

# **Renewal of License**

| File Number: 00  | 000191483  | Submit Date: 05/24/2 | 022 Call Sign: K | 300Q-D    | Facility ID: 167 | 083    | FRN: <b>000</b> | 05807458   |  |
|------------------|------------|----------------------|------------------|-----------|------------------|--------|-----------------|------------|--|
| State: Utah      | City: FREM | ONT                  |                  |           |                  |        |                 |            |  |
| Service: LPT     | Purpose: F | Renewal of License   | Status: Granted  | Status Da | te: 09/30/2022   | Expira | tion Date:      | 10/01/2030 |  |
| Filing Status: A | ctive      |                      |                  |           |                  |        |                 |            |  |

| General<br>Information | Section     | Question   | Response            |
|------------------------|-------------|--|---------------------|
|                        | Attachments | Are attachments (other than associated schedules) being filed with this application? | No                  |
|                        |             |  |                     |
| Fees, Waivers,         | Section     | Question   | Response            |
| and Exemptions         | Fees        | Is the applicant exempt from FCC application Fees?                                   | Yes                 |
|                        |             | Indicate reason for fee exemption:   | GOVERNMENTAL ENTITY |
|                        |             | Is the applicant exempt from FCC regulatory Fees?                                    | Yes                 |
|                        | Waivers     | Does this filing request a waiver of the Commission's rule(s)?                       | No                  |
|                        |             | Total number of rule sections involved in this waiver request:                       |                     |

## Applicant Name, Type, and Contact Information

## Applicant Information

| Applicant  | Address  | Phone                 | Email                      | Applicant Type       |
|--|--|-----------------------|----------------------------|----------------------|
| WAYNE COUNTY<br>Doing Business As: WAYNE<br>COUNTY | Colleen Allen<br>18 SOUTH MAIN<br>COURTHOUSE<br>BUILDING<br>LOA, UT 84747<br>United States | +1 (435) 836-<br>2765 | colleen@wayne.utah.<br>gov | Government<br>Entity |

| Contact<br>Representatives<br>(2) | Contact Name   | Address  | Phone                 | Email                        | Contact Type                |
|-----------------------------------|--|--|-----------------------|------------------------------|-----------------------------|
|                                   | <b>Colleen Allen</b><br><i>Treasurer/Recorder</i><br>Wayne County  | Colleen Allen<br>18 South Main<br>Courthouse<br>Building<br>Loa, UT 84747<br>United States | +1 (435) 836-<br>1303 | colleen@wayne.utah.gov       | Legal Representative        |
|                                   | REGGIE Kent<br>PARSONS<br>Technical Representative<br>Wayne County | Reggie Kent<br>Parsons<br>PO Box 473<br>MONROE, UT<br>84754<br>United States               | +1 (435) 979-<br>3727 | mauriparsons@hotmail.<br>com | Technical<br>Representative |

| Renewal       | Section   | Question  | Response |
|---------------|---|---|----------|
| Certification | Character Issues                                      | Licensee certifies that neither the licensee nor any party to<br>the application has or has had any interest in, or connection<br>with, any broadcast application in any proceeding where<br>character issues were left unresolved, or were resolved<br>adversely against the applicant or any party to the<br>application;   | Yes      |
|               |   | Licensee certifies that neither the licensee nor any party to<br>the application has or has had any interest in, or connection<br>with, any pending broadcast application in which character<br>issues have been raised   | Yes      |
|               | Adverse Findings                                      | Licensee certifies that, with respect to the licensee and each<br>party to the application, no adverse finding has been made,<br>nor has an adverse final action been taken by any court or<br>administrative body in a civil or criminal proceeding brought<br>under the provisions of any laws related to any of the<br>following: any felony; mass media-related antitrust or unfair<br>competition; fraudulent statements to another governmental<br>unit; or discrimination. | Yes      |
|               | FCC Violations during the<br>Preceding License Term   | Licensee certifies that, with respect to the station(s) for<br>which renewal is requested, there have been no violations<br>by the licensee of the Communications Act of 1934, as<br>amended, or the rules or regulations of the Commission<br>during the preceding license term. If "No", the licensee must<br>submit an explanatory exhibit providing complete<br>descriptions of all violations.   | Yes      |
|               | Ownership   | The licensee certifies that, with respect to the station(s) for which renewal is requested, it complied with 47 CFR Section 73.3555.  | Yes      |
|               | Alien Ownership and<br>Control                        | Licensee certifies that it complies with the provisions of<br>Section 310 of the Communications Act of 1934, as<br>amended, relating to interests of aliens and foreign<br>governments.   | Yes      |
|               | Non-Discriminatory<br>Advertising Sales<br>Agreements | Commercial licensee certifies that its advertising sales<br>agreements do not discriminate on the basis of race or<br>ethnicity and that all such agreements held by the licensee<br>contain non-discrimination clauses. Noncommercial<br>licensees should select "not applicable."   | Yes      |

