

APPLICATION FOR RENEWAL OF RADIO STATION LICENSE IN SPECIFIED SERVICES (47 CFR Parts 5, 21, 22, 23, 25 and 101)

READ INSTRUCTIONS AND NOTICE ON REVERSE BEFORE COMPLETING

Name of Applicant (must be identical with that shown on current authorization)
 Itron, Inc.

Reading Street Address, P. O. Box, City, State and ZIP Code of Applicant
 2818 N SULLIVAN ROAD
 KLAUSE, BENDER@ITRON.COM
 Identify Report under which this filing is made:
 Part 5

Call Sign or Other FCC Identifier
 KAZXMT

2. FEE DATA (Refer to 47 CFR Section 1.1105 or to appropriate Fee Filing Guide for information)

(a) Fee Type Code	EAE
(b) Fee Multiple	1
(c) Fee Due for Fee Type Code in 2(a)	45.00

3. Application is for renewal of license in most conforming with the existing license as specified below:

(a) File Number	5485-EX-MI-96
(b) Date Issued	12/02/96
(c) Call Sign	KAZXMT
(d) Location	Nationwide, CONUS
(e) Class of Station	EX, MO
(f) Expiration Date	12/01/98

4. Note any changes which have been made since the last application covering this station was filed (e.g. discontinuance of use of a frequency, type of station, transmitter, etc.)
 None

5. Items 5(a) and (b) apply to Part 21 and Part 101 licenses only.

(a) Has there been removal of equipment or alteration of facilities so as to render the station not operational? If YES, indicate where:
 YES NO

(b) If this is a Multiple Distribution Service (MDS) station, is there an ownership interest in, control by, affiliation with, or leasing arrangement with a cable television company?
 YES NO

6. Applicant represents that there has been no change in applicant's organization and no transfer of control or changes in the applicant's relation to the station or financial responsibility; that the applicant's most recent application or report embodying the information as identified below, is to be considered as a part of this application, and the truth statements therein contained is hereby reaffirmed. Note here any further exceptions not already covered in questions 4 and 5.

7. CERTIFICATION
 Neither the applicant nor any other party to the application is subject to a denial of Federal benefits that includes FCC benefits pursuant to section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. section 862, because of a conviction for possession or distribution of a controlled substance.
 The applicant hereby waives any claim to the use of any particular frequency or electromagnetic spectrum as against the authority in accordance with this application. (See Section 304 of the Communications Act of 1934, as amended.)
 The applicant acknowledges that all statements made in this application and attached exhibits are considered material representations, and that all the exhibits are a material part hereof and are incorporated herein as if set out in full in this application, including exhibits that all statements in this application are true, complete and correct to the best of his/her knowledge and belief and are made in good faith.
 Applicant certifies that construction of the station would NOT be an action which is likely to have a significant environmental effect. See the Commission's Rules, 47 CFR 1.1301-1.1319.

8. WILLFUL FALSE STATEMENTS MADE 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 FORTHWE (U.S. CODE, TITLE 47, SECTION 403).

Name of Applicant (must correspond with item 1)
 Itron, Inc.

Signature
 [Signature]

Date
 12/15/98

The of Applicant
 Corporation

Designate appropriate classification:
 Individual
 Member of Partnership
 Officer & Member of Other's Association
 Authorized Rep. of Corporation
 Official of Government Entity