

Federal Communications Commission

(REFERENCE COPY - Not for submission) Request to Extend a Silent Authority of a Full Power FM Station Application

 File Number:
 BLESTA-20160929AID
 Submit Date:
 09/29/2016
 Lead Call Sign:
 KMWC
 Facility ID:
 177107

 FRN:
 0008595118
 Service:
 Full Power FM
 Purpose:
 STA Extension
 Status:
 Dismissed
 Status Date:
 12/30/2016
 Filing Status:

 Inactive
 Inactive
 Inactive
 Inactive
 Inactive
 Inactive
 Inactive

General Information	Section	Question			Response		
	Attachments	Are attachments (other than associated schedules) being filed with this application?					
Applicant Information	Applicant Name, Type, and Contact Information						
Information	Applicant		Address	Phone	Email		Applicant Type
	PENFOLD COMMUNICATION Applicant Doing Business As: PENFOLD COMMUNICATIONS, INC.	S, INC.	P.O. BOX 890820 TEMECULA, CA 99258 United States	+1 (714) 545-7868	PATTI. SUTTON@KRTN COM	MRADIO.	ОТН
Contact	Contact Name	Addr	ess	Phone	Email		Contact Type
Representatives (1)							
	JOHN C. TRENT, ESQ. PUTBRESE HUNSAKER & TRENT, P.C.	200 SOUTH CHURCH STREET WOODSTOCK, VA 22664 United States		+1 (540) 459- FCCMAN3@ 7646 NET		SHENTEL.	Legal Representative
- / •							
Extension Request	Section	Questic	on			Response	9
	Extension Request	Reason	for going silent:			Other	
		Please enter the new requested expiration date:					

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.	JEFF SMITH

Attachments	File Name	Uploaded By	Attachment Type	Description	Upload Status
	<u>1740763 1420278.txt</u>	Applicant	All Purpose	NARRATIVE	Done with Virus Scan and/or Conversion