| Other BroadCast | Section                           | Question   | Response |
|-----------------|-----------------------------------|--|----------|
| Certifications  | Other BroadCast<br>Certifications | Does this application include one or more FM translator<br>station(s) or TV translator station(s) or LPTV station(s), in<br>addition to the station listed at the top of this section? | Yes      |

#### Other Broadcast Station(s):

| Call Sign | Facility Id | Service Code |
|-----------|-------------|--------------|
| K28OL-D   | 167085      | LPT          |
| K34NZ-D   | 125504      | LPT          |
| K32MQ-D   | 167084      | LPT          |
| K35NE-D   | 167069      | LPT          |
| K33OL-D   | 167067      | LPT          |
| K36OH-D   | 125547      | LPT          |
| K31LA-D   | 183124      | LPT          |
| K29IV-D   | 182283      | LPT          |
| K30OQ-D   | 167083      | LPT          |

#### **TV Translator/ LPTV Certifications (9)**

#### Section Question Response **Operational Status** Silent Stations Licensee certifies the station is currently on the air Yes broadcasting programming intended to be received by the public. **Rebroadcast Status** Licensee certifies that the station is currently rebroadcasting Yes the signal of a full power TV, Class A TV, or LPTV station. **Rebroadcast Station(s):** Call Service Sign **Facility Id** code city State KSTU 22215 **Rebroadcast Consent** Licensee certifies that it has obtained written authority from Yes the licensee of the primary station identified above for retransmitting the primary station's programming **EEO Program Report** Licensee certifies that it has filed with the Commission the **File Number:** station's Broadcast EEO Program Report (Form 2100, Schedule 396), and has posted the most recent Public File Report on the station's website (if it has one), as required by 47 CFR Sections 73.2080(f)(1) and 73.2080(c)(6). **Environmental Effects** Licensee certifies that the specified facility complies with the Yes maximum permissible radio frequency electromagnetic exposure limits for controlled and uncontrolled environments. **Biennial Ownership Report** Licensee certifies that the station's Biennial Ownership Report (Form 2100, Schedules 323 or 323-E) has been filed with the Commission, as required by 47 CFR Section 74.797. **Discontinued Operations** Licensee certifies that during the preceding license term the Yes station has not been silent for any consecutive 12-month period. Adherence to Minimum Licensee certifies that during the preceding license term the Yes **Operating Schedules** station has not been silent (or operating for less than its prescribed minimum operating hours) for any period of more than 30 days. Adherence to Operating Licensee certifies that during the preceding license term the Yes **Parameters** station has operated pursuant to its authorized operating parameters, either pursuant to the terms of its license, special temporary authority, or as otherwise permitted under the Commission's rules.

#### Call Sign: K35NE-D

#### Call Sign: K34NZ-D

| Section            | Question   | Response |
|--------------------|--|----------|
| Operational Status |  |          |
| Silent Stations    | Licensee certifies the station is currently on the air<br>broadcasting programming intended to be received by the<br>public. | Yes      |

| Rebroadcast Status                          |  | certifies that the sta<br>of a full power TV,                             | •                   |        | -            | Yes |
|---|--|---|---------------------|--------|--------------|-----|
|   | Rebroadcast Station(s):  |   |                     |        |              |     |
|   | Call<br>Sign   | Facility Id   | Service<br>code     | city   | State        |     |
|   | KBYU-<br>TV  | 6823  |                     |        |              |     |
| Rebroadcast Consent                         | the licens   | certifies that it has c<br>ee of the primary sta<br>tting the primary sta | ation identified ab | ove fo |              | Yes |
| EEO Program Report                          | Licensee certifies that it has filed with the Commission the station's Broadcast EEO Program Report (Form 2100, Schedule 396), and has posted the most recent Public File Report on the station's website (if it has one), as required by 47 CFR Sections 73.2080(f)(1) and 73.2080(c)(6). |   |                     |        | File Number: |     |
| Environmental Effects                       | Licensee certifies that the specified facility complies with the maximum permissible radio frequency electromagnetic exposure limits for controlled and uncontrolled environments.   |   |                     |        | Yes          |     |
| Biennial Ownership Report                   | Licensee certifies that the station's Biennial Ownership<br>Report (Form 2100, Schedules 323 or 323-E) has been filed<br>with the Commission, as required by 47 CFR Section 74.797.  |   |                     |        |              |     |
| Discontinued Operations                     | Licensee certifies that during the preceding license term the station has not been silent for any consecutive 12-month period.   |   |                     | Yes    |              |     |
| Adherence to Minimum<br>Operating Schedules | Licensee certifies that during the preceding license term the station has not been silent (or operating for less than its prescribed minimum operating hours) for any period of more than 30 days.   |   |                     |        | Yes          |     |
| Adherence to Operating<br>Parameters        | Licensee certifies that during the preceding license term the<br>station has operated pursuant to its authorized operating<br>parameters, either pursuant to the terms of its license,<br>special temporary authority, or as otherwise permitted under<br>the Commission's rules.          |   |                     |        |              | Yes |

