

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

 File Number:
 BLESTA-20191212AAG
 Submit Date:
 12/12/2019
 Lead Call Sign:
 K213FH
 Facility ID:
 147935

FRN: 0014711642

Service: FM TranslatorPurpose: STA ExtensionStatus: GrantedStatus Date: 01/08/2020Filing Status: Active

General Information	Section Questic		tion			Response			
			chments (other than associated schedules) being this application?						
Applicant	Applicant Name, Type, and Contact Information								
Information	Applicant		Address	Phone	Email	Applicant Type			
	CEDAR COVE BRO Applicant Doing Business As: (BROADCASTING, IN	CEDAR COVE	87 JASPER LAKE ROAD LOVELAND, CO 80537 United States	+1 (970) 669-9200	VICMICHAEL@A	OL. OTH			
Contact Representatives (1)	Contact Name A	ddress	Phone	Email	(Contact Type			
	L	7 JASPER LAKE RO OVELAND, CO 8053 Inited States	()	00 VICMICHA	EL@AOL.COM	Legal Representative			
Extension Request	Section Ques		lestion			Response			
	Extension Request Reason for		for going silent:		Techr	Technical			
	Please enter the new requested expiration date:								

General Certification StatementsThe 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.	VICTOR A MICHAEL, JR

Attachments

File Name	Uploaded By	Attachment Type	Description	Upload Status
<u>1813839_1556402.txt</u>	Applicant	All Purpose	SILENT STA EXTENSION REQUEST	Done with Virus Scan and/or Conversion
D:\data\prod\cdbs\letters\\93\A-1813839 F- 147935 L-93626-BLESTA-20191212AAG.pdf	Internal	All Purpose	imported letter	Done with Virus Scan and/or Conversion