

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

 File Number:
 BLESTA-20201019BNK
 Submit Date:
 10/19/2020
 Lead Call Sign:
 WRHB-LP
 Facility ID:
 194585

FRN: 0023063407

Service: Low Power FM Purpose: STA Extension Status: Granted Status Date: 12/09/2020 Filing Status: Active

General Information	Section	Question	Question			Response		
	Attachments Are attachments (other than associated schedules) being filed with this application?			es) being				
Applicant Information	Applicant Name, Type, and Contact Information							
mormation	Applicant			Address		Phone	Email	Applicant Type
	MIFFLIINVILLE COMMUNITY BROADCASTING, INC. Applicant Doing Business As: MIFFLIINVILLE COMMUNITY BROADCASTING, INC.		C.	BOX 289 W 7TH ST. MIFFLINVILLE, PA 18631 United States		+1 (579) 262 6200	-	ОТН
Contact Representatives (1)	Contact Name	Address	Pho		Email			Contact Type
	JOHN NEELY, ESQ MILLER AND NEELY PC	3750 UNIVERSITY BLVD. W. SUITE 203 KENSINGTON, MD 20895 United States	+1 630	(301) 933-)4	JOHNS COM	SNEELY@YAF		Legal Representative
Extension	Section	Question					Respons	5e
Request	Extension Request	Reason for going sil	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.	JON YOUNG

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
<u>1822594_1574522.txt</u>	Applicant	All Purpose	STA	Done with Virus Scan and/or Conversion
<u>D:\data\prod\cdbs\letters\\96\A-1822594_F-</u> 194585_L-96882-BLESTA-20201019BNK.pdf	Internal	All Purpose	imported letter	Done with Virus Scan and/or Conversion