### Call Sign: K33OL-D

| Section                   | Question   | Response   |  |  |  |
|---------------------------|--|--|--|--|--|
| <b>Operational Status</b> |  |  |  |  |  |
| Silent Stations           | Licensee certifies the station is broadcasting programming int public. | Yes  |  |  |  |
| Rebroadcast Status        |  | Licensee certifies that the station is currently rebroadcasting<br>the signal of a full power TV, Class A TV, or LPTV station.<br><b>Rebroadcast Station(s):</b> |  |  |  |
|                           | Call<br>Sign Facility Id   |  |  |  |  |
|                           | KUED 69396   | KUED 69396   |  |  |  |

| Rebroadcast Consent                         | Licensee certifies that it has obtained written authority from<br>the licensee of the primary station identified above for<br>retransmitting the primary station's programming   | Yes          |
|---|--|--------------|
| EEO Program Report                          | Licensee certifies that it has filed with the Commission the station's Broadcast EEO Program Report (Form 2100, Schedule 396), and has posted the most recent Public File Report on the station's website (if it has one), as required by 47 CFR Sections 73.2080(f)(1) and 73.2080(c)(6). | File Number: |
| Environmental Effects                       | Licensee certifies that the specified facility complies with the maximum permissible radio frequency electromagnetic exposure limits for controlled and uncontrolled environments.   | Yes          |
| Biennial Ownership Report                   | Licensee certifies that the station's Biennial Ownership<br>Report (Form 2100, Schedules 323 or 323-E) has been filed<br>with the Commission, as required by 47 CFR Section 74.797.  |              |
| Discontinued Operations                     | Licensee certifies that during the preceding license term the station has not been silent for any consecutive 12-month period.   | Yes          |
| Adherence to Minimum<br>Operating Schedules | Licensee certifies that during the preceding license term the station has not been silent (or operating for less than its prescribed minimum operating hours) for any period of more than 30 days.   | Yes          |
| Adherence to Operating<br>Parameters        | Licensee certifies that during the preceding license term the<br>station has operated pursuant to its authorized operating<br>parameters, either pursuant to the terms of its license,<br>special temporary authority, or as otherwise permitted under<br>the Commission's rules.          | Yes          |

### Call Sign: K32MQ-D

| Section                   | Question   | Response     |
|---------------------------|--|--------------|
| <b>Operational Status</b> |  |              |
| Silent Stations           | Licensee certifies the station is currently on the air<br>broadcasting programming intended to be received by the<br>public.   | Yes          |
| Rebroadcast Status        | Licensee certifies that the station is currently rebroadcasting the signal of a full power TV, Class A TV, or LPTV station.  | Yes          |
|                           | Rebroadcast Station(s):  |              |
|                           | CallServiceSignFacility IdcodecityState  |              |
|                           | KTVX 68889   |              |
| Rebroadcast Consent       | Licensee certifies that it has obtained written authority from<br>the licensee of the primary station identified above for<br>retransmitting the primary station's programming   | Yes          |
| EEO Program Report        | Licensee certifies that it has filed with the Commission the station's Broadcast EEO Program Report (Form 2100, Schedule 396), and has posted the most recent Public File Report on the station's website (if it has one), as required by 47 CFR Sections 73.2080(f)(1) and 73.2080(c)(6). | File Number: |
| Environmental Effects     | Licensee certifies that the specified facility complies with the maximum permissible radio frequency electromagnetic exposure limits for controlled and uncontrolled environments.   | Yes          |

