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

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: E6739 renewal

1. Applicant

Name: Comcast of Phone Number: 215–665–1700

California/Ohio/Pennsylvania/Utah

/Washington, Inc.

DBA Name: Fax Number: 215–981–7820

Street: 1500 Market Street E–Mail:

35th Floor

City: Philadelphia State: PA

Country: USA Zipcode: 19102 -

Attention: Ruth Billebault

2. Contact	2. Contact									
]	Name:	Ruth Billebault	Phone Nu	mber:	215-665-1700					
(Company:	Comcast of California/Ohio/Pennsylvania/Utah /Washington, Inc	Fax Numl	ber:	215–981–7820					
!	Street:	1500 Market Street	E-Mail:		ruth_billebault@cable.comcast.					
	City:	Philadelphia	State:		PA					
	Country:	USA	Zipcode:		19102 –					
	Contact Compliance Manager Relation Title:		Relations	hip:	Same					
RENEWAL INFORMATION										
3. Rulepart	under which	this filing is made Rulepart 25								
If Yes, of Govern		Noncommercial education		_	ee 47 C.F.R.Section 1.1114).					
5. Application is for renewal of license in exact conformity with the existing license as specified below:										
(a)File Number SESRWL1993110300409			(b)Date Issued 1994–02–18 00:00:00.0							
(c)Call Sign E6739			(d)Location McDonald, PA							

(e)Nature of Service Domestic Fixed	(f)Class of Station Receive Only Earth Station (CGO)									
(g)Expiration Date 2004–01–20 00:00:00.0	Petition to reinstate:									
6. Note any changes such as discontinuance of use of a frequency, or of a type of emission or of a transmitter which have been made since the last application covering this station was filed:										
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?									
	No No N/A									
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 organ applicant'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	ants most recent application or report embodying this information, as									

9. Would a Commision grant of this application come within 47 CFR 1.1307, such that it may have a significant environmental impact?	000	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:				
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).	⊗	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:				
 Individual Unincorporated Association Partnership Corporation Governmental Entity Other (please specify) 				

12. Please supply any need attachments.

1:	2:		3:					
CERTIFICATION								
13. Typed Name of Person Signing John Donahue		14. Title of Person Signing Sr. Vice President Engineering						
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).								

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