FCC/MAILROOM 13 1998

FCC 405

Federal Communications Commission
Washington, DC 20554

Approved by OMB
3060-0093
See instructions for
burden statement.

FCC USE ONLY

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

File Number	Call Sign
0238-EX-AR-1998	KI2XDP
Service	Class of Station

READ INSTRUCTIONS AND NOTICE ON REVERSE BEFORE COMPLETING

1. Name of Applicant (must be identical with that shown on current authorization)
University of Utah Seismograph Stations

Mailing Street Address, P. O. Box, City, State and ZIP Code of Applicant
135 South 1460 East, Room 705 WBB, Salt Lake City, UT 84106

Internet Address: techs@seis.utah.edu

(Area Code) Telephone Number: 801-581-6274

Call Sign or Other FCC Identifier: KI2XDP

Identify Rulepart under which this filing is made:

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

(a) Fee Type Code	(b) Fee Multiple	(c) Fee Due for Fee Type Code in 2(a)	FOR FCC USE ONLY
	1	$0.00	

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

(a) File Number	(b) Date Issued	(c) Call Sign	(d) Location
0238-EX-R-96	10/1/96	KI2XDP	State of Utah, S.E. Idaho and W. Wyoming

(e) Nature of Service	(f) Class of Station	(g) Expiration Date
Experimental	XR MO	10/1/98

4. Note any changes which have been made since the last application covering this station was filed (i.e. discontinuance of use of a frequency, type of emission, transmitter, etc.)

None

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

5(a) Has there been removal of equipment or alteration of facilities so as to render the station not operational? If "YES", indicate when: _____ ☐ YES ☒ NO

(b) If this is a Multipoint 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 this 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.

File Number: 0238-EX-R-96 Date: 7/8/98

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 regulatory power of the United States because of the previous use of same, whether by license or otherwise, and requests authorization 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; undersigned certifies 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.

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 FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

Name of Applicant (must correspond with Item 1)	Title of Applicant
University of Utah Seismograph Stations	Seismograph Network Manager
SIGNATURE: Sue Nava	DATE: 7/8/98

Designate appropriate classification:

☐ Individual ☐ Member of Partnership ☐ Officer & Member of Applicant's Association ☐ Authorized Rep. of Corporation ☒ Official of Government Entity

FCC 405A

Approved by OMB
3060-0107
Expires 1/31/00
See instructions for
public burden estimate

UNITED STATES OF AMERICA
FEDERAL COMMUNICATIONS COMMISSION

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PRIVATE RADIO APPLICATION FOR RENEWAL, REINSTATEMENT AND/OR NOTIFICATION OF CHANGE TO LICENSE INFORMATION

1. APPLICANT NAME	University of Utah Seismograph Stations
2. MAILING ADDRESS (Line 1)	135 South 1460 East, Room 705 WBB
3. CITY	Salt Lake City
4. STATE	UT
5. ZIP CODE	84106
6. INTERNET ADDRESS	techs@seis.utah.edu
7. CALL SIGN OR OTHER FCC IDENTIFIER	KI2XDP

8. PAYMENT TYPE CODE	9. QUANTITY	10. FEE DUE	FOR FCC USE ONLY
	1	$ 0	

11. PURPOSE

- [X] RENEW LICENSE (FEE MAY BE REQUIRED)
- [ ] REINSTATE LAND MOBILE LICENSE (FEE MAY BE REQUIRED)
- [ ] NOTIFICATION OF NAME CHANGE WITHOUT CHANGE IN OWNERSHIP, CORPORATE STRUCTURE OR ENTITY (NO FEE REQUIRED)
  FORMER NAME OF LICENSEE: _____
- [ ] LAND MOBILE NOTIFICATION OF CHANGE IN THE NUMBER OF MOBILES/PAGERS (SEE INSTRUCTION C) (FEE MAY BE REQUIRED)
- [X] NOTIFICATION OF MAILING ADDRESS CHANGE (NO FEE REQUIRED)
- [ ] NOTIFICATION OF STATION CLOSURE, CANCEL LICENSE LISTED IN ITEM 7 (NO FEE REQUIRED)
- [ ] LAND MOBILE NOTIFICATION OF CONDITIONAL CANCELLATION FOR CONVERSION TO PRIVATE CARRIER (NO FEE REQUIRED). PLEASE PROVIDE NAME OF PRIVATE CARRIER: _____

12. RADIO SERVICE: Experimental	13. LOCATION OF TRANSMITTER(S), (GIVE DESCRIPTION OF LOCATION SUCH AS STREET, CITY, STATE, COORDINATES, ETC.)
14. FILE NUMBER: 0238-EX-R-96	State of Utah, Southeastern Idaho, and Western Wyoming
15. CLASS OF STATION(S): XR MO	

CERTIFICATION

1. Applicant waives all claims for the use of any specific frequency regardless of prior use by license or otherwise.
2. Applicant will have unlimited access to the radio equipment and will control access to exclude unauthorized persons.
3. Neither applicant nor any member thereof is a foreign government or representative thereof.
4. Applicant certifies that all statements made in this application and attachments are true, complete, correct and made in good faith.
5. The individual signing this application certifies that he or she is a person with the proper authority to sign on behalf of the applicant, as stated in C.F.R., Title 47, Section 1.913.
6. 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, U.S.C. Section 862, because of a conviction for possession or distribution of a controlled substance.

WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITL 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 4 SECTION 312(A)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

SIGNATURE Sue Nava **DATE** 7/8/98

FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID.