

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

File Number: BLSTA-20090409ADZ | Submit Date: 04/09/2009 | Lead Call Sign: KLWA | Facility ID: 164150

FRN: 0004121000

Service: Full Power FM | Purpose: Request for Silent STA | Status: Granted | Status Date: 11/06/2009 | Filing Status:

Active

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

| Applicant | Address | Phone | Email | Applicant Type |
|--|---|-----------------------|-------|----------------|
| COLLEGE CREEK MEDIA, LLC Applicant Doing Business As: COLLEGE CREEK MEDIA, LLC | 980 N. MICHIGAN AVENUE SUITE 1880 CHICAGO, IL 60611 United States | +1 (312) 204- 9900 | | OTH |

Contact Representatives (1)

| Contact Name | Address | Phone | Email | Contact Type |
|--|--|-----------------------|----------------------|-------------------------|
| AARON P. SHAINIS SHAINIS & PELTZMAN, CHARTERED | 1850 M STREET, N.W. SUITE 240 WASHINGTON, DC 20036 United States | +1 (202) 293- 0011 | AARON@S-PLAW. COM | Legal Representative |

Station Status

| Section | Question | Response |
|----------------|---------------------------------------|------------|
| Station Status | Date the station went/will go silent: | 04/02/2009 |
| | Reason for going silent: | Technical |

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.). | |
| | | |

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.

CHRISTOPHER F. DEVINE

Attachments

| File Name | Uploaded By | Attachment Type | Description | Upload Status |
|--|-------------|-----------------|-----------------|---|
| 1307356 745847.txt | Applicant | All Purpose | JUSTIFICATION | Done with Virus Scan and/or Conversion |
| D:\data\prod\cdbs\letters\\14\A-1307356 F- 164150 L-14921-BLSTA-20090409ADZ.pdf | Internal | All Purpose | imported letter | Done with Virus Scan and/or Conversion |