| Biennial Ownership Report                   | Licensee certifies that the station's Biennial Ownership<br>Report (Form 2100, Schedules 323 or 323-E) has been filed<br>with the Commission, as required by 47 CFR Section 74.797.   |     |
|---|---|-----|
| Discontinued Operations                     | Licensee certifies that during the preceding license term the station has not been silent for any consecutive 12-month period.  | Yes |
| Adherence to Minimum<br>Operating Schedules | Yes   |     |
| Adherence to Operating<br>Parameters        | Licensee certifies that during the preceding license term the<br>station has operated pursuant to its authorized operating<br>parameters, either pursuant to the terms of its license,<br>special temporary authority, or as otherwise permitted under<br>the Commission's rules. | Yes |

### Call Sign: K31LA-D

| Section                                     | Question   | Response     |
|---|--|--------------|
| Operational Status                          |  |              |
| Silent Stations                             | Licensee certifies the station is currently on the air<br>broadcasting programming intended to be received by the<br>public.   | Yes          |
| Rebroadcast Status                          | Licensee certifies that the station is currently rebroadcasting the signal of a full power TV, Class A TV, or LPTV station.  | Yes          |
|   | Rebroadcast Station(s):  |              |
|   | CallServiceSignFacility IdcodecityState  |              |
|   | KTTA- 181507<br>LD   |              |
| Rebroadcast Consent                         | Licensee certifies that it has obtained written authority from<br>the licensee of the primary station identified above for<br>retransmitting the primary station's programming   | Yes          |
| EEO Program Report                          | Licensee certifies that it has filed with the Commission the station's Broadcast EEO Program Report (Form 2100, Schedule 396), and has posted the most recent Public File Report on the station's website (if it has one), as required by 47 CFR Sections 73.2080(f)(1) and 73.2080(c)(6). | File Number: |
| Environmental Effects                       | Licensee certifies that the specified facility complies with the maximum permissible radio frequency electromagnetic exposure limits for controlled and uncontrolled environments.   | Yes          |
| Biennial Ownership Report                   | Licensee certifies that the station's Biennial Ownership<br>Report (Form 2100, Schedules 323 or 323-E) has been filed<br>with the Commission, as required by 47 CFR Section 74.797.  |              |
| Discontinued Operations                     | Licensee certifies that during the preceding license term the station has not been silent for any consecutive 12-month period.   | Yes          |
| Adherence to Minimum<br>Operating Schedules | Licensee certifies that during the preceding license term the station has not been silent (or operating for less than its prescribed minimum operating hours) for any period of more than 30 days.   | Yes          |

| Adherence to Operating<br>Parameters | Licensee certifies that during the preceding license term the<br>station has operated pursuant to its authorized operating<br>parameters, either pursuant to the terms of its license,<br>special temporary authority, or as otherwise permitted under<br>the Commission's rules. | Yes |
|--------------------------------------|---|-----|
|--------------------------------------|---|-----|

### Call Sign: K29IV-D

| Section                                     | Question   | Response     |
|---|--|--------------|
| Operational Status                          |  |              |
| Silent Stations                             | Licensee certifies the station is currently on the air<br>broadcasting programming intended to be received by the<br>public.   | Yes          |
| Rebroadcast Status                          | Licensee certifies that the station is currently rebroadcasting the signal of a full power TV, Class A TV, or LPTV station.  | Yes          |
|   | Rebroadcast Station(s):  |              |
|   | CallServiceSignFacility IdcodecityState  |              |
|   | KUEN 69582   |              |
| Rebroadcast Consent                         | Licensee certifies that it has obtained written authority from<br>the licensee of the primary station identified above for<br>retransmitting the primary station's programming   | Yes          |
| EEO Program Report                          | Licensee certifies that it has filed with the Commission the station's Broadcast EEO Program Report (Form 2100, Schedule 396), and has posted the most recent Public File Report on the station's website (if it has one), as required by 47 CFR Sections 73.2080(f)(1) and 73.2080(c)(6). | File Number: |
| Environmental Effects                       | Licensee certifies that the specified facility complies with the maximum permissible radio frequency electromagnetic exposure limits for controlled and uncontrolled environments.   | Yes          |
| Biennial Ownership Report                   | Licensee certifies that the station's Biennial Ownership<br>Report (Form 2100, Schedules 323 or 323-E) has been filed<br>with the Commission, as required by 47 CFR Section 74.797.  |              |
| Discontinued Operations                     | Licensee certifies that during the preceding license term the station has not been silent for any consecutive 12-month period.   | Yes          |
| Adherence to Minimum<br>Operating Schedules | Licensee certifies that during the preceding license term the station has not been silent (or operating for less than its prescribed minimum operating hours) for any period of more than 30 days.   | Yes          |
| Adherence to Operating<br>Parameters        | Licensee certifies that during the preceding license term the<br>station has operated pursuant to its authorized operating<br>parameters, either pursuant to the terms of its license,<br>special temporary authority, or as otherwise permitted under<br>the Commission's rules.          | Yes          |

