

# **Renewal of License**

File Number: 00	00181102	Submit Date: 01/25/2	022 Call Sign: W	271AW	Facility ID: 153	067	FRN: 0005828	8652
State: New Yo	State: New York City: JAY							
Service: FX	Purpose: F	Renewal of License	Status: Granted	Status Da	nte: 05/23/2022	Expirat	tion Date: 06/0	1/2030
Filing Status: A	ctive							

General Information	Section	Question	Response
	Attachments	Are attachments (other than associated schedules) being filed with this application?	No
Fees, Waivers,	Section	Question	Response

Fees, Waivers, and Exemptions

rs,	Section	Question	Response
ions	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
THE ST. LAWRENCE UNIVERSITY Doing Business As: North Country Public Radio	Station Manager The St. Lawrence University-NCPR 23 Romoda Drive CANTON, NY 13617 United States	+1 (315) 229-5356	Radio@NCPR. org	Private Not-for-Profit Educational Institution

Contact Representatives (2)	Contact Name	Address	Phone	Email	Contact Type
	<b>Donald E Martin</b> <i>Attorney</i> Law Offices of Donald E. Martin	PO Box 8433 Falls Church, VA 22041 United States	+1 (703) 642-2344	dempc@prodigy. net	Legal Representative
	<b>Keith Smeal</b> <i>CHIEF OPERATOR</i> The St. Lawrence University dba North Country Public Radio	The St. Lawrence University-NCPR 23 Romoda Drive CANTON, NY 13617 United States	+1 (315) 229-5336	Keith@ncpr.org	Technical 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.	Yes
	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

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

#### FM Translator Certifications (1)

Section	Question		Response
Operational Status	Silent Stations Licensee certifies that t	Yes	
	<b>Rebroadcast Status</b> Licensee certifies that t the signal of an FM, AN	Yes	
	Rebroadcast Statior		
	Call Sign		
	WXLU	66428	
	the licensee of the prim	t it has obtained written authority from hary station identified above for ary station's programming	Yes
Licensee Compliance	Section 74.1232(d), wh of: (1) a commercial pri station whose coverage protected contour of the being broadcast, and (2 and a FM translator sta the greater of either: (a commercial AM primary 25-mile radius centered commercial primary AM restriction also applies	it is in compliance with 47 C.F.R. hich prohibits the common ownership imary FM station and a FM translator e contour extends beyond the e commercial FM primary station 2) a commercial primary AM Station ation whose 60 dBu contour exceeds b) the 2 mV/m daytime contour of the y station being rebroadcast, or (b) a d at the transmitter site of the <i>M</i> station being rebroadcast. This to any person or entity having any ection with, the primary FM station or	Yes
	Section 74.1232(e) whi station whose coverage protected contour of the being rebroadcast, and dBu contour exceeds th contour of the commercial broadcast, or (b) a 25-r site of the commercial rebroadcast, from recei technical assistance), b directly or indirectly, fro	it is in compliance with 47 C.F.R. ich prohibits: (1) a FM translator e contour extends beyond the e commercial FM primary station d (2) a FM translator station whose 60 he greater of: (a) the 2 mV/m daytime cial AM primary station being mile radius centered at the transmitter primary AM station being iving support (except for specified before, during, or after construction, om the primary station, or any person erest in, or any connection with, the	N/A
Environmental Effects Licensee certifies that the specified facility complies with the maximum permissible radio frequency electromagnetic exposure limits for controlled and uncontrolled environments		Yes	

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	<ul> <li>FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID</li> <li>Upon grant of this application, the Authorization Holder may be subject to certain construction or coverage requirements.</li> <li>Failure to meet the construction or coverage requirements will result in automatic cancellation of the Authorization.</li> <li>Consult appropriate FCC regulations to determine the construction or coverage requirements that apply to the type of Authorization requested in this application.</li> <li>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).</li> </ul>	
		I certify that this application includes all required and relevant attachments.	Yes
		I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	<b>Stephen Hietsch</b> <i>VP Finance Administration</i> 01/25/2022

Information not provided.

#### Attachments