

Call Sign Request

(REFERENCE COPY - Not for submission) Form 380 - Permittee Initial Request

 File Number:
 0000243498
 Submit Date:
 04/15/2024
 Lead Call Sign:
 WPFQ-LP
 Facility ID:
 780893

FRN: 0034369058

Service: Low Power FMPurpose: Call Sign Request (Permittee Initial)Status: GrantedStatus Date: 04/15/2024Filing Status: Active

Total number of rule sections involved in this waiver request:

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?	Yes
		Indicate reason for fee exemption:	Non-Profit
		Is the applicant exempt from FCC regulatory Fees?	Yes
	Waivers	Does this filing request a waiver of the Commission's rule	No

(s)?

Applicant	Applicant Name	Name, Type, and Contact Information					
Information	Applicant		Address	Phone	Email		Applicant Type
	Florida INC. d/b/a	Memorial Chapel at Penney Farms, d/b/a Penney Memorial ChurchPaul Lierman 4465 Poling Blvd. P.O. Box 354 Penney Farms, FL 32079 United States+1 (904) 284-4574penneychurch@gmail.NFP om	NFP				
Contact Representatives (1)	Contact Name Paul Lierman <i>Technical</i> <i>Consultant</i>	Address Paul Lierman P.O. Box 18 Penney Farms, FL	Phone +1 (904) 325- 5304	Email paullierma net	an@bellsouth.	Contact Technic Represe	al
	Self	32079 United States					

Section	Question	Response
Permittee Initial Request	Requested Call Sign	WPFQ-LP
	File/Permit Number	0000231453
	Effective Date	04/19/2024

The applicant submitting this request has obtained consent from the primary call sign holder to use the requested call sign.

N/A

\sim		
1.0		ation
	LIIVL	

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.	Weston Hyde Officer

Attachments

Information not provided.