#### Call Sign: K28OL-D

| Section            | Question | Response |
|--------------------|----------|----------|
| Operational Status |          |          |

| Silent Stations                             | Licensee certifies the station is curre<br>broadcasting programming intended<br>public.   | Yes                                      |     |
|---|---|--|-----|
| Rebroadcast Status                          | Licensee certifies that the station is of<br>the signal of a full power TV, Class A<br><b>Rebroadcast Station(s):</b>   | Yes                                      |     |
|   |   | Service                                  |     |
|   |   | code city State                          |     |
|   | KSL- 6359<br>TV   |  |     |
| Rebroadcast Consent                         | Licensee certifies that it has obtained<br>the licensee of the primary station id<br>retransmitting the primary station's p   | entified above for                       | Yes |
| EEO Program Report                          | Licensee certifies that it has filed with<br>station's Broadcast EEO Program Re<br>Schedule 396), and has posted the r<br>Report on the station's website (if it h<br>47 CFR Sections 73.2080(f)(1) and 7 | File Number:                             |     |
| Environmental Effects                       | Licensee certifies that the specified f<br>maximum permissible radio frequence<br>exposure limits for controlled and un   | Yes                                      |     |
| Biennial Ownership Report                   | Licensee certifies that the station's B<br>Report (Form 2100, Schedules 323 of<br>with the Commission, as required by   |  |     |
| Discontinued Operations                     | Licensee certifies that during the pre<br>station has not been silent for any co<br>period.   | Yes                                      |     |
| Adherence to Minimum<br>Operating Schedules | Licensee certifies that during the prestation has not been silent (or operation prescribed minimum operating hours than 30 days.  | Yes                                      |     |
| Adherence to Operating<br>Parameters        | Licensee certifies that during the pre-<br>station has operated pursuant to its a<br>parameters, either pursuant to the te<br>special temporary authority, or as oth<br>the Commission's rules.           | authorized operating rms of its license, | Yes |

### Call Sign: K36OH-D

| Section            | Question   | Response |
|--------------------|--|----------|
| Operational Status |  |          |
| Silent Stations    | Licensee certifies the station is currently on the air<br>broadcasting programming intended to be received by the<br>public. | Yes      |

| Rebroadcast Status                          | Licensee certifies that the station is currently rebroadcasting<br>the signal of a full power TV, Class A TV, or LPTV station.<br><b>Rebroadcast Station(s):</b>   |  |                    |        | Yes   |              |
|---|--|--|--------------------|--------|-------|--------------|
|   |  |  |                    |        |       |              |
|   | Call<br>Sign   | Facility Id  | Service<br>code    | city   | State |              |
|   | KJZZ-<br>TV  | 36607  |                    |        |       |              |
| Rebroadcast Consent                         | the licens   | e certifies that it has o<br>see of the primary sta<br>itting the primary stat | tion identified ab | ove fo |       | Yes          |
| EEO Program Report                          | Licensee certifies that it has filed with the Commission the station's Broadcast EEO Program Report (Form 2100, Schedule 396), and has posted the most recent Public File Report on the station's website (if it has one), as required by 47 CFR Sections 73.2080(f)(1) and 73.2080(c)(6). |  |                    |        |       | File Number: |
| Environmental Effects                       | Licensee certifies that the specified facility complies with the maximum permissible radio frequency electromagnetic exposure limits for controlled and uncontrolled environments.   |  |                    |        |       | Yes          |
| Biennial Ownership Report                   | Licensee certifies that the station's Biennial Ownership<br>Report (Form 2100, Schedules 323 or 323-E) has been filed<br>with the Commission, as required by 47 CFR Section 74.797.  |  |                    |        |       |              |
| Discontinued Operations                     | Licensee certifies that during the preceding license term the station has not been silent for any consecutive 12-month period.   |  |                    |        |       | Yes          |
| Adherence to Minimum<br>Operating Schedules | Licensee certifies that during the preceding license term the station has not been silent (or operating for less than its prescribed minimum operating hours) for any period of more than 30 days.   |  |                    |        |       | Yes          |
| Adherence to Operating<br>Parameters        | Licensee certifies that during the preceding license term the<br>station has operated pursuant to its authorized operating<br>parameters, either pursuant to the terms of its license,<br>special temporary authority, or as otherwise permitted under<br>the Commission's rules.          |  |                    |        | Yes   |              |

