Approved by OMB (Office of Management and Budget) 3060-0027
September 2014

Federal Communications Commission

(REFERENCE COPY - Not for submission)

Form 380 - Permittee Initial Request

File Number: **0000220096** | Submit Date: **08/30/2023** | Call Sign: **KKEL** | Facility ID: **776228** | FRN: **0019682483** | State: **Nevada** | City: **ELY**

Service: **DTV** | Purpose: **Call Sign Request (Permittee Initial)** | Status: **Granted** | Status Date: **08/31/2023** | Expiration Date: **09/13/2025** | Filing Status: **InActive**

General Information

Section	Question	Response
Attachments	Are attachments (other than associated schedules) being filed with this application?	No

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?	No
Waivers	Does this filing request a waiver of the Commission's rule(s)?	No
	Total number of rule sections involved in this waiver request:	
	Are the frequencies or parameters requested in this filing covered by grandfathered privileges, previously approved by waiver, or functionally integrated with an existing station?	No

Application Type	Fee Code	Fee Amount
Call Sign Request (Permittee Initial)	MBT	$190.00
	Total	**$190.00**

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
TV-49, Inc.	Kyle Walker 26 North Halsted Street Chicago, IL 60661 United States	+1 (312) 705-2600	kwalker@metv.com	Corporation

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
Matthew S. DelNero *Legal Counsel* Covington & Burling LLP	Matthew S. DelNero One CityCenter 850 Tenth Street, NW Washington, DC 20001 United States	+1 (202) 662-5543	mdelnero@cov.com	Legal Representative
Louis R duTreil , Jr . *Technical Consultant* duTreil Lundin & Rackley Inc	5212 Station Way Sarasota, FL 34233 United States	+1 (941) 329-6004	bobjr@DLR.com	Technical Representative

Call Sign Request

Section	Question	Response
Permittee Initial Request	Requested Call Sign	KKEL
	File/Permit Number	0000195589
	Effective Date	10/01/2023
	The applicant submitting this request has obtained consent from the primary call sign holder to use the requested call sign.	N/A

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	**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.	**Norman H Shapiro** *Director, President, Secretary and Treasurer* 08/30/2023

Attachments

Information not provided.