

#### (REFERENCE COPY - Not for submission)

# Amendment to an Extension of a Construction Permit

 File Number:
 0000091587
 Submit Date:
 01/16/2020
 Call Sign:
 WVIR-TV
 Facility ID:
 70309
 FRN:
 0018223693
 State:

 Virginia
 City:
 CHARLOTTESVILLE
 Service:
 DTV
 Purpose:
 Amendment
 Status:
 Granted
 Status Date:
 01/17/2020
 Expiration Date:
 07/15/2020
 Filing Status:
 InActive

 General Information
 Section
 Question
 Response

 Attachments
 Are attachments (other than associated schedules) being filed with this application?
 No

### Applicant Applicant N

Information

#### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
Gray Television Licensee, LLC	4370 PEACHTREE ROAD, NE ATLANTA, GA 30319 United States	+1 (404) 504- 9828	Robert. Folliard@gray.tv	Limited Liability Company

#### **Authorization Holder Name**

Check box if the Authorization Holder name is being updated because of the sale (or transfer of control) of the Authorization(s) to another party and for which proper Commission approval has not been received or proper notification provided.

Contact Representatives (2)	Contact Name	Address	Phone	Email	Contact Type
	Lance Cratty <i>Chief Engineer</i> Gray Television Licensee, LLC	503 Market St. Charlottesville, VA 22902 United States	+1 (434) 220- 2924	lcratty@nbc29.com	Technical Representative
	Joan Stewart Wiley Rein LLC	1776 K Street, NW Washington, DC 20006 United States	+1 (202) 719- 7438	jstewart@wileyrein. com	Legal Representative

## **Tolling Questions**

Section	Question	Response
Applicant certifies that construction cannot be completed due to:	Legal reasons beyond station's control (e.g., litigation, international coordination):	
	Severe financial hardship (e.g., bankruptcy, negative cash flow):	
	other reasons (e.g., natural disasters):	Yes
	Has the construction period for this station been previously extended?	No
	Applicant requests that the time within which to complete	07/15
	construction be extended until:	/2020

Certification	Section	Question	Response
	General Certification Statements	The Applicant 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 authorization or otherwise, and requests an Authorization in accordance with this application (See Section 304 of the Communications Act of 1934, as amended.).	
		The Applicant certifies that neither the Applicant nor any other party to the application is subject to a denial of Federal benefits pursuant to §5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. §862, because of a conviction for possession or distribution of a controlled substance. This certification does not apply to applications filed in services exempted under §1.2002(c) of the rules, 47 CFR . See §1. 2002(b) of the rules, 47 CFR §1.2002(b), for the definition of "party to the application" as used in this certification §1.2002 (c). The Applicant certifies that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of this application, and are true, complete, correct, and made in good faith.	
	Authorized Party to Sign	<ul> <li>FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID</li> <li>Upon grant of this application, the Authorization Holder may be subject to certain construction or coverage requirements.</li> <li>Failure to meet the construction or coverage requirements will result in automatic cancellation of the Authorization.</li> <li>Consult appropriate FCC regulations to determine the construction or coverage requirements that apply to the type of Authorization requested in this application.</li> <li>WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, §312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, §503).</li> </ul>	
		I certify that this application includes all required and relevant attachments.	Yes
		I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	<b>Robert Folliard</b> <i>Assistant Secretary</i> 01/16/2020

File Name	Uploaded By	Attachment Type	Description
WVIR CP Extension Request.pdf	Applicant	All Purpose	CP Extension Request
WVIR CP Extension update 4841-4012-3570 v.1.pdf	Applicant	Amendment	Update on construction progress
WVIR-TV.pdf	Internal	All Purpose	