <input type="radio"/> other </p> <p>a. If "other", describe nature of applicant in an Exhibit. [Exhibit 10]</p>													
5.	<p>Agreements for Sale/Transfer of Station. Assignee/Transferee certifies that: <input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>a. the written agreements in the licensee/permittee's station records embody the complete and final agreement for the sale of the station(s) which are to be assigned; See Explanation in [Exhibit 11]</p> <p>b. agreements comply fully with the Commission's rules and policies.</p>													

6.	<p>Character Issues. Assignee/Transferee certifies that neither assignee/transferee nor any party to the application has or has had any interest in or connection with:</p> <p>a. any broadcast application in any proceeding where character issues were left unresolved or were resolved adversely against the applicant or party to the a application; or</p> <p>b. any pending broadcast application in which character issues have been raised.</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>See Explanation in [Exhibit 12]</p>								
7.	<p>Adverse Findings. Assignee/Transferee certifies that, with respect to the assignee/transferee and any party to the application, no adverse finding has been made, nor has an adverse final action been taken by any court or administrative body in a civil or criminal proceeding brought under the provisions of any law related to any of the following: any felony; mass media-related antitrust or unfair competition; fraudulent statements to another government unit; or discrimination.</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>See Explanation in [Exhibit 13]</p>								
8.	<p>Alien Ownership and Control. Assignee/Transferee certifies that it complies with the provisions of Section 310 of the Communications Act of 1934, as amended, relating to interests of aliens and foreign governments.</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>See Explanation in [Exhibit 14]</p>								
9.	<p>Financial Qualifications. Assignee/Transferee certifies that sufficient net liquid assets are on hand or are available from committed sources to consummate the transaction and operate the station(s) for three months.</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>See Explanation in [Exhibit 15]</p>								
10.	<p>Rebroadcast Certification. For applicants proposing translator rebroadcasts who are not the licensee of the primary station, the applicant certifies that written authority has been obtained from the licensee of the station whose programs are to be retransmitted</p> <p>Primary station proposed to be rebroadcast:</p> <table border="1" data-bbox="237 1045 1414 1129"> <tr> <td>Facility ID Number</td> <td>Call Sign</td> <td>City</td> <td>State</td> </tr> <tr> <td>166035</td> <td>KETE</td> <td>SULPHUR BLUFF</td> <td>TX</td> </tr> </table>	Facility ID Number	Call Sign	City	State	166035	KETE	SULPHUR BLUFF	TX	<p><input type="radio"/> Yes <input type="radio"/> No</p> <p><input checked="" type="radio"/> N/A</p>
	Facility ID Number	Call Sign	City	State						
166035	KETE	SULPHUR BLUFF	TX							
11.	<p>a. Applicant certifies that it is not the licensee or permittee of the commercial primary station being rebroadcast and that neither it nor any parties to the application have any interest in or connection with the commercial primary station being rebroadcast. See 47 C.F.R. Section 74.1232(d).</p> <p>b. Applicant certifies that the FM translator's (a) 1mV/m coverage contour does not extend beyond the protected contour of the commercial FM primary station to be rebroadcast, or (b) entire 1mV/m coverage contour is contained within the greater of either: (i) the 2 mV/m daytime contour of the commercial AM primary station to be rebroadcast, or (ii) a 25-mile radius centered at the commercial AM primary station's transmitter site.</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p> <p><input checked="" type="radio"/> N/A</p> <p>See Explanation in [Exhibit 16]</p> <p><input type="radio"/> Yes <input type="radio"/> No</p> <p><input checked="" type="radio"/> N/A</p> <p>See Explanation in [Exhibit 17]</p>								
	<p>NOTE: If No to a. and b., and no waiver has been requested in an Exhibit, this application is unacceptable for filing. See 47 C.F.R. Section 74.1231(d).</p> <p>If No to a. and Yes to b. applicant is prohibited from receiving any support, before or after construction, either directly or indirectly from the commercial primary station being rebroadcast or from any person or entity having any interest whatsoever, or any connection with the primary FM station. Interested and connected parties include group owners, corporate parents, shareholders, officers, directors, employees, general and limited partners, family members and business associates. See 47 C.F.R. Section 74.1232(e).</p>									
12.	<p>Applicant certifies that it is in compliance with 47 C.F.R. Section 74.1232(e), which prohibits a FM translator station whose coverage contour extends beyond the protected contour of the commercial FM primary station being rebroadcast, from receiving support (except for specified technical assistance), before, during, or after construction,</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p> <p><input checked="" type="radio"/> N/A</p>								

	directly or indirectly, from the primary station, or any person or entity having any interest in, or connection with, the primary station.	See Explanation in [Exhibit 18]
13.	Auction Authorization. Assignee/Transferee certifies that where less than five years have passed since the issuance of the construction permit and the permit had been acquired in an auction through the use of a bidding credit or other special measure, it would qualify for such credit or other special measure.	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A See Explanation in [Exhibit 19]
14.	Anti-Drug Abuse Act Certification. Assignee/Transferee certifies that neither assignee nor any party to the application 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
15.	Equal Employment Opportunity (EEO). If the applicant proposes to employ five or more full-time employees, applicant certifies that it is filing simultaneously with this application a Model EEO Program Report on FCC Form 396-A.	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A
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		Typed or Printed Title of Person Signing
STEPHEN L. DENNY		PRESIDENT
Signature		Date
		06/14/2020

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 4

Description: ASSET PURCHASE AGREEMENT.

SEE ATTACHED

Attachment 4

Description

[Asset Purchase Agreement](#)

Exhibit 16

Description: ELIGIBILITY OF PROPOSAL

SEE ATTACHED

Attachment 16

Form 345
Transfer of K265DW
Section III Exhibit 16

Brazos TV, Inc., (“Brazos”), the proposed transferee is a non-commercial entity. Brazos is the owner of KETE (FM) FID 166035 Sulphur Bluff, TX. Brazos filed a modification application on 6-23-2020, 0000116465, to modify the license of KETE to non-commercial educational FM. Brazos will receive programming from K265DW from an off-air receiver. See attached map showing service contour relationships.

Description

[Exhibit 16](#)
