

FCC Form 2100

Application for Media Bureau Audio and Video Service Authorization

Schedule B

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General Information

 Attachments  Draft Copy

** indicates required field*

Application Description

Description of the application(255 characters max.) is visible only to you and is not part of the submitted application. It will be displayed in your Applications workspace.

Attachments

* Are attachments (other than associated schedules) being filed with this application?

Yes No [« Clear](#)

[Cancel](#)

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Fees, Waivers and Exemptions

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** Indicates required field*

Fees

* Is the applicant exempt from FCC application Fees?

Yes No [« Clear](#)

* Is the applicant exempt from FCC regulatory Fees?

Yes No [« Clear](#)

Waivers

* Does this filing request a waiver of the Commission's rule(s)?

Yes No [« Clear](#)

* Are the frequencies or parameters requested in this filing covered by grandfathered privileges, previously approved by waiver, or functionally integrated with an existing station?

Yes No [« Clear](#)

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Applicant Information

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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.

Applicant Name and Type

[Pre-fill Applicant Details](#)

* Applicant Type: Corporation

* Company Name: Hutton Broadcasting, Inc.

Doing Business As:

Applicant Contact Information

Attention To: Ted Hutton

* Country: United States

PO Box: *Either PO Box or Address Line 1 is required.*

* Address Line 1:

Address Line 2:

* City:

* State: Virginia

* Zip Code:

* Phone: 505-471-1067

* Email: ted@huttonbroadcasting.com

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Contact Representatives

[Add Contact](#)

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Mrs. Jordan Perello, Ph.D.
Director of Engineering

[Delete](#) [Edit](#)

Address: 1300 North 17th Street
11th Floor
Arlington, VA 22209
USA

Contact Type: Legal Representative
Company: Fletcher, Heald & Hildreth, P.L.C.

Phone: +1 (703) 812-0400
Email: montero@fhhlaw.com

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Add Contact Representative

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* indicates required field

[View Contact Representatives »](#)

Contact Type

* Please select the contact type:

* Please select the contact type:

- Legal Representative
- Technical Representative
- Other

Contact Name

* First Name:

Middle Name:

* Last Name:

Suffix:

Title:

* Company Name:

Contact Information

Attention To:

* Country:

PO Box: Either PO Box or Address Line 1 is required.

* Address Line 1:

Address Line 2:

* City:

* State:

* Zip Code:

* Phone:

* Email:

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Alien Ownership

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* Indicates required field

✖ Please see errors below.

* 1) Is the applicant a foreign government or the representative of any foreign government as specified in Section 310(a) of the Communications Act?
 Yes No [« Clear](#)

* 2) Is this application, as provided for under Section 310(b) of the Communications Act, for a broadcast, common carrier, aeronautical en route, or aeronautical fixed radio station Authorization?
 Yes No [« Clear](#)

⚠ Please upload the required information which includes an attachment explaining the circumstances.

* 3) Is the applicant an alien or the representative of an alien? (Section 310(b)(1))
 Yes No [« Clear](#)

* 4) Is the applicant a corporation, or non-corporate entity, that is organized under the laws of any foreign government? (Section 310(b)(2))
 Yes No [« Clear](#)

* 5) Is the applicant an entity of which more than one-fifth of the capital stock, or other equity or voting interest, is owned of record or voted by aliens or their representatives or by a foreign government or representative thereof or by any entity organized under the laws of a foreign country? (Section 310(b)(3))
 Yes No [« Clear](#)

* 6) Is the applicant directly or indirectly controlled by any other entity of which more than one-fourth of the capital stock, or other equity or voting interest, is owned of record or voted by aliens, their representatives, or by a foreign government or representative thereof, or by any entity organized under the laws of a foreign country? (Section 310(b)(4))
 Yes No [« Clear](#)

⚠ Please upload the required information which includes an attachment explaining the circumstances.

