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General Information

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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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✓ Basic Qualifying Questions

✓ Channel and Facility Information

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✓ Antenna Technical Data

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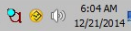
Legal Certifications

Approved by OMB 3060-0837

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FC Fees, Waivers and Exemptio xFC Application Details - Licensing x

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Fees, Waivers and Exemptions

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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

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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

* Applicant Type: Individual ▾

* First Name:

Middle Name:

* Last Name:

Suffix:

Title:

Applicant Information

Attention To:

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Add Contact Representative

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Contact Type

* Please select the contact type:

☐ Legal Representative

☐ Technical Representative

☐ Other

Contact Name

Pre-fill From Applicant Details »

* First Name:

Middle Name:

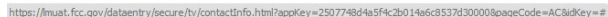
* Last Name:

Suffix:

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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

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Channel Sharing

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* indicates required field

* Is this filing to implement a Channel Sharing Agreement?

☒ Yes ☐ No "Clear

Enter Facility ID of the Channel to be shared:

Facility ID	Call Sign	Service	City	State
12345	WTOP		Arlington	VA

Input the Facility ID of any other station(s) listed in the CSA

Facility ID	Call Sign	Service	City	State	Action
54321	WTTG		Fairfax	VA	

Add Row

Display only if application is for a Sharing station

* Is this filing to dissolve or modify a Channel Sharing Arrangement?

☒ Yes ☐ No "Clear

* Will the applicant continue to channel share?

☒ Yes ☐ No "Clear

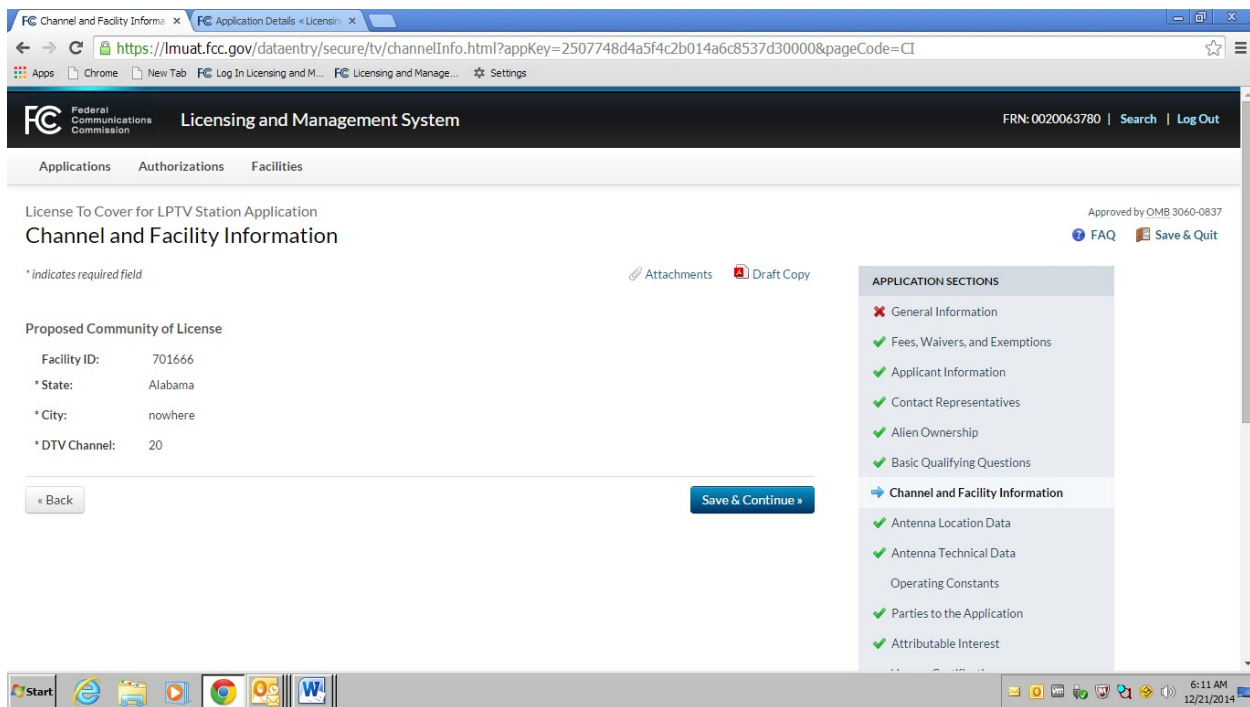
 Please upload the Channel Sharing Agreement.

* Is the channel sharing agreement consistent with all Commission rules and policies including those set forth in 47 C.F.R. § 73.3700?

☒ Yes ☐ No "Clear

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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):

DDMMSSDirection

322123.0N+

* Longitude (NAD83):

DDDMMSSDirection

1102326.0W-

* Structure Type: TOWER-A free standing or guyed struct

* Overall Structure Height: 100 meters

* Support Structure Height: 10 meters

* Ground Elevation (AMSL): 20 meters

Antenna Data

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Antenna Type

* Please select an antenna type:

Non-Directional

Antenna Manufacturer and Model

* Manufacturer:

* Model:

* Beam Tilt:

* Electrical Beam Tilt

☒ Not Applicable

* Mechanical Beam Tilt

Not Applicable

* Polarization:Horizontal

Elevation Radiation Pattern

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

Answer: No

* Out-of-Channel Emission Mask:

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hossein hash

Address: 415

wash, CA 20554

United States

Phone: +1 (202) 418-1600

Email: hhashezadeh@livee.com

Positional Interest: Director

Company: dba

Pct. of Votes: 100%

Pct. of Total Assets: 100%

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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

Other Authorizations

* Does the applicant or any party to the application have an attributable interest in any other broadcast station(s).

☐ Yes☒ No☐ N/A<< Clear

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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

An exhibit may be required. Please review the Special Operating Conditions on the underlying construction permit for more information and upload the required information if needed.

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Obligations

* 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](#)

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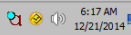
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General Certification Statements

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.

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