

Request for Silent Authority of a LPTV Station Application

File Number: 00	00074540	Submit Date: 06/06/2019	Call Sign: W30A2	Z-D Facility ID: 31643	FRN: 0028864346
State: New Yo	ate: New York City: ELLENVILLE				
Service: LPD	Purpose: F	Request for Silence STA	Status: Granted	Status Date: 06/06/2019	Expiration Date:
12/06/2019	Filing Status	InActive			

General	Section Question			Response		
Information						
Applicant	Applicant Name, Type, an	d Contact Informa	tion			
Information						Applicant
	Applicant		Address	Phone	Email	Туре
	JOHN MESTER INCOME FAI Applicant Doing Business As: JOHN ME FAMILY TRUST		682 ARGYLE ROAD BROOKLYN, NY 11230 United States	+1 (718) 859- 5172	frank. yee@verizon.net	Other
	Authorization Holder Nam)e				

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 (2)	JIm McDonald <i>ENGINEERING CONSULTANT</i> B. W. St. Clair	117 East Eleventh St. Loveland, CO 80537 United States	+1 (970) 593- 8443	jim@windriverbroadcast. com	Technical Representative
	Frank Yee <i>Technician</i> JOHN MESTER INCOME FAMILY TRUST	682 Argyle Rd. Brooklyn, NY 11230 United States	+1 (718) 434- 3244	frank.yee@verizon.net	Legal Representative

Station Status	Question	Response
	Date Station Went Silent:	05/30/2019

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.	Yes Natalie Mester Trustee
			1 <i>rustee</i> 06/06/2019

Attachments	Atta	ch	me	ents	5
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File Name	Uploaded By	Attachment Type	Description
<u>GrantSilentSTA_0000074540.</u> pdf	Internal	All Purpose	Special Temporary Authority to remain silent auto grant letter.
W30AZ Silent STA Statement. pdf	Applicant	General Information	W30AZ Silent STA