

(REFERENCE COPY - Not for submission) Request to Extend a Full Power FM Engineering STA Application

File Number:0000217491Submit Date:07/03/2023Lead Call Sign:KDLO-FMFacility ID:60865

FRN: 0023600190

Service: Full Power FM

Purpose: STA Extension Status: Granted

Filing Status: Active Status Date: 07/10/2023

General Information	Section	Question	Response
	Attachments	Are attachments (other than associated schedules) being filed with this application?	
Fees, Waivers, and Exemptions	Section	Question	Response
	Fees	Is the applicant exempt from FCC application Fees?	No
		Indicate reason for fee exemption:	
		Is the applicant exempt from FCC regulatory Fees?	No
	Waivers	Does this filing request a waiver of the Commission's rule (s)?	No
		Total number of rule sections involved in this waiver request:	

Application Type	Call Sign	Facility ID	Fee Code	Fee Amount
STA Extension			MVY	\$235.00
			Total	

Applicant Inform

Applicant Name, Type, and Contact Information

Information	Applicant	Address	Phone	Email	Applicant Type
	Alpha 3E Licensee LLC	1211 SW 5th Avenue Suite 750 Portland, OR 97204 United States	+1 (503) 517- 6200	john.grossi@alphamec com	diausa. LLC
Contact Representatives (1)	Contact Name	Address	Phone	Email	Contact Type
	Kathleen Kirby Wiley Rein LLP	2050 M Street, NW Washington, DC 20036 United States	+1 (202) 719-3360	kkirby@wiley.law	Legal Representative
Extension Request	Section	Question			Response
•	Extension Request	Please enter the	new requested expira	ation date:	01/04/2024

	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.	John Grossi Secretary 07/03/2023

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
KDLO-FM STA Exhibit.	Applicant	Extension	STA Extension	Done with Virus Scan and/or
pdf		Request	Exhibit	Conversion