\$190.00



Federal Communications Communications (REFERENCE COPY - Not for submission) Commission Are allowed DTV (Lewell OTA)

Analog LPTV Legal STA Application

 File Number:
 0000011181
 Submit Date:
 06/14/2016
 Call Sign:
 WORK-LP
 Facility ID:
 9764
 FRN:
 0020377248
 State:

 New Hampshire
 City:
 NASHUA

 Service:
 LPA
 Purpose:
 Legal STA
 Status:
 Granted
 Status Date:
 06/15/2016
 Expiration Date:
 12/19/2016
 Filing Status:

 Active
 Filing
 City:
 City:</t

General Information	Section	Question			Response
Fees, Waivers, and Exemptions	Section	Question		Response	
	Fees	Is the applicant exempt from FCC application Fees?		No	
		Indicate reason for fe	ee exemption:		
	Waivers	Does this filing reque	est a waiver of the Commission's	rule(s)?	No
		Total number of rule sections involved in this waiver request:			
					·
	Application Type		Fee Code	Fee Am	ount
	Legal STA		MGL	\$190.00)

Total

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
NEW HAMPSHIRE 1 NETWORK, INC. Doing Business As: NEW HAMPSHIRE 1 NETWORK, INC.	11 A STREET DERRY, NH 03038 United States	+1 (603) 845- 1000	MARK@CARLISLECAPITAL. COM	Corporation

Authorization Holder Name

Check box if the Authorization Holder name is being updated because of the sale (or transfer of control) of the Authorization(s) to another party and for which proper Commission approval has not been received or proper notification provided.

Contact Representatives (2)	Contact Name	Address	Phone	Email	Contact Type
	W. JEFFREY REYNOLDS TECHNICAL CONSULTANT DU TREIL, LUNDIN & RACKLEY	DU TREIL, LUNDIN & RACKLEY, INC. 201 FLETCHER AVENUE SARASOTA, FL 34237 United States	+1 (941) 329- 6000	JEFF@DLR.COM	Technical Representative
	KATHLEEN VICTORY , ESQ FCC COUNSEL FLETCHER, HEALD & HILDRETH, P.L.C.	1300 N. 17TH ST. 11TH FLOOR ARLINGTON, VA 22209 United States	+1 (703) 812- 0400	VICTORY@FHHLAW. COM	Legal Representative

Section	Question	Response
Facility ID	9764	
State	New Hampshire	
City	NASHUA	
LPA Channel	33	

Channel and

Facility Information

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 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.	Mark M. Graham Vice President 06/14/2016

Attachments

File Name	Uploaded By	Attachment Type	Description
<u>11181.pdf</u>	Internal	All Purpose	
WORK-LP-W03BR-D Nasua digital STA extension explanation (00862338xB3D1E).pdf	Applicant	General Information	