

FCC 345

FOR
FCC
USE
ONLY

**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.

Section I - General Information

1. Legal Name of the Licensee/Permittee Harvest Broadcasting Association		
Mailing Address P.O. Box 2401		
City W. Brattleboro	State or Country (if foreign address) VT	ZIP Code 05303
Telephone Number (include area code) 413-205-8440	E-Mail Address (if available) WTTT@live.com	
FCC Registration Number 0014431928	Call Sign W261 CB	Facility Identifier 26352

2. Contact Representative (if other than licensee/permittee) Tamara Thayer		Firm or Company Name WTTT Broadcasting
Mailing Address P.O. Box 84		
City Worthington	State or Country (if foreign address) MA	ZIP Code 01098
Telephone Number (include area code)	E-Mail Address (if available)	

3. If this application has been submitted without a fee, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114):

☐ Governmental Entity ☒ Noncommercial Educational Licensee ☐ Other _____

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)?

☐ Yes ☒ No

Exhibit No.

If yes, list pertinent authorizations in an Exhibit.