* 7) Has the applicant received a ruling(s) under Section 310(b)(4) of the Communications Act with respect to the same radio service involved in this application?
 Yes No [« Clear](#)

⚠ Please upload the required information which includes an exhibit containing the citation(s) of the applicable declaratory ruling(s) by DA/FCC number or the FCC Record citation, if available, release date, and any other identifying information.

* 8) Has there been any change in the applicant's foreign ownership since issuance of the declaratory ruling(s) cited in response to Question 7?
 Yes No [« Clear](#)

* 9) Does the applicant's foreign ownership comply with the declaratory ruling(s) cited in response to Question 7?
 Yes No [« Clear](#)

⚠ Please upload the required information which includes an exhibit demonstrating compliance with the declaratory ruling(s).

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Basic Qualifying Questions

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Revoked Authorization

* Has the Applicant or any party to this application had any FCC station Authorization revoked or had any application for an initial, modification or renewal of FCC station Authorization denied by the Commission?

Yes No [« Clear](#)

State or Federal Convictions

* Has the Applicant or any party to this application, or any party directly or indirectly controlling the Applicant, ever been convicted of a felony by any state or federal court?

Yes No [« Clear](#)

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Channel and Facility Information

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* Indicates required field

Proposed Community of License

Facility ID: 012345689

* State:

* City:

* DTV Channel:

Facility Type

* Please select a facility type:

- Commercial
- Noncommercial Educational

Station Type

* Please select a Station type:

- Main
- Auxiliary

Zone

* Please select a zone:

- I
- II
- III

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* Indicates required field

Antenna Structure Registration

*Do you have an FCC Antenna Structure Registration (ASR) Number?

Answer: No

Coordinates (NAD83)

Coordinates for each Site must be unique.

* Latitude (NAD83):	DD	MM	SS.S	Direction
	<input type="text"/>	<input type="text"/>	<input type="text"/>	N+ <input type="button" value="v"/>
* Longitude (NAD83):	DDD	MM	SS.S	Direction
	<input type="text"/>	<input type="text"/>	<input type="text"/>	W- <input type="button" value="v"/>
* Structure Type:	NNLTANN-Lattice Tower Array			
* Overall Structure Height:	<input type="text"/>	meters		
* Support Structure Height:	<input type="text"/>	meters		
* Ground Elevation (AMSL):	<input type="text"/>	meters		

Antenna Data

* Height of Radiation Center Above Ground Level:	<input type="text"/>	meters
* Height of Radiation Center Above Average Terrain:	<input type="text"/>	meters
* Height of Radiation Center Above Mean Sea Level:	<input type="text"/>	meters

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Antenna Technical Data

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* Indicates required field

Antenna Type

* Please select an antenna type:

Non-Directional

Antenna Manufacturer and Model

* Manufacturer:

* Model:

* Beam Tilt: * Electrical Beam Tilt * Mechanical Beam Tilt
 Not Applicable Not Applicable

* Polarization: Horizontal Circular Elliptical

DTV and DTS: Elevation Pattern

* Does the proposed antenna propose elevation radiation patterns that vary with azimuth for reasons other than the use of mechanical beam tilt?

Yes No [Clear](#)

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** Indicates required field*

Transmitter and Transmission Line

* **Transmitter Power Output (TPO):**
(average power at input to transmission line, after any filter attached to the transmitter, if used)

dBk kW

* **Transmission Line Loss (LL):** dB

* **Antenna Input Power (AIP):** dBk

* **Maximum Antenna Power Gain (AG):** dB

* **Effective Radiated Power:**
(Average Power)

dBk kW

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Mr. Collin James, Ph.D. Delete Edit	
Director of Technology	
Address: 1300 North 17th Street 11th Floor Arlington, VA 22209 USA	Positional Interest: Investor or Creditor
Phone: +1 (703) 812-0400	Company: Fletcher, Heald & Hildreth, P.L.C.
Email: montero@fhhlaw.com	Pct. of Votes: 3%
	Pct. of Total Assets: 3%

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Attributable Interest

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Equity and Financial Interests

* Applicant certifies that equity and financial interests not set forth by the applicant parties are non-attributable.

