

(REFERENCE COPY - Not for submission) FM Translator Primary Station Notification Application

 File Number:
 0000195600
 Submit Date:
 07/25/2022
 Lead Call Sign:
 W223CJ
 Facility ID:
 158103

FRN: 0008627952

Service: FM TranslatorPurpose: Change of Primary Station NotificationStatus: GrantedStatus Date: 09/28/2022Filing Status: Active

General Information	Section	ection Question		Response			
Applicant	Applicant Name, Type, and Contact Information						
Information	Applicant		Address	Phone	Email	Applicant Type	
	CIRCUITWERKES, INC. Doing Business As: CIRCUITWERKES, INC.		Kyle Magrill 2805 NW 6TH STREET GAINESVILLE, FL 32609 United States	+1 (352) 335- 6555	cwerkes@gr com	mail. COR	
Contact Representatives (2)	Contact Name	Address	Phone	Email		Contact Type	
	Kyle Magrill , Magrill . <i>President</i> CircuitWerkes, Inc.	Kyle Magrill 2805 NW 6th Stre Gainesville, FL 32609 United States	+1 (352) 335- eet 6555	kyle@circuitwerk	es.com	Technical Representative	
	Kyle Magrill CircuitWerkes, Inc.	Kyle Magrill 2805 NW 6th Stre Gainesville, FL 32609 United States	+1 (352) 335- eet 6555	KYLE@CIRCUITWERKES. Legal Repre		Legal Representative	

Change of Primary Station	Section	Question	Response
	Primary Station	Facility ID	1246

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.	Kyle Magrill President 07/25/2022

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
Change of station for W223CJ	Applicant	Primary Station	Change W223CJ	Done with Virus Scan
to WIRK-HD3.pdf		Notification	Primary to WIRK-HD3	and/or Conversion