

**FCC 345**

FOR  
FCC  
USE  
ONLY

**APPLICATION FOR TRANSFER OF CONTROL  
OF A CORPORATE LICENSEE OR PERMITTEE,  
OR FOR ASSIGNMENT OF LICENSE OR PERMIT  
OF TV OR FM TRANSLATOR STATION OR LOW  
POWER TELEVISION STATION**

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 ID Number |

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 1.1116):

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

4. Were any of the authorizations that are the subject of this application obtained through the Commission's competitive bidding procedures (see 47 C.F.R. Sections 1.2111(a) and 73.5001)?  Yes  No

Exhibit No.

If yes, list pertinent authorizations in an Exhibit.

**NOTE: In addition to the information called for in this section, an explanatory exhibit providing full particulars must be submitted for each question for which a "No" response is provided.**

**Section II - Assignor/Transferor**

1. **Certification.** Licensee/permittee certifies that it has answered each question in this application based on its review of the application instructions and worksheets. Licensee further certifies that where it has made an affirmative certification below, this certification constitutes its representation that the application satisfies each of the pertinent standards and criteria set forth in the application instructions and worksheets.  Yes  No

2. Application for (check only one box for A and B):

- A.  Consent to Assignment  Consent to Transfer Control  
 Amendment to pending application

If an amendment, **submit as an Exhibit** a listing by Section and Question Number of the portions of the pending application that are being revised.

Exhibit No.

- B.  TV Translator  Low Power TV  FM Translator  Digital LowPower TV  Digital TV Translator

3.

|                                       |                                       |                               |
|---------------------------------------|---------------------------------------|-------------------------------|
| Legal Name of the Assignor/Transferor |                                       |                               |
| Mailing Address                       |                                       |                               |
| City                                  | State or Country (if foreign address) | ZIP Code                      |
| FCC Registration Number               | Telephone Number (include area code)  | E-Mail Address (if available) |

If more than one transferor, submit the information requested in question 1. for each transferor.

Exhibit No.

4.

|   |                                       |
|---|---------------------------------------|
| Contact Representative (if other than assignor) | Firm or Company Name                  |
| Mailing Address                                 |                                       |
| City  | State or Country (if foreign address) |
| Telephone Number (include area code)            | E-Mail Address (if available)         |

5. **Authorizations to be Assigned/Transferred.** List call signs, locations and facility identifiers of all authorizations to be assigned/transferred. Include construction permits and file numbers. List main station authorizations and any FM and/or TV translator stations, LPTV stations, FM and/or TV booster stations.

Exhibit No.

6. **Agreements for Sale/Transfer of Station.** Licensee/permittee certifies that:
- it has placed in its station records and submitted to the Commission as an Exhibit to this application copies of all agreements for the sale/transfer of the station(s);
  - these documents embody the complete and final understanding between licensee/permittee and assignee/transferee; and
  - these agreements comply fully with the Commission's rules and policies.

Yes  No

See Explanation in Exhibit No.

Exhibit No.

7. **Character Issues.** Licensee/permittee certifies that neither licensee/permittee nor any party to the application has or has had any interest in, or connection with:  Yes  No See Explanation in Exhibit No.
- a. any broadcast application in any proceeding where character issues were left 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.
8. **Adverse Findings.** Licensee/permittee certifies that, with respect to the licensee/permittee and any party to the application, no adverse finding has been made, nor has adverse final action been taken by any court or administrative body in a civil or criminal proceeding brought under the provisions of any law related to the following: any felony; mass media-related antitrust or unfair competition; fraudulent statements to another government unit; or discrimination.  Yes  No See Explanation in Exhibit No.
9. **Local Public Notice.** Licensee/permittee certifies that it has or will comply with the public notice requirements of 47 C.F.R. Section 73.3580.  Yes  No
10. **Auction Authorization.** Licensee/permittee certifies that more than five years have passed since the issuance of the construction permit for the station being assigned/transferred, where that permit was acquired in an auction through the use of a bidding credit or other special measure.  Yes  No See Explanation in Exhibit No.  
 N/A
11. **Anti-Drug Abuse Act Certification.** Licensee/permittee certifies that neither licensee/permittee nor any party to the application is subject to denial of federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862.  Yes  No
12. **Anti-Discrimination Certification.** Licensee/permittee certifies that neither licensee/permittee nor any party to the application have violated the Commission's prohibition against discrimination on the basis of race, color, religion, national origin or sex in the sale of commercially operated FM translator, TV translator, or low power television stations.  Yes  No See Explanation in Exhibit No.  
 N/A

I certify that the statements in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge that all certifications and attached Exhibits are considered material representations.

|   |  |
|---|--|
| Typed or Printed Name of Person Signing | Typed or Printed Title of Person Signing |
| Signature                               | Date                                     |

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

**NOTE: In addition to the information called for in this section, an explanatory exhibit providing full particulars must be submitted for each question for which a "No" response is provided.**

**Section III - Assignee/Transferee**

1. **Certification.** Assignee/transferee certifies that it has answered each question in this application based on its review of the application instructions and worksheets.  Yes  No  
 Assignee/transferee further certifies that where it has made an affirmative certification below, this certification constitutes its representation that the application satisfies each of the pertinent standards and criteria set forth in the application instructions and worksheets.

2. Legal Name of the Assignee/transferee

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Mailing Address

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|      |                                       |          |
|------|---------------------------------------|----------|
| City | State or Country (if foreign address) | ZIP Code |
|------|---------------------------------------|----------|

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|                         |                                      |                               |
|-------------------------|--------------------------------------|-------------------------------|
| FCC Registration Number | Telephone Number (include area code) | E-Mail Address (if available) |
|-------------------------|--------------------------------------|-------------------------------|

If more than one transferee, submit the information requested in question 1. for each transferee.