Yes No N/A [« Clear](#)

Multiple Ownership

* Is the applicant or any party to the application the holder of an attributable radio joint sales agreement or an attributable radio or television time brokerage agreement in the same market as the station subject to this application?

Yes No [« Clear](#)

* Applicant certifies that the proposed facility complies with the Commission's multiple ownership rules and cross-ownership rules.

Yes No [« Clear](#)

* Applicant certifies that the proposed facility:

- (a) does not present an issue under the Commission's policies relating to media interests of immediate family members
- (b) complies with the Commission's policies relating to future ownership interests
- (c) complies with the Commission's restrictions relating to the insulation and non-participation of non-party investors and creditors

Yes No [« Clear](#)

* Does the Applicant claim status as an "eligible entity," that is, an entity that qualifies as a small business under the Small Business Administration's size standards for its industry grouping (as set forth in 13 C.F.R. § 121-201), and holds:

- (a) 30 percent or more of the stock or partnership interests and more than 50 percent of the voting power of the corporation or partnership that will own the media outlet; or
- (b) 15 percent or more of the stock or partnership interests and more than 50 percent of the voting power of the corporation or partnership that will own the media outlet, provided that no other person or entity owns or controls more than 25 percent of the outstanding stock or partnership interests; or
- (c) more than 50 percent of the voting power of the corporation that will own the media outlet (if such corporation is a publicly traded company)?

Yes No [« Clear](#)

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Main Studio Location

* The main studio location complies with 47 C.F.R. Section 73.1125.
 Yes No [Clear](#)

* Country:

PO Box: Either PO Box or Address Line 1 is required.

* Address Line 1:

Address Line 2:

* City:

* State:

* Zip Code:

Constructed Facility

* The facility was constructed as authorized in the underlying construction permit or complies with 47 C.F.R. Section 73.1690.
 Yes No [Clear](#)

Special Operating Conditions

* The facility was constructed in compliance with all special operating conditions, terms, and obligations described in the construction permit.
An exhibit may be required. Review the underlying construction permit.
 Yes No [Clear](#)

Transmitter

* The transmitter complies with 47 C.F.R. Section 73.1660.
 Yes No [Clear](#)

Changing Transmitter Power Output

* Is this application being filed to authorize a change in transmitter power output caused by the replacement of an omnidirectional antenna with another omnidirectional antenna or an alteration of the transmission line system? See 47 C.F.R. Sections 73.1690(c)(1) and (c)(10).
 Yes No [Clear](#)

Replacing a Directional Antenna

* Is this application being filed pursuant to 47 C.F.R. Section 73.1690(c)(3) to replace a directional antenna with another directional antenna?
 Yes No [Clear](#)

Use a formerly licensed main facility as an auxiliary facility

* Is this application being filed pursuant to 47 C.F.R. Section 73.1675(c)(1) to request authorization to use a formerly licensed main facility as an auxiliary facility and/or change the ERP of the proposed auxiliary facility?
 Yes No [Clear](#)

Change the License Status

* Is this application being filed pursuant to 47 C.F.R. Section 73.1690(c)(9) to change the license status from commercial to noncommercial or from noncommercial to commercial?
 Yes No [Clear](#)

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** Indicates required field*

* Licensee/Permittee certifies that all terms, conditions, and obligations set forth in the underlying construction permit have been fully met.

Yes No [« Clear](#)

* Licensee/Permittee certifies that, apart from changes already reported, no cause or circumstance has arisen since the grant of the underlying construction permit which would result in any statement or representation contained in the construction permit application to be now incorrect.

