## 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: Renewal of WB74

1. Applicant

Name: Americom Government Services, **Phone Number:** 703–610–1002

Inc.

**DBA Name:** Fax Number: 703–610–1030

Street: 2010 Corporate Ridge, Suite 600 E-Mail: rick.minter@americom-gs.com

City: McLean State: VA

Country: USA Zipcode: 22102 -

**Attention:** Rick Minter

2. Contact					
Name:	Maurice Najarian	Phone Numb	ber: 703-610-0985		
Company:	Americom Government Services	Fax Number	<del>:</del>		
Street:	2010 Corporate Ridge	E–Mail:	maurice.najarian@americom-gs. com		
	Suite 550				
City:	McLean	State:	VA		
Country:	USA	Zipcode:	22102 –		
Attention:		Relationship:			
A. Is a fee submitted with a lifty of ther (please explain).	this filing is made Rulepart 25  th this application? I attach FCC Form 159. If No, in  y  Noncommercial education		for fee exemption (see 47 C.F.R.Section 1.1114).		
5. Application is for rend existing license as specific	•	y with the			
a)File Number SESMOD2005041200432			(b)Date Issued 2005–06–13 00:00:00.0		
(c)Call Sign WB74			(d)Location MARYLAND		

(e)Nature of Service FSS	(f)Class of Station Fixed Satellite Transmit/Receive Earth Station (CGX)			
(g)Expiration Date 2010–03–25 00:00:00.0	etition to reinstate:			
6. Note any changes such as discontinuance of use of a frequency, or of a 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 render the Station not operational?  O				
If YES when:				
(b) If this is a Multipoint Distribution Service (MDS) station, is there a cwith, 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 SES-T/C-20090724-00916Date 07/24/2009	ants most recent application or report embodying this information, 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 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).	<b>⊗</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:					
<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 Rick Minter		14. Title of Person Signing Chief Engineer						
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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