

(REFERENCE COPY - Not for submission)

### **DTV Legal STA Application**

File Number: **0000118187** Submit Date: **07/21/2020** Call Sign: **WPAN** Facility ID: **31570** FRN: **0019006501** State:

Florida City: FORT WALTON BEACH

Service: DTV Purpose: Legal STA Status: Dismissed Status Date: 07/22/2020 Filing Status: InActive

General Information

Section	Question	Response
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Fees, Waivers, and Exemptions

Section	Question	Response
Fees	Is the applicant exempt from FCC application Fees?	Yes
	Indicate reason for fee exemption:	Request for extension of silent STA, no application filing fee required.
Waivers	Does this filing request a waiver of the Commission's rule(s)?	No
	Total number of rule sections involved in this waiver request:	

## Applicant Information

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

Applicant	Address	Phone	Email	Applicant Type
B&C COMMUNICATIONS, LLC Doing Business As: B&C COMMUNICATIONS, LLC	William Smith, Manager 155 MIDDLE PLANTATION LANE GULF BREEZE, FL 32561 United States	+1 (716) 310-3711	BILLSMEDIA@GMAIL. COM	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
Jeffrey L. Timmons , Esq Jeffrey L. Timmons, Esq.	Jeffrey L. Timmons, Esq. 974 Branford Lane NW Lilburn, GA 30047 United States	+1 (678) 463- 5116	jeff@timmonspc. com	Legal Representative
Scott Turpie Senior Technical Consultant Lohnes & Culver LLC	Scott Turpie P.O. Box 881 Silver Spring, MD 20918 United States	+1 (301) 776- 4488	scott@locul.com	Technical Representative

# Channel and Facility Information

Section	Question	Response
Proposed Community of License	Facility ID	31570
	State	Florida
	City	FORT WALTON BEACH
	DTV Channel	40
	Designated Market Area	Mobile-Pensacola (Ft Walt)
Facility Type	Facility Type	Commercial
	Station Type	Main
Zone	Zone	3

#### 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	FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID  Upon grant of this application, the Authorization Holder may be subject to certain construction or coverage requirements. Failure to meet the construction or coverage requirements will result in automatic cancellation of the Authorization. Consult appropriate FCC regulations to determine the construction or coverage requirements that apply to the type of Authorization requested in this application.  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).	
	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.	William Smith Preident 07/21/2020

#### **Attachments**

File Name	Uploaded By	Attachment Type	Description
WPAN(TV) FurtherRequestExtendSilentSTA July2020 Exhibit.pdf	Applicant	General Information	Request to Extend Silent STA