

## Suspension of Operations and Silent Authority of a DTV Station Application

File Number: 00	00068534 Submit Date: 03/15/2019	Call Sign: KMBH	Facility ID: 56079	FRN: 0001529627	State:
Texas City	HARLINGEN				
Service: DTV	Purpose: Request for Silence STA	Status: Granted	Status Date: 04/02/201	9 Expiration Date:	
09/11/2019	Filing Status: InActive				

General Information	Section	Question		Resp	onse		
Applicant	Applicant Name, Type, and Contact Information						
Information	Applicant	Address	Phone	Email	Applicant Type		
	MBTV TEXAS VALLEY LLC	21019 US Highway 281 N. Suite 830-59 San Antonio, TX 78258 United States	+1 (210) 854- 2761	dbarrera@rcommunications. com	Limited Liability Company		

## **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>Gregory L. Masters , Esq .</b> Wiley Rein LLP	1776 K Street, N.W. Washington, DC 20006 United States	+1 (202) 719- 7370	gmasters@wileyrein.com	Legal Representative
	Steven Avery Smith Station Engineer MBTV Texas Valley LLC	Steven A. Smith 1201 North Jackson Road Suite 900 McAllen, TX 78501 United States	+1 (956) 992- 8895	Steve. Smith@rcommunications.com	Technical Representative

Station Status	Question	Response
	Date Station Went Silent:	02/18/2019

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.	Robert L. Reed Manager of MB Revolution, LLC
			03/15/2019

Attachm	ents
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File Name	Uploaded By	Attachment Type	Description
KMBH(TV), Harlingen, TX. Notice of Suspension of Operation and Silent STA Request .pdf	Applicant	All Purpose	Notice of Suspension of Operation and Request for Silent STA