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: Dillingham, AK (KD27)

1. Applicant

Name: Alascom, Inc. Phone Number: 770–602–2065

DBA Name: Fax Number: 770–929–4454

Street: 2315 Salem Road E-Mail: jvaughan@att.com

First Floor, H9

City: Conyers State: GA

Country: USA Zipcode: 30013 -

Attention: Jane M Vaughan

2. Contact					
Name:	Alascom, Inc.	Phone Number:	770–602–2065		
Company:		Fax Number:	770–929–4454		
Street:	2315 Salem Road	E-Mail:	jvaughan@att.com		
	First Floor, H9				
City:	Conyers	State:	GA		
Country:	USA	Zipcode:	30013 –		
Attention:	Jane M Vaughan	Relationship:	Relationship:		
_	th this application? ad attach FCC Form 159.	f No, indicate reason for fee exen	nption (see 47 C.F.R.Section 1.1114).		
• Governmental Enti	•	educational licensee			
Other(please expla	in):				
5. Application is for renewal of license in exact conformity with th existing license as specified below:		nformity with the			
(a)File Number SESMOD2000102401998		1 ` '	(b)Date Issued 2001–01–12 00:00:00.0		
(c)Call Sign KD27		(d)Location Dillingham,	(d)Location Dillingham, AK		

(f)Class of Station Fixed Satellite Transmit/Receive Earth Station (CGX)

(e)Nature of Service

FSS

(g)Expiration Date 2006–09–30 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 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	o render the Station not operational? O Yes 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 orgapplicant's relation to the station, or financial responsibility; that applic 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 SES-T/C-20050224-00232 Date 02/15/2005	

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: Existing station	0	Yes No N/A
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.	9	Yes No
11. Designate Appropriate Classification: Individual Unincorporated Association Partnership Corporation Governmental Entity Other (please specify)		

12. Please supply any need attachments.

1: Control Point	2: RADHAZ		3:					
CERTIFICATION								
13. Typed Name of Person Signing James J. R. Talbot		14. Title of Person Signing Senior Attorney						
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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