**Section** 



## (REFERENCE COPY - Not for submission) LPTV Legal STA Application

Question

File Number: 0000008401 | Submit Date: 03/15/2016 | Call Sign: K14BF-D | Facility ID: 71523 | FRN: 0014511364

Response

State: Washington City: WENATCHEE

Service: LPD Purpose: Legal STA Status: Dismissed Status Date: 03/23/2016 Filing Status: InActive

#### General

#### **Information**

Fees,	Question	Response	
Waivers,	Is the applicant exempt from FCC application Fees?	Yes	
and Exemptions	Indicate reason for fee exemption:	The applicant is not exempt from FCC application fees, but the instant request is exempt. Please see exhibit regarding fee exemption.	
Waivers	Does this filing request a waiver of the Commission's rule(s)?  Total number of rule sections involved in this waiver	No	

### Applicant Information

#### **Applicant Name, Type, and Contact Information**

Applicant	Address	Phone	Email	Applicant Type
JUMPOFF RIDGE LLC Doing Business As: JUMPOFF RIDGE LLC	P.O. BOX 1229 MONROE, WA 98272 United States	+1 (425) 788- 2600	WALLACEJDW6@CS.	Limited Liability Company

#### **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	Contact Name	Address	Phone	Email	Contact Type
Representatives	Nathaniel J. Hardy SMala hlian & Donahue, PLLC	1420 Spring Hill Road Suite 401 McLean, VA 22102 United States	+1 (703) 714- 1322	njh@commlawgroup. com	Legal Representative

# Channel and Facility Information

Section	Question	Response
Facility ID	71523	
State	Washington	
City	WENATCHEE	
LPD Channel	14	

#### 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.	John D Wallace Managing Member 03/15/2016

#### **Attachments**

File Name	Uploaded By	Attachment Type	Description
SilentSTA.Exhibit.20160314.	Applicant	General Information	Justification for Extension of STA
SilentSTA.FeeExhibit. 20160314.pdf	Applicant	Fees, Waivers and Exemptions	Justification for Submission without Filing Fee