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:

Bresnan Communications, LLC — Renewal of R-Only SES KL80

1. Applicant

Name: Bresnan Communications, LLC **Phone Number:** 516–803–2556

DBA Name: Fax Number: 516–803–2575

Street: 1111 Stewart Avenue E–Mail: agrovema@cablevision.com

City: Bethpage State: NY

Country: USA Zipcode: 11714 -

Attention: Amy Groveman

2. Contact				
Name:	Russell Fox	Phone Number:	202-434-7483	
Company:	Mintz, Levin, Cohn, Ferris, Glovsky and Popeo, P.C.	Fax Number:	202-434-7300	
Street:	701 Pennsylvania Avenue, N.W.	E-Mail:	rfox@mintz.com	
	Suite 900			
City:	Washington	State:	DC	
Country:	USA	Zipcode:	20004 –	
Attention:	Russell Fox	Relationship:	Legal Counsel	
4. Is a fee submitted with a lif Yes, complete and Governmental Entity Other(please explain	d attach FCC Form 159. If No, it		exemption (see 47 C.F.R.Section 1.1114).	
5. Application is for renexisting license as speci		ty with the		
a)File Number SESRWL2001090701690		1 ' '	(b)Date Issued 2001–09–20 00:00:00.0	
c)Call Sign KL80			(d)Location Bozeman, Gallatin Co., MT	

(e)Nature of Service Domestic Fixed Satellite Service	(f)Class of Station Receive Only Earth Station (CGO)			
(g)Expiration Date 2011–11–20 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 sir	nce 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 orgapplicant'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-20110113-00037 Date 03/16/2011	cants most recent application or report embodying this i	nformati	on, as	

9. Would a Commission 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: Continuance of existing operations				
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).	0	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				
Governmental Entity				
Other (please specify)				

12. Please supply any need attachments.

1:	2:		3:				
CERTIFICATION							
13. Typed Name of Person Signing Bob Lee		14. Title of Person Signing VP, Inside Plant					
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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