

(REFERENCE COPY - Not for submission)

Reduced Power Notification for a DTV Station Application

File Number: 0000019245 | Submit Date: 12/21/2016 | Call Sign: KRMA-TV | Facility ID: 14040 | FRN: 0001615582

State: Colorado City: DENVER

Service: DTV Purpose: Reduced Power Notification Status: Received Status Date: 12/21/2016 Filing Status:

InActive

General Information

Section Question Response

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
ROCKY MOUNTAIN PUBLIC BROADCASTING NETWORK, INC. Doing Business As: ROCKY MOUNTAIN PUBLIC BROADCASTING NETWORK, INC.	Compliance 1089 BANNOCK STREET DENVER, CO 80204 United States	+1 (303) 892-6666	compliance@rmpbs. org	Not-for- Profit

Authorization Holder Name

Check box if the Authorization Holder name is being updated because of the sale (or transfer of control) of the Authorization(s) to another party and for which proper Commission approval has not been received or proper notification provided.

Contact Representatives (2)

Contact Name	Address	Phone	Email	Contact Type
Tom D Craig Chief Technology Officer Rocky Mountain Public	Compliance 1089 Bannock Street Denver, CO 80204	+1 (303) 892-6666	TOMCRAIG@RMPBS. ORG	Technical Representative
Broadcasting Network, Inc.	United States			
Todd Gray	1200 New Hampshire	+1 (202)	tgray@graymillerpersh.	Legal
Gray Miller Persh LLP	Avenue, NW Suite 410 Washington, DC 20036 United States	776-2571	com	Representative

Station Status

Question	Response	
Reduce Power Since:	12/16/2016	

Certification

Question	Response
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.	
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 certify that this application includes all required and relevant attachments.	Yes
I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	Douglas M. Price <i>CEO</i> 12/21/2016
	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. 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 will result in automatic cancellation of the Authorization. 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 certify that this application includes all required and relevant attachments.

Attachments

File Name	Uploaded By	Attachment Type	Description
KRMA-TV Reduced Power Notice.pdf	Applicant	All Purpose	KRMA-TV Reduced Power Notice