

## Request for Silent Authority of an Analog LPTV Station Application

 File Number: BERSTA-20040721ANA
 Submit Date: 07/21/2004
 Call Sign: KHTV-LP
 Facility ID: 60026
 FRN:

 0034811976
 State: California
 City: LOS ANGELES
 Expiration Date:
 Facility ID: 60026
 FRN:

 Service: LPA
 Purpose: Request for Silence STA
 Status: Granted
 Status Date: 08/12/2004
 Expiration Date:

 10/30/2004
 Filing Status: InActive
 Filing Status: InActive
 Filing Status: InActive
 Filing Status: InActive

General	Section	Question			Response			
Information								
Applicant Information	Applicant Name, Type, and Contact Information							
						Applicant		
	Applicant		Address	Phone	Email	Туре		
	VENTURE TECHNOLOGIES	GROUP, LLC	5670 WILSHIRE	+1 (323) 965-	btemple@loop.	Other		
	Applicant		BOULEVARD	5400	com			
	Doing Business As: VENTUR	E	SUITE 1300					
	TECHNOLOGIES GROUP, LL	_C	LOS ANGELES, CA					
			90036					
			United States					
	Authorization Holder Nam	ne						
	Check box if the Authoriza	tion Holder name is b	eing updated because of t	he sale (or transf	er of control) of the	<i>)</i>		

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.

Information not provided.

Contact Representatives (0)

Station Status	Question	Response	
	Date Station Went Silent:		

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. I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	

Information not provided.

## Attachments