

Suspension of Operations and Silent Authority of a DTV Station Application

 File Number:
 0000120891
 Submit Date:
 08/28/2020
 Call Sign:
 KPLC
 Facility ID:
 13994
 FRN:
 0018223693
 State:

 Louisiana
 City:
 LAKE CHARLES
 Status:
 Dismissed
 Status:
 Date:
 09/22/2020
 Filing Status:

 Service:
 DTV
 Purpose:
 Request for Silence STA
 Status:
 Dismissed
 Status Date:
 09/22/2020
 Filing Status:

 InActive

 </t

```
Section
                                                     Question
                                                                                                          Response
General
Information
                         Applicant Name, Type, and Contact Information
Applicant
Information
                          Applicant
                                                        Address
                                                                                 Phone
                                                                                                 Email
                                                                                                                 Applicant Type
                                                                                  +1 (337) 437-
                                                         4370 PEACHTREE
                                                                                                 allfcclms@gray.
                           GRAY TELEVISION
                                                                                                                 Limited Liability
                          LICENSEE, LLC
                                                         ROAD, NE
                                                                                  7508
                                                                                                  tv
                                                                                                                 Company
                           Doing Business As: KPLC
                                                         ATLANTA, GA 30319
                                                         United States
```

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
	David Burke Senior Vice President and CTO Gray TV	RSA TOWER, 20TH FLOOR 201 MONROE STREET MONTGOMERY, AL 36104 United States	+1 (334) 206- 1475	david. burke@gray.tv	Technical Representative
	Joan Stewart Wiley Rein LLP	1776 K Street NW WASHINGTON, DC 20006 United States	+1 (202) 719- 7438	jstewart@wiley. law	Legal Representative

Station Status	Question	Response	
	Date Station Went Silent:	08/27/2020	

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	 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.	Robert Folliard , III . <i>Assistant Secretary</i> 08/28/2020

Attachments	File Name	Uploaded By	Attachment Type	Description
	KPLC Silent Statement.pdf	Applicant	General Information	Silent Statement