## FORM 312–R APPLICATION FOR RENEWAL OF RADIO LICENSE IN SPECIFIED SERVICES FOR OFFICIAL USE ONLY

## $APPLICANT\ INFORMATION \textbf{Enter a description of this application to identify it on the main menu:}$

Renewal of E050135 - BLOOMINGTON, MCLEAN, IL - C-Band Receive-Only Earth Stations

1. Applicant

Name: Verizon North LLC **Phone Number:** 703–694–5088

DBA Name: Fax Number:

Street: 22001 Loudoun County Parkway E–Mail: Patrick.Merrick@verizon.com

City: Ashburn State: VA

Country: USA Zipcode: 20147 –

**Attention:** Patrick Merrick

2. Contact					
Name:	April Yalenezian	Phone Number:	617.733.1049 april.l.yalenezian@verizon.com		
Company	Verizon North LLC	Fax Number:			
Street:	79 High Street	E–Mail:			
City:	Wareham	State:	MA		
Country:	USA	Zipcode:	_		
Attention:	wireless engineer	Relationship:	Engineer		
4. Is a fee submitted w  If Yes, complete a  Governmental En  Other(please expl.	nd attach FCC Form 159. If	·	aption (see 47 C.F.R.Section 1.1114).		
5. Application is for reexisting license as spe		nformity with the			
(a)File Number SESREG2005051000564		(b)Date Issued 2005–06–22	(b)Date Issued 2005–06–22 00:00:00.0		
(c)Call Sign E050135		(d)Location BLOOMING	(d)Location BLOOMINGTON, MCLEAN,IL		

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

(e)Nature of Service Receive Only Earth Station

(g)Expiration Date 2020–05–10 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 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 cowith, 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 Date	nts 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:	○ ●	Yes No N/A		
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).	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				
Unincorporated Association				
O Partnership				
• Corporation				
Governmental Entity				
Other (please specify) LLC				

## 12. Please supply any need attachments.

1:	2:		3:					
CERTIFICATION								
13. Typed Name of Person Signing April Yalenezian		14. Title of Person Signing Wireless 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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