## FORM 312–R 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: E960455 (Noorvik) Renewal

1. Applicant

Name: GCI Communication Corp. Phone Number: 907–868–5615

**DBA Name:** Fax Number: 907–868–5676

Street: 2550 Denali Street, Suite 100 E–Mail: jrobertson@gci.com

City: Anchorage State: AK

**Country:** USA **Zipcode:** 99503 – 2737

**Attention:** Mrs Jennifer K G Robertson

| Contact  |                                 |                        |   |  |
|--|---------------------------------|------------------------|---|--|
| Name:  | Jennifer K. G. Robertson        | Phone Number:          | (907) 868–5615                              |  |
| Company:   | General Communication Corp.     | Fax Number:            | (907) 868–9817                              |  |
| Street:  | 2550 Denali Street, Suite 1000  | E–Mail:                | jrobertson@gci.com                          |  |
| City:  | Anchorage                       | State:                 | AK  |  |
| Country:   | USA                             | Zipcode:               | 99503 –                                     |  |
| Contact<br>Title:                                      | Tariffs and Licenses Manager    | Relationship:          | Other                                       |  |
|  |                                 |                        |   |  |
| RENEWAL INFORM   | IATION                          |                        |   |  |
| . Rulepart under which                                 |                                 |                        |   |  |
| . Italepart under which                                | Tuno ming is made — Reiepart 23 |                        |   |  |
| T f1   | 1. (1.' 1' 1' 1'                |                        |   |  |
| . Is a fee submitted wit                               | **                              | indicate reason for fo | ee exemption (see 47 C.F.R.Section 1.1114). |  |
|  |                                 |                        | the enemption (see 1) Circusterion 11111),  |  |
|  | •                               | ional ficensec         |   |  |
| Other(please explai                                    | 11).                            |                        |   |  |
|  |                                 |                        |   |  |
| 5. Application is for ren<br>existing license as speci |                                 | ty with the            |   |  |
| a)File Number  |                                 | (b)Date                | (b)Date Issued                              |  |
| SESLIC19960507012                                      | 231                             | 1996                   | 1996-08-09 00:00:00.0                       |  |
| c)Call Sign  |                                 | (d)Loca                | (d)Location                                 |  |
| E960455 Noorvik  |                                 |                        |   |  |

| (e)Nature of Service Fixed Satellite Service   | (f)Class of Station Fixed Satellite Transmit/Receive Earth Station (CGX) |                  |
|--|--|------------------|
| (g)Expiration Date<br>2004–08–30 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 since        | ce 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 t  | • · · · · · · · · · · · · · · · · · · ·                                  | Yes<br>No<br>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 orgapplicant's relation to the station, or financial responsibility; that application identified below, is to be considered as a part of this application, and there any further exceptions, not already covered in question 6 or 7. File Number Date | cants most recent application or report embodying this informatio        | on, 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<br>No<br>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).  | <b>⊗</b> | Yes<br>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:   |          |                  |  |  |  |
| <ul> <li>Individual</li> <li>Unincorporated Association</li> <li>Partnership</li> <li>Corporation</li> <li>Governmental Entity</li> <li>Other (please specify)</li> </ul>   |          |                  |  |  |  |

## 12. Please supply any need attachments.

| 1: Filing Description   | 2: |   | 3: |  |  |  |  |
|---|----|---|----|--|--|--|--|
| CERTIFICATION   |    |   |    |  |  |  |  |
| 13. Typed Name of Person Signing<br>Gene Strid  |    | 14. Title of Person Signing Vice President & Chief Engineer, Network Services |    |  |  |  |  |
| 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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