

(REFERENCE COPY - Not for submission) Request to Extend a Silent Authority of an FM Booster Station Application

File Number: BLESTA-20180919ABE | Submit Date: 09/19/2018 | Lead Call Sign: WDIN-FM2 | Facility ID: 178107

FRN: 0019890128

Service: FM Booster | Purpose: STA Extension | Status: Granted | Status Date: 10/16/2018 | Filing Status: Active

General Information

Section	Question	Response
Attachments	Are attachments (other than associated schedules) being filed with this application?	

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
NORTH COAST BROADCASTERS, INC. Applicant Doing Business As: NORTH COAST BROADCASTERS, INC.	8860 S.W. 105TH STREET MIAMI, FL 33176 United States	+1 (787) 724- 5173		ОТН

Contact Representatives (1)

Contact Name	Address	Phone	Email	Contact Type
SUSAN A. MARSHALL, ESQUIRE FLETCHER, HEALD & HILDRETH, PLC	1300 N.17TH ST 11TH FLOOR ARLINGTON, VA 22209-3801 United States	+1 (703) 812- 0400	MARSHALL@FHHLAW. COM	Legal Representative

Extension Request

Section	Question	Response
Extension Request	Reason for going silent:	Other
	Please enter the new requested expiration date:	

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 declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.

ISABEL RUIZ RODRIGUEZ

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
<u>1792471 1513943.txt</u>	Applicant	All Purpose	EXTRAORDINARY CIRCUMSTANCES REQUIRING STA EXTENSION	Done with Virus Scan and/or Conversion
D:\data\prod\cdbs\letters\\88\A- 1792471 F-178107 L-88221-BLESTA- 20180919ABE.pdf	Internal	All Purpose	imported letter	Done with Virus Scan and/or Conversion