

## Administrative Update for a LPTV Station Application

File Number: 00	00124127	Submit Date: 10/06/2020	Call Sign: WDID	-LD Facility ID: 191242	FRN: 0026907345
State: Georgia	City: SA	VANNAH			
Service: LPD	Purpose: <b>/</b>	Administrative Update	Status: Received	Status Date: 10/06/2020	Filing Status: Active

General Information	Section	Question		Response		
Applicant	Applicant Name, Type, and Contact Information					
Information	Applicant	Address	Phone	Email	Applicant Type	
	HC2 BROADCASTING LICENSE INC.	RENEE ILHARDT 450 PARK AVENUE, 29TH FLOOR NEW YORK, NY 10022 United States	+1 (954) 606-5486	RILHARDT@HC2BROADCASTING. 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 (4)	Contact Name	Address	Phone	Email	Contact Type
	Paul A. Cicelski , Esq . Lerman Senter PLLC	2001 L St. NW Suite 400 Washington, DC 20036 United States	+1 (202) 416-6756	pcicelski@lermansenter.com	Legal Representative
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	<b>REBECCA HANSON</b> <i>EVP and General Counsel</i> HC2 BROADCASTING LICENSE INC.	REBECCA HANSON 450 PARK AVE, 29TH FLOOR NEW YORK, NY 10022 United States	+1 (212) 339-5832	RHANSON@HC2BROADCASTING. COM	Legal Representative
	<b>RENEE ILHARDT</b> HC2 BROADCASTING LICENSE INC.	RENEE ILHARDT 450 PARK AVE, 29TH FLOOR NEW YORK, NY 10022 United States	+1 (954) 606-5486	RILHARDT@HC2BROADCASTING. COM	CORPORATE REPRESENTATIVE

General Cortification Statements The Applicant valves any claim to the use of any particular frequency or of the electromagnetic spectrum as against the requercy or of the electromagnetic spectrum as against the end the same, whether by suthorization or deriveluse, and end uses 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 the application is abujed to a denial of Foderal 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 applicatione lifed in services scompted under §1 2002(c) the the rules, 47 CFR §1 2002(b), of the definition of party to the application' as used in this application and in the achibits, attachments, or documents incorporated by reference are material, are part of this application and in the achibits, 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 Upon grant of this application. the Authorization Holder may be subject to cortina construction or coverage requirements. Failure to meet the construction or coverage for quirements. Failure to meet the construction or coverage for Quirements will result in automatic cancellation of the Authorization requested in this application. House the post of Authorization requested in this application. Failure to meet the construction or coverage requirements. Failure to meet the construction or	Certification	Section	Question	Response
party to the application is subject to a denial of Federal benefits pursuant to \$5301 of the Anti-Dirug Abuse Act of 1986, 21 U.S. (582, because of a conviction for possession or distribution of a controlled substance. This certification does not apply to applications filed in services exempted under \$12002(c) of the nules, 47 CFR, See \$12002(c). The Application as used in this certification 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 FALLURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE 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 will result in automatic cancellation of the cancellation. Consult appropriate FCC regulations to determine the construction or coverage requirements will result in automatic cancellation of the Anthorization. Consult appropriate FCC regulations to determine the construction or coverage requirements will result in automatic cancellation of the Anthorization. Consult appropriate FCC regulations to determine the construction or coverage requirements will result in automatic cancellation. MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. Code, Title 47, \$1001, NAD/OR FORFEITURE (U.S. Code, Title 47, \$2101, NAD/OR FORFEITURE (U.S. Code, Title 47, \$2101, NAD/OR FORFEITURE (U.S. Code, Title 47, \$2102, \$101,			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	
DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAIDUpon 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).YesI certify that this application includes all required and relevant attachments.Yes			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	
attachments.   I declare, under penalty of perjury, that I am an authorized   REBECCA HANSON		Authorized Party to Sign	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.	
				Yes
Authorization(s) specified above. 10/06/2020			representative of the above-named applicant for the	GENERAL COUNSEL

Attachments	File Name	Uploaded By	Attachment Type	Description
	Form 316 Correction Statement October 2020. pdf	Applicant	All Purpose	Form_316_Correction_Statement_October_2020