218-722-3017

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: Earth Station Renewal

1. Applicant

Name: Refuge Media Group Phone Number:

DBA Name: Fax Number:

Street: 425 W Superior Street E–Mail: palal@refugeradio.com

Suite 300

City: Duluth State: MN

Country: USA **Zipcode:** 55802 - 1504

Attention: Mr Al Gilbertson

2. Contact								
Na	me:	Al Gilbertson Pho	one Numbe	r: 2187	7223017			
Con	mpany:	Refuge Media Group Fax	x Number:					
Str	reet:	425 W Superior Street E –	-Mail:	palal	@refugeradio.com			
		STE 300						
Cit	ty:	Duluth Sta	ate:	MN				
Co	Country: USA Zipcod		pcode:	5580	2 – 1504			
Cor Tit			lationship:	Engi	neer			
RENEWAL I	NFORM.	ATION						
		this filing is made Rulepart 25						
		g a man a fam.						
4. Is a fee subr	mitted with	this application?						
			te reason fo	r fee exemption (see 47 (C.F.R.Section 1.1114).			
G Governme	ental Entity	Noncommercial educational l	icensee					
Other(plea	ase explain):						
5. Application is for renewal of license in exact conformity with the								
existing license as specified below:								
(a)File Number			\ /	(b)Date Issued				
SESMOD2004032200433				2004-05-06 00:00:00.0				
(c)Call Sign E950174			1 ' '	(d)Location Duluth, MN				
L/301/4			414411, 1 71 11 7					

(e)Nature of Service Domestic Fixed Satellite Sevice	(f)Class of Station Fixed Satellite VSAT System (CGV)								
(g)Expiration Date 2005–03–31 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?									
If YES when:		/A							
(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 org applicant's relation to the station, or financial responsibility; that applic identified below, is to be considered as a part of this application, and th 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 Commission grant of this application come within 47 CFR 1.1307, such that it may have a significant environmental impact? If YES, attach as an Exhibit an Environmental Assessment required by 47 CFR 1.1311: If NO, Explain briefly why not: On top of a building with other satellite dishes. Access to the roof is restricted. Power is less than 100 watts.	000	Yes No N/A
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). 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.		Yes No

11. Designate Appropriate Classification:

ြ	O Individual								
ō	Unincorporated Association								
o	Partnership								
o	Corporation								
0	Governmental Entity								
◉	Other (please specify) Non–Profit Corporation								
12.	12. Please supply any need attachments.								
1:	2:			3:					
CE	CERTIFICATION								
13. Typed Name of Person Signing Keith A. Johnson			14. Title of Person Signing Vice President						
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 (3060–1066), 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 3060–1066.

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.