## 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: E5404 – San Diego CA – Renewal App

1. Applicant

Name: Time Warner Cable Pacific West

**Phone Number:** 

303-323-1423

LLC

**DBA Name:** 

Fax Number:

Street:

12405 Powerscourt Drive

E-Mail:

CharterFCC@Charter.com

City:

St. Louis

State:

MO

**Country:** 

USA

Zipcode:

63131

**Attention:** 

Ms Alexis Anderten

2. Contact					
Name:	Name: Alexis Anderten Phone		303–323–1423		
Company:	Charter Communications	Fax Number:			
Street:	12405 Powerscourt Drive	E–Mail:	CharterFCC@charter.com		
City:	St. Louis	State:	МО		
Country:	USA	Zipcode:	63131 –		
<b>Attention:</b>		Relationship:			
<ul><li>3. Rulepart under whice</li><li>4. Is a fee submitted with</li></ul>		5			
- 15			mption (see 47 C.F.R.Section 1.1114).		
Other(please expla	•	eational necessee			
5. Application is for received existing license as spec		rmity with the			
a)File Number SESRWL2003022700241		` '	(b)Date Issued 2003–03–12 00:00:00.0		
(c)Call Sign E5404		(d)Location San Diego (	(d)Location San Diego CA		

(f)Class of Station Receive Only Earth Station (CGO)

(e)Nature of Service

Domestic Fixed Satellite

(g)Expiration Date 2018–03–25 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:  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?	O Yes		
		N/A		
If YES when:				
(b) If this is a Multipoint Distribution Service (MDS) station, is there a continuous desired and the colorisation of the colo	ownership interest in control by, affiliation Yes			
with, or leasing arrangement with a cable television company?				
8. Applicant represents that there has been no change in applicant's orga applicant's relation to the station, or financial responsibility; that applicate 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 NONE  Date	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?				
If YES, attach as an Exhibit an Environmental Assessment required by 47 CFR 1.1311:				
If NO, Explain briefly why not: Renewal only of existing station				
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).	<b>®</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				
O Unincorporated Association				
O Partnership				
O Corporation				
O Governmental Entity				
Other (please specify) Limited Liability Company				

## 12. Please supply any need attachments.

1: Coordinate Correctio	2:		3:				
CERTIFICATION							
13. Typed Name of Person Signing Stephen Flessner		14. Title of Person Signing Manager, FCC Relations					
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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