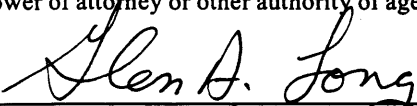


APPLICATION FOR CONSENT TO ASSIGN AN EXPERIMENTAL AUTHORIZATION

PART I is to be completed by assignor (the present permittee or licensee) when the legal right to control the use and operation of station is to be transferred as a result of a voluntary act (contract or other agreement) or by involuntary act (death or legal disability) or by involuntary assignment of the physical property constituting the station under a court decree in bankruptcy proceedings, or other court order, or by operation of law in any other manner.

PART II is to be completed by assignee who wishes to obtain the legal right to control the use and operation of station as a result of a voluntary act (contract or other agreement) or by involuntary act (death or legal disability) or by involuntary assignment of the physical property constituting the station under a court decree in bankruptcy proceedings, or other court order, or by operation of law in any other manner.

PART I – To Be Completed by Assignor		1. Federal Registration Number (FRN): 0005564471	
2. a.) Name of Assignor JOHNS HOPKINS UNIVERSITY, APPLIED PHYSICS LAB			
b.) Mailing and Street Address or P.O. Box, City, State and ZIP Code 11100 JOHNS HOPKINS ROAD, LAUREL, MD 20723-6099			
3. Provide the following information for the facilities authorized to assignor for which assignment is sought in this application.			
a. Call Sign	b. File Number	c. Location	d. Expiration Date
WA2XPM	5889-EX-PL-97	CHINIAK, AK NL 57-37-04 WL 152-11-36	1/31/2002
4. Certification The undersigned represents that the license will not be assigned, or that control will not be transferred until the Commission's Consent has been received; that all the attached exhibits are a material part hereof and are incorporated herein as if set out in full in this application; and that all the statements made in Part I of this application are true, complete and correct to the best of his (her) knowledge and belief. I request that the Commission grant its written consent to the foregoing assignment.			
Date	Signature of Authorized Office or Agent (if signed by an agent other than the authorized officer or assignor, power of attorney or other authority of agent to sign must be attached).		
1/24/02			
Typed Name of Person Signing		Mailing Street Address or P.O. Box, City, State and ZIP Code	
Glen A. Long		11100 Johns Hopkins Rd. Laurel MD 20723-6099	
		E-mail Address glen.long@jhuapl.edu	
WILLFUL FALSE STATEMENTS MADE ON THIS APPLICATION ARE PUNISHABLE BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 10010, 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).			

Part II – To Be Completed By Assignee			
5. a.) Name of Assignee (If a corporation, state corporate name; if a partnership, state names of all partners and the name under which the partnership does business; if an unincorporated association, state the name of an executive officer, the office held by him/her, and the name of the association. The same name or names should be signed in the place provided at the end of the application, except that in the case of a partnership, the application may be signed in the name of the partnership by one of the partners.)			
GEOPHYSICAL INSTITUTE, UNIVERSITY OF ALASKA FAIRBANKS			
b.) Mailing Street Address or P.O. Box, City, State and ZIP Code			
903 KOYUKUK DRIVE FAIRBANKS, AK 99775-7320			
c.) E-mail Address:			
Bill.Bristow@gi.alaska.edu			
6. Is this application made for consent to voluntary or involuntary assignment of permit or license?			
<input checked="" type="checkbox"/> Voluntary <input type="checkbox"/> Involuntary			
7. State whether assignee is:			
<input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Association			
Place an "X" in the appropriate column		YES	NO
8. Is assignee or any party to this application a representative of an alien or a foreign government?			X
9. a.) Has assignee personally familiar with the Commission's rules governing the service which are the subject of this application?		X	
b.) Has assignee examined the subject facilities and determined that construction and operation is in compliance with current authorizations and the Commission's rules?		X	
10. State assignee's relation to station:			
<input type="checkbox"/> Pro Forma Assignment <input type="checkbox"/> Lessee <input checked="" type="checkbox"/> Manager <input type="checkbox"/> Financier			
11. Certification:			
<p>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 license or otherwise, and requests that written consent be granted to assign the authorizations herein mentioned to him (her). The assignee assumes all the obligations and agrees to abide by all the conditions imposed upon the assignor under the subject authorizations except that he/she shall not be liable for any act done by, or any right accrued or any suit or proceeding had or commenced against, the assignor prior to said assignment. 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.</p> <p>I certify that the statements made in Part II are true, complete and correct to the best of my knowledge and belief.</p>			

12. FCC Form 442 certification as required by CFR 47, Section 5.59 (d):

THE APPLICANT CERTIFIES THAT:

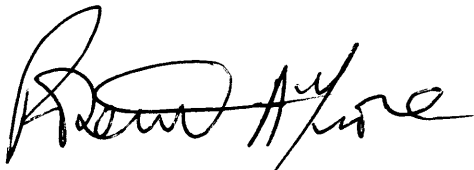
- a. Copies of the FCC Rule Parts 2 and 5 are on hand; and
- b. Adequate financial appropriations have been made to carry on the program of experimentation which will be conducted by qualified personnel; and
- c. All operations will be on an experimental basis in accordance with Part 5 and other applicable rules, and will be conducted in such a manner and at such time as to preclude harmful interference to any authorized station; and
- d. Grant of the authorization requested herein will not be construed as a finding on the part of the Commission:
 - 1. that the frequencies and other technical parameters specified in the authorization are the best suited for the proposed program of experimentation, and
 - 2. that the applicant will be authorized to operate on any basis other than experimental, and
 - 3. that the Commission is obligated by the results of the experimental program to make provision in its rules including its table of frequency allocations for applicant's type of operation on a regular licensed basis.

THE APPLICANT FURTHER CERTIFIES THAT:

- e. All the statements in the application and attached exhibits are true, complete and correct to the best of the applicant's knowledge; and
- f. The applicant is willing to finance and conduct the experimental program with full knowledge and understanding of the above limitations; and
- g. The applicant waives any claim to the use of particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States of America.

WILLFUL FALSE STATEMENTS MADE ON THIS APPLICATION ARE PUNISHABLE BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 10010, 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).

Signature:



Date:

11/17/02

Individual Applicant Member of Applicant Partnership Officer of Applicant Corporation or Association