Other



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

 File Number:
 BLSTA-20130618AAS
 Submit Date:
 06/18/2013
 Lead Call Sign:
 WHAZ-FM
 Facility ID:
 6765

FRN: 0003793460

Service: Full Power FMPurpose: Request for Silent STAStatus: GrantedStatus Date: 09/12/2013Filing Status:Inactive

General Information	Section	Questio	Question				Response		
	Attachments Are attachments (other than associated schedules) filed with this application?				hedules) being				
Applicant	Applicant Name, Type, and Contact Information								
Information	Applicant		Address Phone		Email		Applicant Type		
	CAPITAL MEDIA CORPO Applicant Doing Business As: CAPIT CORPORATION		30 PARK AVENUE COHOES, NY 12047 United States	+1 (518) 237 1330	- PAUL. LOTTERS@VEF NET	RIZON.	OTH		
Contact Representatives (1)	Contact Name A	ddress	Phone) E	Email	Co	ontact Type		
	ESQ. W WILEY REIN LLP 2	776 K STREET VASHINGTON, 0006 Inited States			/ILIPP@WILEYREIN. Legal COM Representative		-		
Station Status	Section	Questio	n			Response	e		
	Station Status Date the		station went/will go silent:			06/19/2013			

Reason for going silent:

	I declare, under penalty of perjury, that I am an authorized PAUL LO representative of the above-named applicant for the	TERS
uthorized 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). 	
	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.	

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
<u>1559435_1115504.txt</u>	Applicant	All Purpose	EXPLANATION FOR REQUEST TO SUSPEND OPERATIONS TEMPORARILY	Done with Virus Scan and/or Conversion
<u>D:\data\prod\cdbs\letters\\43\A-</u> 1559435 F-6765 L-43544-BLSTA- 20130618AAS.pdf	Internal	All Purpose	imported letter	Done with Virus Scan and/or Conversion