(REFERENCE COPY - Not for submission) **Full Power FM Digital Notification Application**

File Number: BDNH-20120210ABN | Submit Date: 02/10/2012 | Lead Call Sign: WTOP-FM | Facility ID: 11845

FRN: 0020603981

Status Date: **02/13/2012** Service: Full Power FM Purpose: **Digital Notification** Status: **Pending**

General
Information

Section	Question	Response
Attachments	Are attachments (other than associated schedules) being filed with this application?	

Applicant Name, Type, and Contact Information

Applicant

* *			
Information Applicant	Address	Phone	Email Applicant

WASHINGTON DC FCC LICENSE SUB, LLC 3415 UNIVERSITY

AVENUE, WEST

Applicant +1 (651) 642-OTH ST. PAUL, MN 55114 4334

Doing Business As: WASHINGTON DC FCC

LICENSE SUB, LLC **United States**

Contact Type Contact Name Address **Phone Email**

Contact Representatives **(1)**

2300 N STREET, NW

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+1 (202) 783- KSATTEN@WBKLAW. Legal WASHINGTON, DC 4141 COM Representative

WILKINSON BARKER KNAUER, LLP

20037

United States

The type of notification:

Digital Notification

United States				
Section	Question	Response		
The date new or modified digital operation commenced or ceased	The date new or modified digital operation commenced or ceased:	02/03/2012		
Licensee's Technical Representative:	First Name:	DAVID C. GARNER		
	Last Name:			
	Phone:	2028955056		
Effective Radiated Power	Analog (kW):	44.0000000		
	Digital (kW):	2.11000000		
Transmitter Output Power	Combined for low-level combined systems (kW):	22.0100000		
	Analog for separate analog systems (kW):			
	Digital for separate digital systems (kW):			
	Licensee certifies its analog effective radiated power will remain as authorized after commencement of digital operations			
	Licensee certifies that, except for digital power, its facilities conform to the iBiquity Digital Corporation hybrid specification	Yes		
	Licensee certifies that its interim digital operations will not cause human exposure to levels of radio frequency radiation in excess of Section 1.1310 of the Commission's rules and is therefore categorically excluded from environmental processing pursuant to Section 1.1306(b)			

Section Response Question Certification 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 **General Certification** Abuse Act of 1988, 21 U.S.C. § 862, because of a **Statements** 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. 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 **Authorized Party to** Authorization requested in this application. Sign 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.

authorized representative of the above-named applicant

I declare, under penalty of perjury, that I am an

for the Authorization(s) specified above.

DAVID A. JONES

Code, Title 47, §503).

Information not provided.

Attachments