## FORM 312–R APPLICATION FOR RENEWAL OF RADIO LICENSE IN SPECIFIED SERVICES FOR OFFICIAL USE ONLY

## $APPLICANT\ INFORMATION \textbf{Enter a description of this application to identify it on the main menu:} \\ RENEWAL-E880081$

Name:	CBS Communications Services Inc.	Phone Number:	202–457–4518
DBA Name	:	Fax Number:	202-457-4615
Street:	2175 K ST NW	E-Mail:	
	Suite 350		
City:	Washington	State:	DC
<b>Country:</b>	USA	Zipcode:	20037 –
Attention:			

2. Contact					
Name:	CBS, INC.	Phone Number	r: 202–457–4518		
Company:		Fax Number:	202-457-4615		
Street:	2175 K Street, Nw	E-Mail:			
	Suite 350				
City:	Washington	State:	DC		
Country:	USA	Zipcode:	20037 –		
<b>Attention:</b>	Spectrum Manager	Relationship:	Engineer		
4. Is a fee submitted with a life of the subm	td attach FCC Form 159. If Note that the Noncommercial education of the Noncommercial educati		or fee exemption (see 47 C.F.R.Section 1.1114).		
5. Application is for real existing license as spec		rmity with the			
(a)File Number SESMOD1998052700629		I	(b)Date Issued 1998–09–18 00:00:00.0		
(c)Call Sign E880081		` '	(d)Location Various		
(e)Nature of Service Fixed Satelite			(f)Class of Station Receive Only Earth Station (CGO)		

(g)Expiration Date 2007–12–24 00:00:00.0	Petition to reinstate:
6. Note any changes such as discontinuance of use of a frequency, or of a application covering this station was filed:  No changes	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	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 c 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 orga applicant's relation to the station, or financial responsibility; that application 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 SESMOD1998052700629 Date 09/18/1998	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?	0	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 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).	<ul><li>O</li></ul>	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:			
<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:	2:		3:				
CERTIFICATION							
13. Typed Name of Person Signing Raymond C. Benedict		14. Title of Person Signing 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).							

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