

## Renewal of License

File Number: 00	00091476 Submit Date: 11/26/2	019 Call Sign: W	ABR Facility ID: 23925	FRN: 0001844976	State:
Georgia Ci	ity: <b>TIFTON</b>				
Service: FM	Purpose: Renewal of License	Status: Granted	Status Date: 03/12/2020	Expiration Date: 04/01/	2028
Filing Status: In	Active				

General Information	Section	Question	Response
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No
Fees, Waivers,	Section	Question	Response
and Exemptions	Waivors	Does this filing request a waiver of the Commission's rule(s)?	No

ivers,	Section	Question	Response	
nptions	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 Name, Type, and Contact Information

## Applicant Information

Applicant	Address	Phone	Email	Applicant Type
GEORGIA PUBLIC TELECOMMUNICATIONS COMMISSION Doing Business As: GEORGIA PUBLIC TELECOMMUNICATIONS COMMISSION	260 14TH ST NW ATLANTA, GA 30318 United States	+1 (404) 685-2619	elaprade@gpb. org	Government Entity

Contact	Contact Name	Address	Phone	Email	Contact Type
Representatives (1)	<b>Barry S. Persh</b> Gray Miller Persh LLP	2233 Wisconsin Ave., NW Suite 226 Washington, DC 20007 United States	+1 (202) 776- 2458	bpersh@graymillerpersh. com	Legal Representative

Renewal	Section	Question	Response
Certification	Character Issues	Licensee certifies that neither the licensee nor any party to the application has or has had any interest in, or connection with, any broadcast application in any proceeding where character issues were left unresolved, or were resolved adversely against the applicant or any party to the application;	Yes
		Licensee certifies that neither the licensee nor any party to the application has or has had any interest in, or connection with, any pending broadcast application in which character issues have been raised	Yes
	Adverse Findings	Licensee certifies that, with respect to the licensee and each party to the application, no adverse finding has been made, nor has an adverse final action been taken by any court or administrative body in a civil or criminal proceeding brought under the provisions of any laws related to any of the following: any felony; mass media-related antitrust or unfair competition; fraudulent statements to another governmental unit; or discrimination.	Yes
	FCC Violations during the Preceding License Term	Licensee certifies that, with respect to the station(s) for which renewal is requested, there have been no violations by the licensee of the Communications Act of 1934, as amended, or the rules or regulations of the Commission during the preceding license term. If "No", the licensee must submit an explanatory exhibit providing complete descriptions of all violations.	Yes
	Ownership	The licensee certifies that, with respect to the station(s) for which renewal is requested, it complied with 47 CFR Section 73.3555.	
	Alien Ownership and Control	Licensee certifies that it complies with the provisions of Section 310 of the Communications Act of 1934, as amended, relating to interests of aliens and foreign governments.	Yes
	Non-Discriminatory Advertising Sales Agreements	Commercial licensee certifies that its advertising sales agreements do not discriminate on the basis of race or ethnicity and that all such agreements held by the licensee contain non-discrimination clauses. Noncommercial licensees should select "not applicable."	N/A

Section	Question	Response
Biennial Ownership Report	Licensee certifies that the station's Biennial Ownership Report (FCC Form 323 or 323-E) has been filed with the Commission, as required by 47 C.F.R. Sections 73.3615 and 74.797.	Yes
EEO Program	The station's Broadcast EEO Program Report (FCC Form 396), has been filed with the Commission, as required by 47 C.F.R. Section 73.2080(f)(1).	Yes File Number: 0000091256
	The station has posted its most recent Broadcast EEO Public File Report on the station's website, as required by 47 C.F.R. Section 73.2080(c)(6).	N/A
Online Public Inspection File	Licensee certifies that the documentation required by 47 C.F. R. Section 73.3526 or 73.3527, as applicable, has been uploaded to the station's public inspection file as and when required.	Yes
Adherence to Minimum Operating Schedule	Licensee certifies that, during the preceding license term, the station has not been silent (or operating for less than its prescribed minimum operating hours) for any period of more than 30 days.	Yes
Silent Station	Licensee certifies that the station is currently on the air broadcasting programming intended to be received by the public.	Yes
Discontinued Operations	Licensee certifies that during the preceding license term, the station has not been silent for any consecutive 12-month period.	Yes
Environmental Effects	Licensee certifies that the specified facility complies with the maximum permissible radio frequency electromagnetic exposure limits for controlled and uncontrolled environments.	Yes

AM/FM/LPFM Certification

Other BroadCast	Section	Question	Response
Certifications	Other BroadCast Certifications	Does this application include one or more FM translator station(s) or TV translator station(s) or LPTV station(s), in addition to the station listed at the top of this section?	No

You have not selected any Other Broadcast Station.

FM Translator Certifications

General Certification Statements The Applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as againsthe 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 Aut of 1934, as amended.).   The Applicant certifies that neither the Applicant nor any other party to the application is subject to a denail of Ederal benefits pursuant to \$5501 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. §82C, Decause of a convoltion for possession or distriction of a controlled substance. This certification does not apply to applications of the application incorporated by reference are material, are part of this application, and are true, complete, correct, and made in agold faith.   Authorized Party to Sign FALURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFETTURE or Authorization requested in this application. Construction or coverage requirements. Failure to meet the construction or coverage requirements. Failure to meet the construction or coverage requirements. Failure to meet the construction or coverage requirements. Failure to The electron and the abused. Failure to The electron and the abused. Failure to meet the construction or coverage requirements. Failure to The electron and the abused. Failure to the elecone and the abused. Failure to the electron and the ab	Certification	Section	Question	Response
other party to the application is subject to a denial of Federal benefits pursuant to §301 of the Anti-Drug Abuse Act of 1998, 21 U.S. (\$82, because of a conviction for possession or distribution of a controlled substance. This certification does not apply to applications filed in services exempted under §1.0002(b) for the rules, 47 CFR. See §1. 2002(b) 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 cardification §1.0002(c) (c). The Application' as used in this cardification §1.0002(c) (c). The Application and are true, complete, correct, and made in 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 FFES PAID   Upon grant of this application, the Authorization Holder may be subject to cartain construction or coverage requirements. Failure to meet the construction or coverage requirements. VILLFUL FALSE STATEMENTS MADE ON THIS SPENCE AND OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND OR RANY ATTACHMENTS ARE PUNISHABLE BY FINE AND OR RANY ATTACHMENTS ARE PUNISHABLE BY FINE AND OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, §312(a)(1)), AND/OR FORFEITURE (U.S. Code			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	
DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAIDDismissal OF THE APPLICATION AND FORFEITURE OF ANY FEES PAIDUpon 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, §303).YesI certify that this application includes all required and relevant attachments.YesI declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for theElizabeth Laprade CFO			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	
relevant attachments. Elizabeth Laprade   I declare, under penalty of perjury, that I am an authorized Elizabeth Laprade   representative of the above-named applicant for the CFO		Authorized Party to Sign	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.	
representative of the above-named applicant for the CFO				Yes
Authorization(s) specified above. 11/26/2019				CFO

Information not provided.

## Attachments