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: E880002 –2011 Renewal of License

1. Applicant

Name: KTUL, LLC Phone Number: 918–445–9398

DBA Name: Fax Number:

Street: 3333 S. 29th West Avenue E–Mail: rherring@ktul.com

City: Tulsa State: OK

Country: USA Zipcode: 74107 -

Attention: Roger Herring

2. Contact							
Name:	Jerald N. Fritz	Phone Number:	703–647–8747				
Company:	Allbritton Communications Company	Fax Number:					
Street:	1000 Wilson Boulevard	E-Mail:	jfritz@allbrittontv.com				
	Suite 2700						
City:	Arlington	State:	VA				
Country:	USA	Zipcode:	22209 –				
Attention:	Jerald N. Fritz	Relationship:	Legal Counsel				
4. Is a fee submitted with this application? If Yes, complete and attach FCC Form 159. Governmental Entity Noncommercial educational licensee Other(please explain):							
5. Application is for renexisting license as speci		nity with the					
a)File Number SESLIC2001062901267			(b)Date Issued 2001–10–04 00:00:00.0				
(c)Call Sign E880002			(d)Location Various				

(e)Nature of Service Domestic Fixed Satellite Service	(f)Class of Station Fixed Satellite Transmit/Receive Earth Station (CGX)				
(g)Expiration Date 2011–10–04 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: No change in operation	a type of emission or of a transmitter which have been made since the las				
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-T/C-20081024-01404 Date 11/12/2008	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: No change in current 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).		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						
Unincorporated Association						
O Partnership						
O Corporation						
O Governmental Entity						
Other (please specify) Limited Liability Company						

12. Please supply any need attachments.

1:	2:		3:				
CERTIFICATION							
13. Typed Name of Person Signing Stephen P. Gibson		14. Title of Person Signing Vice 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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