FORM 405 APPLICATION FOR RENEWAL OF RADIO LICENSE IN SPECIFIED SERVICES FOR OFFICIAL USE ONLY

$APPLICANT\ INFO \overline{RMATIONE} \textbf{Enter a description of this application to identify it on the main menu:}$

Receive Only Earth Station Renewal for E930296

1. Applicant

Name: Charter Communications, LLC

Phone Number:

303-256-3440

DBA Name:

Fax Number:

303-256-3465

Street:

12405 Powerscourt Drive

E-Mail:

AAnderten@chartercom.com

City:

St Louis

State:

MO

63131

3674

Country:

Attention:

USA

Zipcode:

Alexis Anderten

2. Contact						
Nam	Name: Alexis Anderten Phone		Phone Nu	mber:	303-256-3440	
Com	pany: Ch	Charter Communications, Inc.	Fax Number: E-Mail:		303-256-3465	
Stree	et: 12	405 Powerscourt Drive			aanderten@chartercom.com	
City:	: St.	Louis	State:		МО	
Cour	ntry: US	SA	Zipcode:		63131 –	
Cont Title		anager of FCC Compliance	Relations	hip:	Engineer	
3. Rulepart unde	er which this	filing is made Rulepart 25				
4. Is a fee submi If Yes, comp Government Other(please	olete and atta tal Entity			•	ption (see 47 C.F.R.Section 1.1114).	
5. Application is	for renewal	of license in exact conformi	ty with the			
existing license	as specified l	below:				
a)File Number SESREG1993051001505				(b)Date Issued 1993–05–10 00:00:00.0		
e)Call Sign				(d)Location		

Spartanburg, South Carolina

E930296

(e)Nature of Service Domestic Fixed Satellite	(f)Class of Station Receive Only Earth Station (CGO)				
(g)Expiration Date 2003–05–10 00:00:00.0	Petition to reinstate:				
6. Note any changes such as discontinuance of use of a frequency, or of application covering this station was filed:	a type of emission or of a transmitter which have been	made sir	nce the last		
Items 7(a) and (b) apply to Part 21 licenses only.					
7(a) Has there been removal of equipment or alteration of facilities as to render the Station not operational?					
If YES when:					
(b) If this is a Multipoint Distribution Service (MDS) station, is there a with, or leasing arrangement with a cable television company?	ownership interest in control by, affiliation Yes No N/A				
8. Applicant represents that there has been no change in applicant's orgapplicant's relation to the station, or financial responsibility; that application identified below, is to be considered as a part of this application, and the here any further exceptions, not already covered in question 6 or 7. File Number Date 04/25/2003	cants most recent application or report embodying this	informati	on, as		

9. Would a Commission grant of this application come within 47 CFR 1.1307, such that it may have a significant environmental impact?	○ ◎ ○	Yes No N/A	
If YES, attach as an Exhibit an Environmental Assessment required by 47 CFR 1.1311:			
If NO, Explain briefly why not: Will not have a significant environmental impact			
10. Certification: The applicant certifies that, in the case of an individual applicant, he or she is not subject to a denial of federal benefits pursuant to section 5301 of Anti–Drug Abuse Act of 1988, 21 U.S.C. 853a, or, in the case of a nonindividual applicant (e. g., corporation, partnership or other unincorporated association), no party to the application is subject to denial of federal benefits pusuant to that section. For the definition of a "party" for these purposes, see 47 CFR 1.2002(b).	0	Yes No	
a. 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 a station license in accordance with this application. Applicant acknowledges that all attached exhibits are a material part hereof. b. The undersigned, individually and for the applicant, hereby certifies that the statements made in this application are true, complete and correct to the best of the signer's knowledge and belief, and are made in good faith.			
11. Designate Appropriate Classification:			
O Individual			
Unincorporated Association			
Partnership			
• Corporation			
Governmental Entity			
Other (please specify) L.L.C.			

12. Please supply any need attachments.

1:	2:		3:					
CERTIFICATION								
13. Typed Name of Person Signing Alexis Anderten		14. Title of Person Signing Manager of FCC Compliance						
WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND / ORIMPRISONMENT (U.S. Code, Title 18, Section1001), AND/OR REVOCATION OF ANY STATIONAUTHORIZATION (U.S. Code, Title 47, Section312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503).								

FCC NOTICE REQUIRED BY THE PAPERWORK REDUCTION ACT

The public reporting for this collection of information is estimated to average 2.25 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, AMD–PERM, Paperwork Reduction Project (3060–0093), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to jboley@fcc.gov. PLEASE DO NOT SEND COMPLETED FORMS TO THIS ADDRESS.

Remember – You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060–0093.

THE FOREGOING NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104–13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.