

(REFERENCE COPY - Not for submission) Request to Extend a Full Power AM Engineering STA Application

File Number:20070608ADGSubmit Date:06/08/2007Lead Call Sign:KFXDFacility ID:63915

FRN: 0030479497

Service: Full Power AM Purpose: STA Extension

A Extension Status: Granted

Status Date: 12/10/2007 Filing

507 Filing Status: Inactive

General Information	Section	Question	Response
	Attachments	Are attachments (other than associated schedules) being filed with this application?	
Fees, Waivers, and Exemptions	Section	Question	Response
	Fees	Is the applicant exempt from FCC application Fees?	No
		Indicate reason for fee exemption:	
		Is the applicant exempt from FCC regulatory Fees?	
	Waivers	Does this filing request a waiver of the Commission's rule	

		Is the applicant exempt from FCC regulatory Fees?	
	Waivers	Does this filing request a waiver of the Commission's rule (s)?	
		Total number of rule sections involved in this waiver request:	

Applicant Name, Type, and Contact Information Applicant Information Address Applicant Phone Email **Applicant Type** PEAK BROADCASTING OF BOISE LICENSES, LLC 1071 WEST SHAW +1 (559) 490-OTH Applicant AVENUE 5800 Doing Business As: PEAK BROADCASTING OF FRESNO, CA 93711 BOISE LICENSES, LLC **United States** Contact **Contact Name** Address Phone Email **Contact Type** Representatives (0) Extension Section Question Response Request Please enter the new requested expiration date: **Extension Request**

Certification Section	Que	estion	Response
General C Statemen	s free reg pre oth with	Applicant waives any claim to the use of any particular quency or of the electromagnetic spectrum as against the ulatory power of the United States because of the vious use of the same, whether by authorization or erwise, and requests an Authorization in accordance in this application (See Section 304 of the mmunications 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 PAIDUpon 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 (OD EODEE/TUDE (U.O. October 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.	

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
D:\data\prod\cdbs\letters\\8\A-1216883 F-63915 L- 8023-20070608ADG.pdf	Internal	All Purpose	imported letter	Done with Virus Scan and/or Conversion