

FOR  
FCC  
USE  
ONLY

# FCC 302-DTV

## APPLICATION FOR DIGITAL TELEVISION BROADCAST STATION LICENSE

FOR COMMISSION USE ONLY  
FILE NO.

### Section I - General Information

1. Legal Name of the Licensee/Permittee		
Mailing Address		
City	State or Country (if foreign address)	ZIP Code
Telephone Number (include area code)		E-Mail Address (if available)
FCC Registration Number	Call Sign	Facility Identifier
2. Contact Representative (if other than licensee/permittee)		Firm or Company Name
Mailing Address		
City	State or Country (if foreign address)	ZIP Code
Telephone Number (include area code)		E-Mail Address (if available)

3. If this application has been submitted without a fee, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114):

Governmental Entity       Noncommercial Educational Licensee       Other \_\_\_\_\_

4. Facility Information:

a.  Commercial       Noncommercial  
b.  Main       Auxiliary       DTV - S

c. Community of License:      

City _____	State _____
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5. **Program Test Authority:**

Requesting program test authority.  
 Station operating pursuant to automatic program test authority (47 C.F.R. Section 73.1620(a)(1)).