### Call Sign: K30OQ-D

| Section            | Question   | Response      |
|--------------------|--|---------------|
| Operational Status |  |               |
| Silent Stations    | Licensee certifies the station is currently on the air<br>broadcasting programming intended to be received b<br>public.                              | Yes<br>by the |
| Rebroadcast Status | Licensee certifies that the station is currently rebroad<br>the signal of a full power TV, Class A TV, or LPTV sta<br><b>Rebroadcast Station(s):</b> | •             |
|                    | Call<br>SignService<br>codecityKUTV35823   | State         |

| Rebroadcast Consent                         | Licensee certifies that it has obtained written authority from<br>the licensee of the primary station identified above for<br>retransmitting the primary station's programming   | Yes          |
|---|--|--------------|
| EEO Program Report                          | Licensee certifies that it has filed with the Commission the station's Broadcast EEO Program Report (Form 2100, Schedule 396), and has posted the most recent Public File Report on the station's website (if it has one), as required by 47 CFR Sections 73.2080(f)(1) and 73.2080(c)(6). | File Number: |
| Environmental Effects                       | ectsLicensee certifies that the specified facility complies with the<br>maximum permissible radio frequency electromagnetic<br>exposure limits for controlled and uncontrolled environments.Yes  |              |
| Biennial Ownership Report                   | Licensee certifies that the station's Biennial Ownership<br>Report (Form 2100, Schedules 323 or 323-E) has been filed<br>with the Commission, as required by 47 CFR Section 74.797.  |              |
| Discontinued Operations                     | Licensee certifies that during the preceding license term the station has not been silent for any consecutive 12-month period.   | Yes          |
| Adherence to Minimum<br>Operating Schedules | Licensee certifies that during the preceding license term the station has not been silent (or operating for less than its prescribed minimum operating hours) for any period of more than 30 days.   | Yes          |
| Adherence to Operating<br>Parameters        | Licensee certifies that during the preceding license term the<br>station has operated pursuant to its authorized operating<br>parameters, either pursuant to the terms of its license,<br>special temporary authority, or as otherwise permitted under<br>the Commission's rules.          | Yes          |

| Certification | Section                             | Question  | Response   |
|---------------|-------------------------------------|---|--|
|               | General Certification<br>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<br>other party to the application is subject to a denial of Federal<br>benefits pursuant to §5301 of the Anti-Drug Abuse Act of<br>1988, 21 U.S.C. §862, because of a conviction for<br>possession or distribution of a controlled substance. This<br>certification does not apply to applications filed in services<br>exempted under §1.2002(c) of the rules, 47 CFR . See §1.<br>2002(b) of the rules, 47 CFR §1.2002(b), for the definition of<br>"party to the application" as used in this certification §1.2002<br>(c). The Applicant certifies that all statements made in this<br>application and in the exhibits, attachments, or documents<br>incorporated by reference are material, are part of this<br>application, and are true, complete, correct, and made in<br>good faith.  |  |
|               | Authorized Party to Sign            | <ul> <li>FAILURE TO SIGN THIS APPLICATION MAY RESULT IN<br/>DISMISSAL OF THE APPLICATION AND FORFEITURE<br/>OF ANY FEES PAID</li> <li>Upon grant of this application, the Authorization Holder may<br/>be subject to certain construction or coverage requirements.</li> <li>Failure to meet the construction or coverage requirements<br/>will result in automatic cancellation of the Authorization.</li> <li>Consult appropriate FCC regulations to determine the<br/>construction or coverage requirements that apply to the type<br/>of Authorization requested in this application.</li> <li>WILLFUL FALSE STATEMENTS MADE ON THIS FORM<br/>OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND<br/>/OR IMPRISONMENT (U.S. Code, Title 18, §1001) AND/OR<br/>REVOCATION OF ANY STATION AUTHORIZATION (U.S.<br/>Code, Title 47, §312(a)(1)), AND/OR FORFEITURE (U.S.<br/>Code, Title 47, §503).</li> </ul> |  |
|               |                                     | 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.  | <b>Reggie Parsons</b><br><i>Technical Representative</i><br>05/24/2022 |

Information not provided.

#### Attachments