

(REFERENCE COPY - Not for submission)

LPTV Translator Legal STA Application

File Number: 0000199227 | Submit Date: 09/02/2022 | Call Sign: W08EE-D | Facility ID: 167357 | FRN: 0002017572

State: West Virginia City: MARTINSBURG

Service: LPT Purpose: Legal STA Status: Granted Status Date: 10/27/2022 Expiration Date: 12/15/2022 Filing Status:

Active

General Information

Section Question Response

Fees, Waivers, and Exemptions

Section	Question	Response
Fees	Is the applicant exempt from FCC application Fees?	Yes
	Indicate reason for fee exemption:	Non-commercial educational station
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 Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
WEST VIRGINIA EDUCATIONAL BROADCASTING AUTHORITY Doing Business As: WEST VIRGINIA EDUCATIONAL BROADCASTING AUTHORITY	Carl J. Antolini III 600 CAPITOL STREET CHARLESTON, WV 25301 United States	+1 (304) 556-4903	bantolini@wvpublic. org	Government Entity

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 (2)

Contact Name	Address	Phone	Email	Contact Type
Virginia D Hiner FCC Counsel	2001 K Street Northwest	+1 (202) 887- 4424	vhiner@akingump.com	Legal Representative
Akin Gump Strauss Hauer & Feld, LLP	Washington, DC 20006 United States			
RYAN WILHOUR	507 NW 60th ST	+1 (352) 332-	ryan@kesslerandgehman.	Technical
CONSULTING ENGINEER	Suite D	3157	com	Representative
Kessler and Gehman	Gainesville, FL			
Associates, Inc.	32607			
	United States			

Channel and Facility Information

Section	Question	Response
Facility ID	167357	
State	West Virginia	
City	MARTINSBURG	
LPT Channel	8	_

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.	Carl J Antolini , III . Executive Director 09/02/2022

Attachments

File Name	Uploaded By	Attachment Type	Description
Extension of Invoice Filing Deadline - Martinsburg.pdf	Applicant	All Purpose	Request for Extension of Invoice Deadline
WVEBA grant InvoiceDeadlineExtension.pdf	Internal	All Purpose	