

Federal Communications Communications (REFERENCE COPY - Not for submission) Commission Augus and the august to a

Amendment to a DTV Legal STA Application

 File Number:
 0000147623
 Submit Date:
 06/28/2021
 Call Sign:
 KASW
 Facility ID:
 7143
 FRN:
 0002710192
 State:

 Arizona
 City:
 PHOENIX
 Service:
 DTV
 Purpose:
 Legal STA Amendment
 Status:
 Submit Submit Status:
 Status Date:
 06/29/2021
 Filing Status:
 Filing Status:

 InActive
 Status
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General	Section	Question	Response
Information			
Fees, Waivers,	Section	Question	Response
and Exemptions	Fees	Is the applicant exempt from FCC application Fees?	No
		Indicate reason for fee exemption:	
	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 Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
SCRIPPS BROADCASTING HOLDINGS LLC Doing Business As: SCRIPPS BROADCASTING HOLDINGS LLC	Dave Giles 312 WALNUT STREET 28TH FLOOR CINCINNATI, OH 45202 United States	+1 (513) 977-3000	DAVE. GILES@SCRIPPS. 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 (1)	Contact Name	Address	Phone	Email	Contact Type
	Coe W. Ramsey Brooks, Pierce et al.	150 Fayetteville Street Suite 1700 Raleigh, NC 27601 United States	+1 (919) 839- 0300	cramsey@brookspierce.com	Legal Representative

Channel and Facility Information	Section	Question	Response
	Proposed Community of License	Facility ID	7143
		State	Arizona
		City	PHOENIX
		DTV Channel	27
		Designated Market Area	Phoenix (Prescott)
	Facility Type	Facility Type	Commercial
		Station Type	Main
	Zone	Zone	2

	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.	David Giles Vice President 06/28/2021

File Name	Uploaded By	Attachment Type	Description
Scripps KASW 3.0 Request for Modification of Special Temporary Authority (STA).pdf	Applicant	All Purpose	KASW 3.0 Request for Modification of Special Temporary Authority (STA)
Scripps KASW (Phoenix) 3.0 Request for Modification of Special Temporary Authority (STA) - Amendment Exhibit. pdf	Applicant	Amendment	3.0 Request for Modification of Special Temporary Authority (STA) - Amendment Exhibit