## 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: E020186 Earth Station Renewal

1. Applicant

Name: ACC Licensee, LLC Phone Number: 202–663–8195

**DBA Name:** Fax Number: 202–663–8007

Street: c/o Pillsbury Winthrop Shaw E–Mail: miles.mason@pillsburylaw.com

Pittman LLP

1200 Seventeenth Street, NW

City: Washington State: DC

Country: USA Zipcode: 20036 -

**Attention:** Miles S Mason Esq.

Contac	t			
	Name:	Miles S. Mason	Phone Numb	er: 202–663–8195
	Company:	Pillsbury Winthrop Shaw Pittman LLP	Fax Number	202-663-8007
	Street:	1200 Seventeenth St. NW	E-Mail:	miles.mason@pillsburylaw.com
	City:	Washington	State:	DC
	<b>Country:</b>	USA	Zipcode:	20036 –
	Attention:		Relationship	Legal Counsel
		h this application?	dicata magas 1	on for exemption (see 47 CED Section 1 1114)
		· ·		or fee exemption (see 47 C.F.R.Section 1.1114).
-	rnmental Entit	•	onal licensee	
Other	r(please explain	1):		
	ation is for rend icense as speci	ewal of license in exact conformity fied below:	y with the	
			ı	
(a)File Nu SESRE	umber EG2002071801		1 ` ′	Date Issued 002–09–04 00:00:00.0

(e)Nature of Service Domestic Fixed Satellite Service	(f)Class of Station Receive Only Earth Station (CGO)				
(g)Expiration Date 2017–07–17 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-20141216-00916 Date 12/31/2014	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:					
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></li><li></li><li></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:					
O Individual O Unincorporated Association					
O Partnership					
• Corporation					
Other (please specify) Limited Liability Company					

## 12. Please supply any need attachments.

1:	2:		3:						
CERTIFICATION									
13. Typed Name of Person Signing David B. Amy		14. Title of Person Signing Secretary of Sinclair Television Group, Inc.							
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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