

(REFERENCE COPY - Not for submission) Reduced Power Notification for a Full Power FM Station Application

 File Number:
 0000235984
 Submit Date:
 01/22/2024
 Lead Call Sign:
 KETP
 Facility ID:
 174467

FRN: 0001549252

Purpose: Reduced Power Notification Service: Full Power FM Status: Received Status Date: 01/22/2024 Filing Status: Active

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

Applicant Information

Applicant Name,	ype, and Contact Information
,,	

Applicant	Address	Phone	Email	Applicant Type
Reduced Power Notification Doing Business As: OREGON PUBLIC BROADCASTING	Director of Engineering 7140 S Macadam Avenue Portland, OR 97219 United States	+1 (503) 244- 9900	jnewsome@opb. org	NFP

Contact Representatives (1)

Contact Name	Address	Phone	Email	Contact Type
Brad Deutsch <i>Counsel</i> Foster Garvey P.C.	3000 K St., NW Suite 420 Washington, DC 20007 United States	+1 (202) 298-1793	brad.deutsch@foster.com	Legal Representative

Section	Question	Response
Station Status	Date the station reduced power:	01/13/2024

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 declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	Steve Bass President and CEO 01/22/2024

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
KETP(FM) - Reduced Power Notification & STA Exhibit.pdf	Applicant		KETP(FM) - Reduced Power Notification & STA Exhibit	Done with Virus Scan and/or Conversion