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: Mountain Village, AK (E2305)

1. Applicant

Name:

Alascom Inc./United Utilities, 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

Name: Jane M. Vaughan Phone Number: 770–602–2065 Company: AT&T 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: Same RENEWAL INFORMATION 3. Rulepart under which this filling is made Rulepart 25 4. Is a fee submitted with this application? If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114). Governmental Entity Noncommercial educational licensee Other(please explain): 5. Application is for renewal of license in exact conformity with the existing license as specified below: (a)File Number SESMOD1998072100941 (b)Date Issued 1998–07–31 00:00:00:00.0						
Company: AT&T 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: Same RENEWAL INFORMATION Rulepart under which this filing is made Rulepart 25 If yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114). Governmental Entity Noncommercial educational licensee Other(please explain): Application is for renewal of license in exact conformity with the kisting license as specified below: a)File Number SESMOD1998072100941 (b)Date Issued 1998–07–31 00:00:00.00.0	. Contact					
Street: 2315 Salem Road First Floor, H9 City: Conyers State: GA Country: USA Zipcode: 30013 – Attention: Jane M Vaughan Relationship: Same EENEWAL INFORMATION Rulepart under which this filing is made Rulepart 25 Is a fee submitted with this application? If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114). Governmental Entity Noncommercial educational licensee Other(please explain): Application is for renewal of license in exact conformity with the kisting license as specified below: a)File Number SESMOD1998072100941 (b)Date Issued 1998–07–31 00:00:00.0	Name:	Jane M. Vaughan	Phone Number:	770-602-2065		
First Floor, H9 City: Conyers State: GA Country: USA Zipcode: 30013 – Attention: Jane M Vaughan Relationship: Same ENEWAL INFORMATION Rulepart under which this filing is made Rulepart 25 Is a fee submitted with this application? If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114). Governmental Entity Noncommercial educational licensee Other(please explain): Application is for renewal of license in exact conformity with the xisting license as specified below: (b)Date Issued 1998–07–31 00:00:00.00	Company:	AT&T	Fax Number:	770–929–4454		
City: Conyers State: GA Country: USA Zipcode: 30013 - Attention: Jane M Vaughan Relationship: Same ENEWAL INFORMATION Rulepart under which this filing is made Rulepart 25 Is a fee submitted with this application? If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114). Governmental Entity Noncommercial educational licensee Other(please explain): Application is for renewal of license in exact conformity with the disting license as specified below: (b) Date Issued 1998-07-31 00:00:00.0	Street:	2315 Salem Road	E-Mail:	jvaughan@att.com		
Country: USA Zipcode: 30013 – Attention: Jane M Vaughan Relationship: Same ENEWAL INFORMATION Rulepart under which this filing is made Rulepart 25 Is a fee submitted with this application? If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114). Governmental Entity Noncommercial educational licensee Other(please explain): Application is for renewal of license in exact conformity with the disting license as specified below: (b) Date Issued 1998-07-31 00:00:00.00.00		First Floor, H9				
Attention: Jane M Vaughan Relationship: Same ENEWAL INFORMATION Rulepart under which this filing is made Rulepart 25 Is a fee submitted with this application? If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114). Governmental Entity Noncommercial educational licensee Other(please explain): Application is for renewal of license in exact conformity with the isting license as specified below: OFile Number (b)Date Issued 1998–07–31 00:00:00.00	City:	Conyers	State:	GA		
ENEWAL INFORMATION Rulepart under which this filing is made Rulepart 25 Is a fee submitted with this application? If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114). Governmental Entity Noncommercial educational licensee Other(please explain): Application is for renewal of license in exact conformity with the isting license as specified below: (b) Date Issued 1998–07–31 00:00:00.0	Country:	USA	Zipcode:	30013 –		
Rulepart under which this filing is made Rulepart 25 Is a fee submitted with this application? If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114). Governmental Entity Noncommercial educational licensee Other(please explain): Application is for renewal of license in exact conformity with the disting license as specified below: (b)Date Issued 1998–07–31 00:00:00.0	Attention:	Jane M Vaughan	Relationship:	Same		
Governmental Entity Noncommercial educational licensee Other(please explain): Application is for renewal of license in exact conformity with the disting license as specified below: (b) Date Issued 1998–07–31 00:00:00.0			o, indicate reason for fee exem	aption (see 47 C.F.R.Section 1.1114).		
Other(please explain): Application is for renewal of license in exact conformity with the xisting license as specified below: (b)Date Issued 1998–07–31 00:00:00.0			o, indicate reason for fee exem	aption (see 47 C.F.R.Section 1.1114).		
Application is for renewal of license in exact conformity with the tisting license as specified below: (b) Date Issued 1998–07–31 00:00:00.0	Governmental Entit	y Noncommercial educ	ational licensee			
xisting license as specified below: (b)Date Issued 1998–07–31 00:00:00.0	Other(please explain	n):				
xisting license as specified below: (b)Date Issued 1998–07–31 00:00:00.0						
SESMOD1998072100941 1998-07-31 00:00:00.0			mity with the			
e)Call Sign (d)Location	,		` '			
Mountain Village AV)Call Sign E2305		` '	(d)Location Mountain Village, AK		

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

(e)Nature of Service

FSS

(g)Expiration Date 2006–10–03 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 No	
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 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 the here any further exceptions, not already covered in question 6 or 7. File Number SES-T/C-20050224-00232 Date 02/21/2005	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?	○ ◎ ○	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: EXISTING STATION		
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 pursuant 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:		
O Individual		
O Unincorporated Association		
O Partnership		
© Corporation		
O 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.		14. Title of Person Signing TALBOT					
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.