

(REFERENCE COPY - Not for submission)

Suspension of Operations and Silent Authority of a LPTV Station Application

 File Number:
 000190672
 Submit Date:
 05/13/2022
 Call Sign:
 K30JM-D
 Facility ID:
 59021
 FRN:
 0002710192
 State:

 Colorado
 City:
 COLORADO SPRINGS
 Status:
 Granted
 Status:
 Date:
 05/23/2022
 Expiration Date:
 Status:
 Image: Colorado
 Status:
 Image: Colorado
 Status:
 Status:</t

General Information	Section	Question		Response		
Applicant	Applicant Name, Type, and Contact Information					
Information	Applicant	Address	Phone	Email	Applicant Type	
	Scripps Broadcasting Holdings LLC	David Giles C/O Scripps Media, Inc. 312 Walnut ST 28th Floor Cincinnati, OH 45202 United States	+1 (513) 977- 3000	dave.giles@scripps. com	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 (1)	Coe W. Ramsey Brooks, Pierce et al.	150 Fayetteville Street Suite 1700 Raleigh, NC 27601 United States	+1 (919) 839- 0300	cramsey@brookspierce.com	Legal Representative

Station Status	Question	Response	
	Date Station Went Silent:	05/06/2022	

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.	David Giles Vice President 05/13/2022

Attachments	File Name	Uploaded By	Attachment Type	Description	
	K30JM-D - Exhibit for Silent STA Request.pdf	Applicant	All Purpose	Exhibit for Silent STA Request	