

## Reduced Power Notification for a DTV Station Application

File Number: 0000068331		Submit Date: 03/06/2019	Call Sign: WRFB	Facility ID: 54443	FRN: 00	01729847	State:
Puerto Rico	City: CAROLINA						
Service: DTV	Purpose: Reduced Power Notification		n Status: Receive	d Status Date: 03/0	Status Date: 03/06/2019 Fili		:
Active							

General Information	Section	Question		Respon	se		
Applicant Information	Applicant Name, Type, and Contact Information						
	Applicant	Address	Phone	Email	Applicant Type		
	Telecinco, Inc.	Lymaris Rosa PO Box 43 Mayaguez, PR 00681 United States	+1 (787) 721-4054	Lrosa@telecincoinc.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
	<b>Alejandro Luciano , PE .</b> <i>Alejandro Luciano PE</i> Alejandro Luciano PE	Alejandro Luciano PE PO Box 194528 SAN JUAN, PR 00919 United States	+1 (787) 717- 6984	aluciano@aluciano. com	Technical Representative
	<b>Lee G. Petro</b> <i>FCC Counsel</i> Pillsbury Winthrop Shaw Pittman LLP	1200 Seventeenth Street NW Washington, DC 20036 United States	+1 (202) 663- 8113	Lee. Petro@PillsburyLaw. com	Legal Representative

Station Status	Question	Response
	Reduce Power Since:	02/23/2019

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.	Andres Ramirez de Arellano Paredes President
			03/06/2019

Attachments	File Name	Uploaded By	Attachment Type	Description
	WRFB - Notice of Resumption with Interim Facilities.pdf	Applicant	All Purpose	Notice