APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: WKBW STA 5-22-07

1. Applicant

Name: WKBW-TV License, Inc. **Phone Number:** 716–845–6100

DBA Name: Fax Number: 716–842–1855

Street: 7 Broadcast Plaza **E-Mail:**

c/o Granite B'cast.

City: Buffalo State: NY

Country: USA **Zipcode:** 14202 –2699

Attention: Bill Ransom

2. Contac	et				
	Name:	Tom W. Davidson, Esq.	Phone Number:	2028874011	
	Company:	Akin Gump Strauss Hauer & Feld LLP	Fax Number:	2029557719	
	Street:	1333 New Hampshire Ave NW	E–Mail:	tdavidson@akingump.com	
	City:	Washington	State:	DC	
	Country:	USA	Zipcode:	20036 –	
	Attention:		Relationship:	Legal Counsel	
application	n. Please enter			ne file number or the IB Submission ID of the related	
		with this application?			
		l attach FCC Form 159. If No, indic		on (see 47 C.F.R.Section 1.1114).	
		Noncommercial educational	licensee		
Other	r(please explain	1):			
4b. Fee C	lassification	CGX – Fixed Satellite Transmit/Rece	eive Earth Station		
5. Type R	equest				
Use Prior to Grant Change			Station Location	Other	
6. Reques					_

7. CityBuffalo	8. Latitude (dd mm ss.s h) 0 0 0.0					
9. State NY	10. Longitude (dd mm ss.s h) 0 0 0.0					
11. Please supply any need attachments.						
Attachment 1: Attachment 1 Attachment 2:	Attachment 3:					
12. Description. (If the complete description does not appear in this box, please go to the end of the form to view it in its entirety.)						
Request for Special Temporary Authorizations for WKBW-TV License, Inc. during pendency and FCC staff processing of the application to transfer control of WKBW-TV License, Inc. from W. Don Cornwell to SPLLC (FCC File No. SES-T/C-20070214-00235). 13. By checking Yes, the undersigned certifies that neither applicant nor any other party to the application is subject to a denial of Federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti-Drug Act of 1988, 21 U.S.C. Section 862, because of a conviction for possession or distribution of a controlled substance. See 47 CFR 1.2002(b) for the meaning of "party to the application" for these purposes.						
14. Name of Person Signing Mr. W. Don Cornwell	15. Title of Person Signing Shareholder					
WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND / OR IMPRISONMENT (U.S. Code, Title 18, Section 1001), AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, Section 312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503).						

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