FCC Form 2100, Application for Media Bureau Video Service Authorization, Schedule 387 (Transition	OMB
Progress Report Form)	Appro

Transition Progress Report General Information
* indicates required field Attachments Draft Copy Attachments APPLICATION SECTIONS
X Please enter all required information.
Applicant Information
*Filing Type:
Permits and Tower Studies Quarterly
© 10 weeks before the end of the assigned construction deadline for the station Station Equipment
© 10 days after the construction of the post-auction facilities have been completed Tower and Antenna
5 days after the station has ceased operation on pre-auction channel Application Summary
* Report reflects information for quarter: Q1 🗸 🔛
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.
Uploaded Attachments
 ★ Required Question - Please Respond. * Are attachments (other than associated schedules) being filed with this application? ⊙ Yes ⊙ No "Clear

Transition Progress R Applicant Info		
* indicates required field	🖉 Attachments 🛛 🖻 Draft Copy	APPLICATION SECTIONS
X Please enter all requ	red information.	✓ General Information
Authorization Holder	Name	Applicant Information Contact Representatives
Check box if the Auth or proper notification	norization 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 a provided.	Permits and Tower Studies
Applicant Name and T	Pre-fill Applicant Details	Station Equipment Tower and Antenna
* Applicant Type: * Company Name:	Corporation	Application Summary Certify
	Hutton Broadcasting, Inc.	
Doing Business As:		
Applicant Contact Info	prmation	
Attention To:	Ted Hutton	
* Country:	United States v	
PO Box:	Either PO Box or Address Line 1 is required.	
* Address Line 1:		
Address Line 2:		
* City:		
* State:	Virginia •	
* Zip Code:		
* Phone:	(EOE) 474 4047	

FCC Form 2100, Application for Media Bureau Video Service Authorization, Schedule 387 (Transition OMB Progress Report Form) Appr

OMB CONTROL NUMBER: 3060-1240 Approved by OMB

Add Contact Re					
* indicates required field		🖉 Attachments	🔊 Draft Copy	APPLICATION SECTIONS	
Please enter all required i	nformation.			✓ General Information	
				 Applicant Information 	
Contact Type				Contact Representatives	
X Contact Type is required	L			Permits and Tower Studies	
* Please select the contact	type:			Station Equipment	
 Legal Representative Technical Representative 				Tower and Antenna	
 Other 	ve			Application Summary	
				Certify	
Pre-fill From Applicant De * First Name: Middle Name: X Last Name is required.					
* Last Name:					
Suffix: Title:					
* Company Name:	Hutton Broadcasting, Inc.				

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OMB CONTROL NUMBER: 3060-1240 Approved by OMB

Transition Progress Report Permits and Tower Studies

* indicates required field	🖉 Attachments 🛛 🗖 Draft Copy	APPLICATION SECTIONS
× Please enter all required information.		✓ General Information
To be completed by full power and Class A television licensees with stations that are transitioning to a new channel as a result of the Broadcast Incentive Auction.		 Applicant Information
Licensee hereby certifies that the following steps towards constructing the Station's post-auction facility are not required or have been completed:		 Contact Representatives
Approval and Permits		→ Permits and Tower Studies
* Does the Station require FAA approval (e.g., completion of FAA Form 7460-1 and a "No Hazard Determination") in order to construct its post-auction facility?		Station Equipment
⊛ Yes ⊚ No «Clear		Tower and Antenna
* The Station has requested FAA approval for its post-auction facility.		Application Summary
		Certify
* The Station has received FAA approval for its post-auction facility.		
⊛ Yes ⊘ No "Clear		
* Does the Station require Federal, State, and/or local permits, and/or a review of environmental impact, for its post-auction facility?		

Yes O No "Clear"

* Station has requested necessary Federal, State and/or local permits and/or review of environmental impact for its post-auction facility

Yes No "Clear"

* Station has received necessary Federal, State, and/or local permits and/or review of environmental impact for its post-auction facility

Yes ONO "Clear

Tower Studies

* Are radio frequency (RF) tower studies required in order for the Station to construct its post-auction facility?

Yes O No "Clear

* RF tower studies have been started

Yes ONO "Clear

- * RF tower studies have been completed
- Yes O No "Clear"

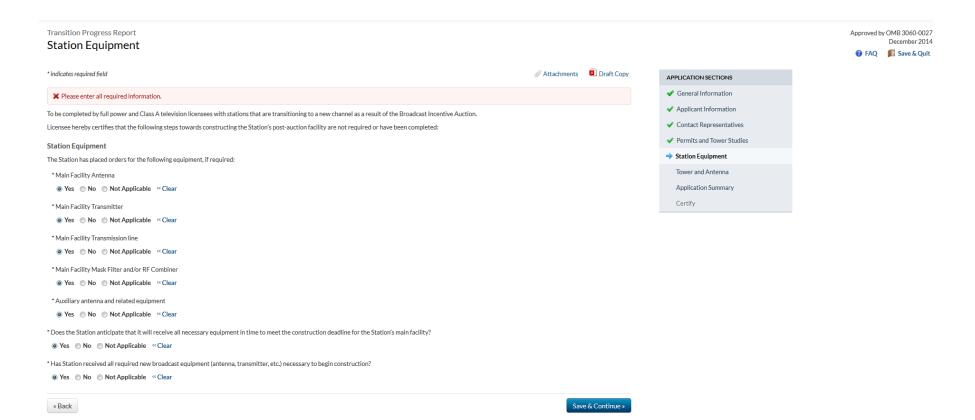
* Are structural tower studies required in order for the Station to construct its post-auction facility?

