

(REFERENCE COPY - Not for submission) Full Power FM Digital Notification Application

File Number:0000226078Submit Date:11/14/2023Lead Call Sign:WXKS-FM Facility ID: 53965

FRN: 0014042816

Service: Full Power FM Purpose: Digital Notification Status: Received Status Date: 11/14/2023 Filing Status: Active

General Information	Section	Question	Response
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No

Applicant

Applicant Name, Type, and Contact Information

Information

Applicant	Address	Phone	Email	Applicant Type
IHM LICENSES, LLC Doing Business As: IHM LICENSES, LLC	FCC Contact 7136 S. YALE AVENUE SUITE 501 TULSA, OK 74136 United States	+1 (918) 664- 4581	FCCCONTACT@IHEARTMEDIA. COM	LLC

Contact Representatives (1)

Contact Name	Address	Phone	Email	Contact Type
FCC Contact AMFM RADIO LICENSES, L.L.C.	FCC Contact 7136 S. YALE AVENUE SUITE 501 TULSA, OK 74136 United States	+1 (918) 664- 4581	FCCCONTACT@IHEARTMEDIA. COM	Legal Representative

Digital Notification

Section	Question	Response
The date new or modified digital operation commenced or ceased	The date new or modified digital operation commenced or ceased:	06/16/2020
Licensee's Technical Representative:	First Name:	Terry
	Last Name:	Carr
	Phone:	(424) 236-3342
Effective Radiated Power	Analog (kW):	20.5
	Digital (kW):	0.820
Transmitter Output Power	Combined for low-level combined systems (kW):	10.4
	Analog for separate analog systems (kW):	
	Digital for separate digital systems (kW):	

environmental The type of no	I processing pursuant to Section 1.1306(b) btification: Hybrid Notification
radiation in ex rules and is th	access of Section 1.1310 of the Commission's herefore categorically excluded from
	ifies that its interim digital operations will not Yes exposure to levels of radio frequency
	ifies that, except for digital power, its facilities Yes e iBiquity Digital Corporation hybrid
	ifies its analog effective radiated power will Yes horized after commencement of digital

	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 declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	Troy G Langham VP, Technical Regulatory Affairs
			11/14/2023