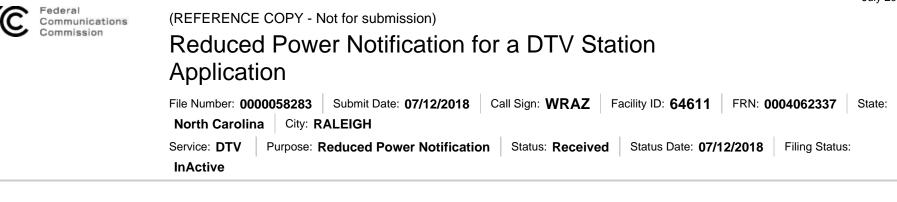
Applicant Type

Corporation



General	Section	Question	Response
Information			

## Applicant Information

## Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email
WRAZ-TV, INC.	Vernessa L. Hoffman	+1 (919) 821-	vhoffman@cbc-raleigh.
Doing Business As: WRAZ-TV,	2619 WESTERN	8730	com
INC.	BOULEVARD		
	RALEIGH, NC 27606		

United States

## **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 (3)	Contact Name	Address	Phone	Email	Contact Type
	Louis R. duTreil , Jr . <i>Technical Consultant</i> duTreil Lundin & Rackley Inc	3135 Southgate Circle Sarasota, FL 34239 United States	+1 (941) 329- 6004	bobjr@DLR.com	Technical Consultant
	<b>David A. O'Connor</b> WILKINSON BARKER KNAUER, LLP	1800 M STREET, NW SUITE 800N WASHINGTON, DC 20036 United States	+1 (202) 783- 4141	doconnor@wbklaw. com	Legal Representative
	<b>Peter A. Sockett</b> DIRECTOR OF ENGINEERING & OPERATIONS WRAZ-TV, Inc.	2619 WESTERN BOULEVARD RALEIGH, NC 27606 United States	+1 (919) 821- 8573	psockett@wral. com	Technical Representative

Station Status	Question	Response	
	Reduce Power Since:	07/05/2018	

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	<ul> <li>FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID</li> <li>Upon grant of this application, the Authorization Holder may be subject to certain construction or coverage requirements.</li> <li>Failure to meet the construction or coverage requirements will result in automatic cancellation of the Authorization.</li> <li>Consult appropriate FCC regulations to determine the construction or coverage requirements that apply to the type of Authorization requested in this application.</li> <li>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).</li> </ul>	
		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.	Pete Sockett Director of Engineering and Operations
			07/12/2018

Attachments	File Name	Uploaded By	Attachment Type	Description
	WRAZ Reduced power 7-12-18.docx	Applicant	All Purpose	WRAZ Reduced Power Memo