

# (REFERENCE COPY - Not for submission) Request to Extend a Silent Authority of a Full Power AM Station Application

File Number: BLESTA-20120611AAP | Submit Date: 06/11/2012 | Lead Call Sign: KNFL | Facility ID: 129784

FRN: 0019297332

Service: Full Power AM Purpose: STA Extension Status: Granted Status Date: 08/21/2012 Filing Status: Inactive

### General Information

Section	Question	Response
Attachments	Are attachments (other than associated schedules) being filed with this application?	

### Applicant Information

#### **Applicant Name, Type, and Contact Information**

Applicant	Address	Phone	Email	Applicant Type
AM RADIO 1470, INC. Applicant Doing Business As: AM RADIO 1470, INC.	299 S. MAIN SUITE 1300 SALT LAKE CITY, UT 84111 United States	+1 (801) 534-4455		OTH

#### Contact Representatives (1)

Contact Name	Address	Phone	Email	Contact Type
SCOTT WOODWORTH EDINGER ASSOCIATES	1875 I STREET, NW SUITE 500 WASHINGTON, DC 20006 United States	+1 (202) 747- 1694	SWOODWORTH@EDINGERLAW. NET	Legal Representative

### Extension Request

Section	Question	Response
Extension Request	Reason for going silent:	Other
	Please enter the new requested expiration date:	

#### 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.).	

of this application, and are true, complete, correct, and	other party to the application. Federal benefits pursuant to Act of 1988, 21 U.S.C. § 86 possession or distribution of certification does not apply exempted under §1.2002(c) 2002(b) of the rules, 47 CFI of "party to the application" 1.2002(c). The Applicant ce in this application and in the documents incorporated by	o §5301 of the Anti-Drug Abuse 2, because of a conviction for f a controlled substance. This to applications filed in services of the rules, 47 CFR. See §1. R § 1.2002(b), for the definition as used in this certification § or tifies that all statements made exhibits, attachments, or reference are material, are part
		PPLICATION MAY RESULT IN

#### **Authorized Party to Sign**

## **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.

#### **WAYNE KLEIN**

#### **Attachments**

File Name	Uploaded By	Attachment Type	Description	Upload Status
1503758 1045221.txt	Applicant	All Purpose	EXHIBIT 2	Done with Virus Scan and/or Conversion
D:\data\prod\cdbs\letters\\36\A-1503758 F- 129784 L-36228-BLESTA-20120611AAP.pdf	Internal	All Purpose	imported letter	Done with Virus Scan and/or Conversion