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 C–Band Earth Station

1. Applicant

Name: WHYY, Inc. **Phone Number:** 215–351–3302

DBA Name: Fax Number: 215–925–9373

Street: 150 North Sixth Street E–Mail: tkirk@whyy.org

City: Philadelphia State: PA

Country: USA Zipcode: 19106 -

Attention: Thad Kirk

2. Contact					
Name:	Steven C. Schaffer, Esq.	Phone Number:	(202)298–2535		
Company:	Garvey Schubert Barer	Fax Number:	(202) 965–1729		
Street:	1000 Potomac Street, N.W.	E-Mail:	sschaffer@gsblaw.com		
	Suite 200		· ·		
City:	Washington	State:	DC		
Country:	USA	Zipcode:	20007 –		
Attention:	-		ship:		
4. Is a fee submitted wit	* *	indicate reason for foe ever	aption (see 47 C.F.R.Section 1.1114).		
4. Is a fee submitted wit	h this application?				
If Yes, complete andGovernmental Entit			ption (see 47 C.F.K.Seetion 1.1114).		
Other(please explai	•				
5. Application is for ren existing license as speci		mity with the			
a)File Number SESRWL2003090201196		(b)Date Issued 2003–09–02	(b)Date Issued 2003–09–02 00:00:00.0		
(c)Call Sign E930490		(d)Location 150 North Si	(d)Location 150 North Sixth St., Philadelphia, PA		

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

(e)Nature of Service

Domestic Fixed Satellite Service

(g)Expiration Date 2018–09–28 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:	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? Yes No N/A
If YES when:	
(b) If this is a Multipoint Distribution Service (MDS) station, is there a owith, 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 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 SESREG1993092900670 Date 12/10/1993	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:	000	Yes No N/A			
If NO, Explain briefly why not: No Change					
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 O Governmental Entity					
Other (please specify)					

12. Please supply any need attachments.

1:	2:		3:					
CERTIFICATION								
13. Typed Name of Person Signing Thad Kirk		14. Title of Person Signing Chief Engineer						
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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