## 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: KG62 Renewal

1. Applicant

Name: Channel 40, Inc., Debtor–In–

**Phone Number:** 916–454–4422

Possession

DBA Name: Fax Number:

**Street:** 4655 Fruitridge Road **E–Mail:** 

City: Sacramento State: CA

Country: USA Zipcode: 95820 -

**Attention:** Jack Davis

2. Contact					
Name:	Jason Roberts	Phone Number:	3122223894		
Company:	Tribune Company	Fax Number:			
Street:	435 North Michigan Ave.	E-Mail:	jasroberts@tribune.com		
City:	Chicago	State:	IL		
Country:	USA	Zipcode:	60611 –		
Attention:	Jason Roberts	Relationship:	Legal Counsel		
	d attach FCC Form 159. If N	·	nption (see 47 C.F.R.Section 1.1114).		
Other(please explai	•	cational neensee			
5. Application is for renexisting license as speci		rmity with the			
a)File Number SESRWL200106110	1082	(b)Date Issued 2001–06–19	(b)Date Issued 2001–06–19 00:00:00.0		
c)Call Sign KG62		(d)Location Various			

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

(e)Nature of Service

Domestic Fixed Satellite Service

(g)Expiration Date 2011–05–19 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:  None	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?					
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 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-RWL-20010611-01082Date 06/19/2001	ants most recent application or report embodying this information, as	ne			

9. Would a Commision 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:	<b>○</b> <b>◎</b> <b>○</b>	Yes No N/A	
If NO, Explain briefly why not: No change in existing operation			
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:			
<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 Gerald Del Core		14. Title of Person Signing Vice President/General Manager					
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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