

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

 File Number:
 BESTA-20230301AAA
 Submit Date:
 03/01/2023
 Lead Call Sign:
 WAXY
 Facility ID:
 30837

#### FRN: 0034767822

Service: Full Power AM Purpose: STA Extension Status: Granted Status Date: 03/14/2023

/2023 Filing Status: Inactive

| General<br>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 (s)? |          |
|         | Total number of rule sections involved in this waiver request:  |          |

### Applicant Informatior

### Applicant Name, Type, and Contact Information

| Information                       | Applicant   | Address  | Phone                | Email                 |             | Applicant Type |
|-----------------------------------|---|--|----------------------|-----------------------|-------------|----------------|
|                                   | AUDACY LICENSE, LLC<br>Applicant<br>Doing Business As: AUDACY<br>LICENSE, LLC | 2400 MARKET<br>STREET<br>4TH FLOOR<br>PHILADELPHIA,<br>PA 19103<br>United States | +1 (610)<br>660-5610 | ANDREW.<br>SUTOR@ENTE | RCOM.COM    | ОТН            |
| Contact<br>Representatives<br>(0) | Contact Name  | Address  | Phone                | Email                 | Contact Typ | e              |
| Extension<br>Request              | Section<br>Extension Request  | Question<br>Please enter the new re  | equested expiration  | Respor                |             | 9              |

Certification

Section

Question

| General Certification<br>Statements | The Applicant waives any claim to the use of any particular<br>frequency or of the electromagnetic spectrum as against the<br>regulatory power of the United States because of the<br>previous use of the same, whether by authorization or<br>otherwise, and requests an Authorization in accordance<br>with this application (See Section 304 of the<br>Communications Act of 1934, as amended.).   |  |
|-------------------------------------|---|--|
|                                     | The Applicant certifies that neither the Applicant nor any<br>other party to the application is subject to a denial of<br>Federal benefits pursuant to §5301 of the Anti-Drug Abuse<br>Act of 1988, 21 U.S.C. § 862, because of a conviction for<br>possession or distribution of a controlled substance. This<br>certification does not apply to applications filed in services<br>exempted under §1.2002(c) of the rules, 47 CFR . See §1.<br>2002(b) of the rules, 47 CFR § 1.2002(b), for the definition<br>of "party to the application" as used in this certification §<br>1.2002(c). The Applicant certifies that all statements made<br>in this application and in the exhibits, attachments, or<br>documents incorporated by reference are material, are part<br>of this application, and are true, complete, correct, and<br>made in good faith.  |  |
| Authorized Party to Sign            | <ul> <li>FAILURE TO SIGN THIS APPLICATION MAY RESULT IN<br/>DISMISSAL OF THE APPLICATION AND FORFEITURE<br/>OF ANY FEES PAID</li> <li>Upon grant of this application, the Authorization Holder may<br/>be subject to certain construction or coverage requirements.</li> <li>Failure to meet the construction or coverage requirements<br/>will result in automatic cancellation of the Authorization.</li> <li>Consult appropriate FCC regulations to determine the<br/>construction or coverage requirements that apply to the type<br/>of Authorization requested in this application.</li> <li>WILLFUL FALSE STATEMENTS MADE ON THIS FORM<br/>OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE<br/>AND/OR IMPRISONMENT (U.S. Code, Title 18, §1001)</li> <li>AND/OR REVOCATION OF ANY STATION</li> <li>AUTHORIZATION (U.S. Code, Title 47, §312(a)(1)), AND<br/>/OR FORFEITURE (U.S. Code, Title 47, §503).</li> </ul> |  |
|                                     | 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\104\A-1832130 F-30837 L-<br>104678-BESTA-20230301AAA.pdf        | Internal    | All Purpose     | imported<br>letter | Done with<br>Virus Scan<br>and/or<br>Conversion |
|             | <u>D:\data\prod\cdbs\letters\104\A-1832130_F-30837_L-</u><br>104809-BESTA-20230301AAA.pdf | Internal    | All Purpose     | imported<br>letter | Done with<br>Virus Scan<br>and/or<br>Conversion |
|             | D:\data\prod\cdbs\letters\104\A-1832130_F-30837_L-<br>104811-BESTA-20230301AAA.pdf        | Internal    | All Purpose     | imported<br>letter | Done with<br>Virus Scan<br>and/or<br>Conversion |