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 E5063

1. Applicant

Name: WREG License, LLC Phone Number: 312–222–3894

DBA Name: Fax Number:

Street: 435 N. Michigan Avenue E–Mail: jroberts@tribunemedia.com

City: Chicago State: IL

Country: USA Zipcode: 60611 -

Attention: Jason Roberts

2. Contact				
Name:	WREG License, LLC	Phone Nun	nber: 312–222–3894	
Company:		Fax Number	er:	
Street:	435 N. Michigan Avenue	E–Mail:	jroberts@tribunemedia.com	
City:	Chicago	State:	IL	
Country:	USA	Zipcode:	60611 –	
Attention:		Relationsh	ip:	
RENEWAL INFORM	MATION			
3. Rulepart under which	h this filing is made Rulepart 2:	5		
4. Is a fee submitted wi	* *	• 1• 4	6 6	
🕶		•	n for fee exemption (see 47 C.F.R.Section 1.1114).	
Governmental Enti	•	cational licensee		
Other(please expla	ın):			
5. Application is for renewal of license in exact conformity with the existing license as specified below:				
(a)File Number SESRWL200212020	a)File Number SESRWL2002120202072		(b)Date Issued 2001–04–17 00:00:00.0	
(c)Call Sign E5063		((d)Location Memphis, Shelby County, TN	
(e)Nature of Service Domestic Fixed Sate	ellite Service	((f)Class of Station Fixed Satellite Transmit/Receive Earth Station (CGX)	

(g)Expiration Date 2017–12–03 00:00:00.0	Petition 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 th	e 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 organ 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-20170627-00714 Date 07/12/2017	ants most recent application or report embodying this information, as	S			

9. Would a Commission grant of this application come within 47 CFR 1.1307, such that it may have a significant environmental impact?	0	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 pursuant 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:					
 Individual Unincorporated Association Partnership 					
Corporation Governmental Entity Other (please specify) Limited Liability Company					

12. Please supply any need attachments.

1:	2:		3:				
CERTIFICATION							
13. Typed Name of Person Signing Ronald Walter		14. Title of Person Signing VP/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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