

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

 File Number:
 BESTA-20170811ABF
 Submit Date:
 08/11/2017
 Lead Call Sign:
 WTHN
 Facility ID:
 91115

FRN: 0006703417

Service: Full Power FM Purpose: STA Extension

ension Status: Granted

Status Date: 08/15/2017 | Filing Status: Active

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?	Yes
	Indicate reason for fee exemption:	Noncommercial Educational Licensee or Permittee
	Is the applicant exempt from FCC regulatory Fees?	
Waivers	Does this filing request a waiver of the Commission's rule (s)?	
	Total number of rule sections involved in this waiver request:	

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
NORTHERN CHRISTIAN RADIO, INC. Applicant Doing Business As: NORTHERN CHRISTIAN RADIO, INC.	PO BOX 695 GAYLORD, MI 49734 United States	+1 (989) 732-6274	PAT@THEPROMISEFM. COM	ОТН

Contact Representatives (1)	Contact Name	Address	Phone	Email	Contact Type
	MATTHEW H. MCCORMICK FLETCHER, HEALD & HILDRETH, P.L.C.	1300 N. 17TH STREET 11TH FLOOR ARLINGTON, VA 22209 United States	+1 (703) 812- 0400	MCCORMICK@FH COM	IHLAW. Legal Representative
Extension Request	Section	Question		F	Response
	Extension Request	Please enter the new requested expiration date:			

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.	PAT SCOTT

Attachments	File Name	Uploaded By	Attachment Type	Description	Upload Status
	<u>1764469 1461454.txt</u>	Applicant	All Purpose	REASON FOR REQUEST	Done with Virus Scan and/or Conversion
	D:\data\prod\cdbs\letters\\78\A-1764469 F-91115 L- 78314-BESTA-20170811ABF.pdf	Internal	All Purpose	imported letter	Done with Virus Scan and/or Conversion