

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

File Number:0000194489Submit Date:07/05/2022Lead Call Sign:KGLE-FMFacility ID:767338

FRN: 0004076824

Service: Full Power FMPurpose: Call Sign Request (Permittee Initial)Status: GrantedStatus Date: 07/07/2022Filing Status: Inactive

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:	NC/E Permittee
	Is the applicant exempt from FCC regulatory Fees?	Yes
Waivers	Does this filing request a waiver of the Commission's rule (s)?	No
	Total number of rule sections involved in this waiver request:	

Applicant Applicant Name, Type, and Contact Information Information Applicant Phone Address Email **Applicant Type** Hi-Line Radio Fellowship, Inc. Roger Lonnquist +1 (406) 949-4308 ynopfm@gmail.com NFP PO Box 2426 Havre, MT 59501 **United States** Contact **Contact Name** Address Phone Email **Contact Type** Representatives (1)

Roger Lonnquist Hi-Line Radio Fellowship, Inc.	Roger Lonnquist PO Box 2426 Havre, MT 59501 United States	+1 (406) 949-4308	ynopfm@gmail.com	Network Genetral Manager

Call Sign Request

Section	Question	Response
Permittee Initial Request	Requested Call Sign	KGLE-FM
	File/Permit Number	0000167553
	Effective Date	07/12/2022
	The applicant submitting this request has obtained consent from the primary call sign holder to use the requested call sign.	Yes

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.	Brent Schellin <i>Chairman</i> 07/05/2022

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
Request for KGLE-	Applicant	Permittee Initial	Request for Call Sign	Done with Virus Scan and/or
FM.pdf		Request	KGLE-FM	Conversion