(e)Nature of Service	(f)Class of Station
(g)Expiration Date	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 mad 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?

- Yes
- No
- N/A

If YES when:

(b) If this is a Multipoint Distribution Service (MDS) station, is there a ownership interest in control by, affili with, or leasing arrangement with a cable television company?

- Yes
- No
- N/A

8. Applicant represents that there has been no change in applicant's organization and that there has been no transfer of control or changes applicant's relation to the station, or financial responsibility; that applicants most recent application or report embodying this informat identified below, is to be considered as a part of this application, and the truth of the statements therein contained is hereby reaffirm here any further exceptions, not already covered in question 6 or 7.

File NumberDate

9. Would a Commision grant of this application come within 47 CFR 1.1307, such that it may have a significant environ 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:

10. Certification: The applicant certifies that, in the case of an individual applicant, he or she is not subject to a denial o benefits pursuant to section 5301 of Anti-Drug Abuse Act of 1988, 21 U.S.C. 853a, or, in the case of a nonindividual ap g., corporation, partnership or other unincorporated association), no party to the application is subject to denial of feder 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 power of the United States because of the previous use of the same, whether by license or otherwise, and requests a license in accordance with this application. Applicant acknowledges that all attached exhibits are a material part hereo

b. The undersigned, individually and for the applicant, hereby certifies that the statements made in this application are 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	14. Title of Person Signing
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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