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: Form 312–R for E8021, Elk City, OK

1. Applicant

Name: Cable One, Inc. **Phone Number:** 602–364–6195

DBA Name: Fax Number: 602–364–6013

Street: 210 E. Earll Drive E–Mail: emerson.yearwood@cableone.biz

City: Phoenix State: AZ

Country: USA **Zipcode:** 85012 – 2626

Attention: Emerson Yearwood

Name:	Matthew S. DelNero, Esq.	Phone Number:	202-662-5543	
Company:	Covington & Burling LLP	Fax Number:	202-778-5543	
Street:	One CityCenter	E-Mail:	mdelnero@cov.com	
	850 Tenth Street, N.W.			
City:	Washington	State:	DC	
Country:	USA	Zipcode:	20001 –	
Attention:		Relationship:	Legal Counsel	

4. Is a fee submitted with this application? • If Yes, complete and attach FCC Form 159.	If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).	
Governmental Entity Noncommercial educational licensee		
Other(please explain):		

5. Application is for renewal of license in exact conformity with the existing license as specified below:	
(a)File Number	(b)Date Issued
SESRWL2004102901609	2004–11–05 00:00:00.0
(c)Call Sign	(d)Location
E8021	Elk City, OK
(e)Nature of Service Domestic Fixed Satellite Service	(f)Class of Station Receive Only Earth Station (CGO)

3. Rulepart under which this filing is made Rulepart 25

(g)Expiration Date 2019–11–30 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	a type of emission or of a transmitter which have been n	nade 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?	0 0 ●	Yes No N/A
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-20150202-00055 Date 04/15/2015	ants most recent application or report embodying this in	ıformati	on, as

impact?	Ŏ	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: Renewal Only; No Physical Changes Being Proposed		
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.	~	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		
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 Stephen Fox		14. Title of Person Signing Senior VP & Chief Network Officer		
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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