

(REFERENCE COPY - Not for submission)

Administrative Update for a DTV Station Application

File Number: 0000150871 | Submit Date: 06/23/2021 | Call Sign: WJHL-TV | Facility ID: 57826 | FRN: 0009961889 | State:

Tennessee City: JOHNSON CITY

Service: DTV Purpose: Administrative Update Status: Received Status Date: 06/23/2021 Filing Status: Active

General Information

| | Section | | Question | | | Response | |
|--------|------------------------|---------------|-------------------|-----------------------|-------------|-------------|----------------|
| Appli | cant | plicant Na | me, Type, and C | ontact Informati | ion | | |
| Inforn | natione _{ant} | Address | | Phone | Ema | il | Applicant Type |
| | Nexstar Media Inc. | Elizabeth Ry | | +1 (972) 373- 8800 | eryde tv | er@nexstar. | Corporation |
| | | 545 E. John | Carpenter Freeway | | | | |
| | | Suite 700 | | | | | |
| | | Irving, TX 75 | 5062 | | | | |
| | | United State | es | | | | |

Authorization Holder Name

1.

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 |
|--|-------------------------------------|-----------------------|-------------------------------|-----------------------------|
| William T Godfrey , Jr . | William T. Godfrey, Jr. | +1 (352) 332- 3157 | bill@kesslerandgehman. com | Technical Representative |
| Consulting Engineers Kessler and Gehman | Kessler and Gehman Associates, Inc. | | | |
| Associates, Inc. | 507-D NW 60th Street | | | |
| | Gainesville , FL 32607 | | | |
| | United States | .4 (070) 070 | | Land Danisaantatiiya |
| Elizabeth Ryder | Elizabeth Ryder | +1 (972) 373- 8800 | eryder@nexstar.tv | Legal Representative |
| General Counsel | 545 E. John Carpenter Freeway | , | | |
| Nexstar Media Inc. | Suite 700 | | | |
| | Irving, TX 75062 | | | |
| | United States | | | |

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|----|-------|------|-----|
| Ce | rtiti | icat | ion |

| 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. §882, 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. §8.9 £1.002(d), by the rules, 47 CFR §1.2002(c), for the delimition of 'party to the application' as used in this certification \$1,2002(c). The Applicant certifies that all statements made in this application, and are true, complete, correct, and made in good faith. FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL of THE APPLICATION MAY FESULT IN DISMISSAL of THE APPLICATION AND FORFITURE OF ANY FEES PAID Upon grant of this application, the Authorization. Consult appropriate FCC regulations to determine the 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 summatic cancellation of the Authorization. Consult appropriate FCC regulations to determine the construction or coverage requirements will result in summatic cancellation of the Authorization. Consult appropriate FCC regulations to determine the construction or coverage requirements will result in 47, §303). VILLEUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND/OR MPRISONMENT (S.C. Goc., Title 47, §303). Lordiffy that this application includes a | tion | Section | Question | Response |
|---|------|--------------------------|--|-----------------|
| 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. I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above. | | | 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, | |
| | | Authorized Party to Sign | 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. I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the | Elizabeth Ryder |

Information not provided.

Attachments