Exhibit No.

3. Contact Representative (if other than assignee) Firm or Company Name

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Mailing Address

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|      |                                       |          |
|------|---------------------------------------|----------|
| City | State or Country (if foreign address) | ZIP Code |
|------|---------------------------------------|----------|

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|                                      |                               |
|--------------------------------------|-------------------------------|
| Telephone Number (include area code) | E-Mail Address (if available) |
|--------------------------------------|-------------------------------|

4. **Nature of Applicant.** Assignee/transferee is:

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> an individual         | <input type="checkbox"/> a general partnership        | <input type="checkbox"/> a for-profit corporation             |
| <input type="checkbox"/> a limited partnership | <input type="checkbox"/> a not-for-profit corporation | <input type="checkbox"/> a limited liability company (LLC/LC) |
| <input type="checkbox"/> other                 |   |   |

- a. If "other," describe nature of transferee in an Exhibit.

Exhibit No.

5. **Agreements for Sale/ Transfer of Station.** Assignee/Transferee certifies that:

Yes  No See Explanation in Exhibit No.

- a. the written agreements in the licensee/permittee's station records and submitted to the Commission embody the complete and final agreement for the sale of the station(s) which are to be assigned; and
- b. these agreements comply fully with the Commission's rules and policies.

6. **Character Issues.** Assignee/Transferee certifies that neither assignee/transferee nor any party to the application has or has had any interest in, or connection with:  Yes  No See Explanation in Exhibit No.
- a. any broadcast application in any proceeding where character issues were left 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.
7. **Adverse Findings.** Assignee/Transferee certifies that, with respect to the assignee/transferee and any party to the application, no adverse finding has been made, nor has an adverse final action been taken by any court or administrative body in a civil or criminal proceeding brought under the provisions of 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 See Explanation in Exhibit No.
8. **Alien Ownership and Control.** Assignee/Transferee certifies that it complies with the provisions of Section 310 of the Communications Act of 1934, as amended, relating to interests of aliens and foreign governments.  Yes  No See Explanation in Exhibit No.
9. **Financial Qualifications.** Assignee/Transferee certifies that sufficient net liquid assets are on hand or are available from committed sources to consummate the transaction and operate the station(s) for three months.  Yes  No See Explanation in Exhibit No.
10. **Rebroadcast Certification.** For applicants proposing translator rebroadcasts who are not the licensee of the primary station, the applicant certifies that written authority has been obtained from the licensee of the station whose programs are to be retransmitted.  Yes  No  N/A

Primary station proposed to be rebroadcast:

| Facility ID Number | Call Sign | City | State |
|--------------------|-----------|------|-------|
|                    |           |      |       |

11. a. Applicant certifies that it is not the licensee or permittee of the commercial primary station being rebroadcast and that neither it nor any parties to the application have any interest in or connection with the commercial primary station being rebroadcast. See 47 C.F.R. Section 74.1232(d).  Yes  No See Explanation in Exhibit No.
- N/A
- b. Applicant certifies that the FM translator's (a) 1mV/m coverage contour does not extend beyond the protected contour of the commercial FM primary station to be rebroadcast, or (b) entire 1mV/m coverage contour is contained within the greater of either: (i) the 2 mV/m daytime contour of the commercial AM primary station to be rebroadcast, or (ii) a 25-mile radius centered at the commercial AM primary station's transmitter site.  Yes  No See Explanation in Exhibit No.
- N/A

**NOTE: If No to a. and b., and no waiver has been requested in an Exhibit, this application is unacceptable for filing. See 47 C.F.R. Section 74.1232(d).**

If No to a. and Yes to b. applicant is prohibited from receiving any support, before or after construction, either directly or indirectly from the commercial primary station being rebroadcast or from any person or entity having any interest whatsoever, or any connection with the primary FM station. Interested and connected parties include group owners, corporate parents, shareholders, officers, directors, employees, general and limited partners, family members and business associates. See 47 C.F.R. Section 74.1232(e).

12. Applicant certifies that it is in compliance with 47 C.F.R. Section 74.1232(e), which prohibits a FM translator station whose coverage contour extends beyond the protected contour of the commercial FM primary station being rebroadcast, from receiving support (except for specified technical assistance), before, during, or after construction, directly or indirectly, from the primary station, or any person or entity having any interest in, or connection with, the primary station.  Yes  No  N/A See Explanation in Exhibit No.
13. **Auction Authorization.** Assignee/Transferee certifies that where less than five years have passed since the issuance of the construction permit and the permit had been acquired in an auction through the use of a bidding credit or other special measure, it would qualify for such credit or other special measure.  Yes  No  N/A See Explanation in Exhibit No.
14. **Anti-Drug Abuse Act Certification.** Assignee/transferee certifies that neither assignee nor any party to the application is subject to denial of federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862.  Yes  No
15. **Equal Employment Opportunity (EEO).** If the applicant proposes to employ five or more full-time employees, applicant certifies that it is filing simultaneously with this application a Model EEO Program Report on FCC Form 396-A.  Yes  No  N/A

I certify that the statements in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge that all certifications and attached Exhibits are considered material representations. I hereby waive any claim to the use of any particular frequency as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and request an authorization in accordance with this application. (See Section 304 of the Communications Act of 1934, as amended.)

|   |  |
|---|--|
| Typed or Printed Name of Person Signing | Typed or Printed Title of Person Signing |
| Signature                               | Date                                     |

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).