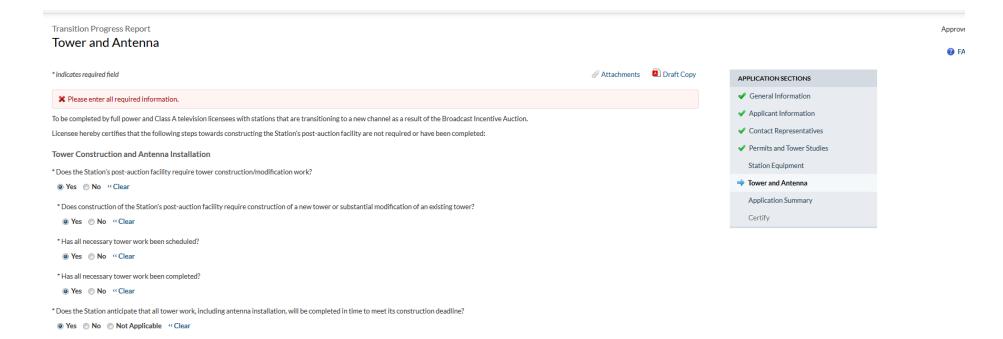
Yes ONO "Clear

* Structural tower studies have been started

« Back

Save & Continue »





FCC Form 2100, Application for Media Bureau Video Service Authorization, Schedule 387 (TransitionOProgress Report Form)A

OMB CONTROL NUMBER: 3060-1240 Approved by OMB

Auxiliary Antenna

* Does the Station require use of a new auxiliary antenna system?

Yes No "Clear"

* Has the Station started all outside tower work and made all necessary equipment upgrades to commence testing of its new auxiliary antenna system?

Yes ONO "Clear

* Has the Station completed all outside tower work and made all necessary equipment upgrades to commence testing of its new auxiliary antenna system?

Yes No "Clear"

* Has the Station started testing on its new auxiliary antenna system?

Yes ONO "Clear

* Has the Station completed all testing on its new auxiliary antenna system such that it may now cease broadcasting on its pre-auction channel?

Yes O No "Clear

Post-auction Facility

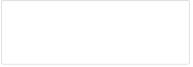
* Has the Station completed all work, including construction, modification and/or installation, related to construction of its post-auction facility such that it is ready to begin testing on its post-auction facility?

Yes O No "Clear"

* Does the Station have other issues that must be addressed before it can fully construct and/or operate its post-auction facility?

Yes ONO "Clear

Please explain:



* Has the Station completed all construction work on its post-auction facility that is necessary to complete an application for a license to cover that facility?

Yes No

Pre-auction Channel

* Has the Station ceased broadcasting on its pre-auction channel?

Yes ONO

« Back



Applications Authorizations Facilities

Transition Progress Report

Application Summary

* indicates required field	

Please review your application before submitting.

You have provided information in all the categories listed under the Application Section. 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.

🗙 This application contains 6 errors.

Please use the links under Application Section to view and correct them.

O An Amendment requires at least one uploaded attachment with an attachment type of 'Amendment'. The application can not be submitted until this error is fixed.

General Information

Application Purpose: Change of Main Studio Location

Attachments

You have 3 files that will be submitted with this application.

View Attachments »

Applicant Information

Name:	Ted Hutton, PhD.	Name:	Mrs. Jordan Perello, Ph.D.
Title:	Senior Product Engineer	Title:	Director of Engineering
Address:	Hutton Broadcasting Inc. 221 Seabreeze Court Vero Beach, FL 32963 USA	Address:	1300 North 17th Street 11th Floor Arlington, VA 22209 USA
Phone:	+1 (703) 812-0400	Phone:	+1 (703) 812-0400 <u>Ext.</u> 12345
Email:	thutton@crystalclearradio.com	Email:	montero@fhhlaw.com

View All Contact Representatives (10) »

Contact Representatives

- APPLICATION SECTIONS
 General Information
 Applicant Information
 Contact Representatives
 Permits and Tower Studies Station Equipment
 Tower and Antenna
- Application Summary

Attachments Draft Copy

Certify

FCC Form 2100, Application for Media Bureau Video Service Authorization, Schedule 387 (TransitionOMB CONTROL NUMBER: 3060-1240Progress Report Form)Approved by OMB

Main Studio Location		
Address: Hutton Broadcasting Inc. 221 Seabreeze Court Vero Beach, FL 32963 USA		
Phone: +1 (703) 812-0400		
« Back		Continue to Certify »

Certification

Back to Top↑

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(c), 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.	AMANDA MINTZ MEMBER
		05/02/2017

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We have estimated that each response to this collection of information will take 2 hours (1 hour to complete the form, 1 hour to respond to technical questions). Our estimate includes the time to read the instructions, look through existing records, gather and maintain the required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, AMD-PERM, Paperwork Reduction Project (3060-1240), Washington, DC 20554. We will also accept your comments via the Internet if your send them to pra@fcc.gov. Please DO NOT SEND COMPLETED APPLICATIONS TO THIS ADDRESS. Remember - you are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1240.

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