Yes No [« Clear](#)

Character Issues

* Applicant certifies that neither applicant nor any party to the application has or had any interest in, or connection with:

- (a) any broadcast application in any proceeding where character issues were left in unresolved or were resolved adversely against the applicant or party to the application; or
- (b) any pending broadcast application in which character issues have been raised.

Yes No [« Clear](#)

Adverse Findings

* Has the Applicant or any party to this application had an adverse finding or an adverse final action taken by any court or administrative body in a civil or criminal proceeding brought under any law related to the following: any felony; mass media-related antitrust or unfair competition; fraudulent statements to another governmental unit or discrimination?

Yes No [« Clear](#)

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Application Summary

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Please review your application before submitting.
 You have provided information in all the categories listed under the Application Steps. Use the links under the Application Steps to go back and review your application. Make any corrections as necessary. Once you are confident that the application is ready for certification and submission, click on the "Continue to Certify" button below.

General Information

Application Purpose: New Television Station Construction Permit Application

Attachments

You have 2 files that will be submitted with this application.
[View Attachments >](#)

Fees, Waivers, and Exemptions

Exempt from FCC Application Fees?
Exempt from FCC Regulatory Fees?

Applicant Information

Name: Ted Hutton, PhD.
Title: Senior Product Engineer
Address: Hutton Broadcasting Inc.
 221 Seabreeze Court
 Vero Beach, FL 32963
 USA
Phone: +1 (703) 812-0400
Email: thutton@crystalclearradio.com

Contact Representatives

Name: Mrs. Jordan Perello, Ph.D.
Title: Director of Engineering
Address: 1300 North 17th Street
 11th Floor
 Arlington, VA 22209
 USA
Phone: +1 (703) 812-0400 Ext. 12345
Email: montero@fhllaw.com

[View All Contact Representatives \(1\) >](#)

Channel and Facility Information

Community of License City: NEW HAVEN
Community of License State: CT
Channel: 6
Facility Type: Commercial
Facility Zone: 1

Antenna Location Data

ASR number:
ERP: 156.0 kW
Latitude (NAD83): 01° 11' 11.0" N+
Longitude (NAD83): 001° 01' 01.0" W-

Antenna Technical Data

Antenna Type: Non-Directional
Manufacturer: asdfas
Model: dfasdf
Antenna ID:

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Application Sections

- ✓ General Information
- ✓ Fees, Waivers, and Exemptions
- ✓ Applicant Information
- ✓ Contact Representatives
- ✓ Alien Ownership
- ✓ Basic Qualifying Questions
- ✓ Channel and Facility Information
- ✓ Antenna Location Data
- ✓ Antenna Technical Data
- ✓ Operating Constants
- ✓ Parties to the Application
- ✓ Attributable Interest
- ✓ License Certifications
- ✓ Legal Certifications
- ➔ Application Summary**

Certify

Resources

- [FCC 2100 Privacy Act](#)
- [Code of Federal Regulations](#)

Frequently Asked Questions

- [When can I submit my application?](#)
- [How long do I have to complete my application?](#)

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Certification

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* indicates required field

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 declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.

* indicates required field

Date: 04/12/2010

* First Name:

Middle Name:

* Last Name:

Suffix:

* Title:

* Attachments: I certify that this application includes all required and relevant attachments.

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Application Sections

- General Information
- Fees, Waivers, and Exemptions
- Applicant Information
- Contact Representatives
- Alien Ownership
- Basic Qualifying Questions
- Channel and Facility Information
- DTS Reference Point
- Antenna Data
- Parties to the Application
- Attributable Interest
- Construction Permit Certifications
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- #### Resources
- FCC 2100 Privacy Act
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- #### Frequently Asked Questions
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Description: (255 characters max.)

Attachments

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<input type="checkbox"/>		ULS Testing April 7.txt	License Certifications		✓ Done with Virus Scan and/or Conversion

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Application for Media Bureau Audio and Video Service Authorization
Schedule B

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