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**Federal Communications Commission  
Wireless Telecommunications Bureau**

**RADIO STATION AUTHORIZATION**

LICENSEE: UNIVERSITY OF WISCONSIN NUCLEAR REACTOR

ATTN: ROBERT AGASIE  
UNIVERSITY OF WISCONSIN NUCLEAR REACTOR  
1513 UNIVERSITY AVE  
MADISON, WI 53706

<b>Call Sign</b> WQME513	<b>File Number</b>
<b>Radio Service</b> IG - Industrial/Business Pool, Conventional	
<b>Regulatory Status</b> PMRS	
<b>Frequency Coordination Number</b>	

FCC Registration Number (FRN): 0019995752

<b>Grant Date</b> 07-15-2010	<b>Effective Date</b> 07-15-2010	<b>Expiration Date</b> 07-15-2020	<b>Print Date</b>
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**STATION TECHNICAL SPECIFICATIONS**

**Fixed Location Address or Mobile Area of Operation**

**Loc. 1 Area of operation**

Operating within a 8.0 km radius around 43-04-24.1 N, 089-24-41.3 W,  
MADISON, DANE county, WI

**Antennas**

Loc No.	Ant No.	Frequencies (MHz)	Sta. Cls.	No. Units	No. Pagers	Emission Designator	Output Power (watts)	ERP (watts)	Ant. Ht./Tp meters	Ant. AAT meters	Construct Deadline Date
1	1	000451.18750000	MO	20		11K2F3E	4.000	4.000			07-15-2011

**Control Points**

**Control Pt. No. 1**

**Address:** 1513 UNIVERSITY AVE

**City:** MADISON **County:** DANE **State:** WI **Telephone Number:** (608)262-3392

**Associated Call Signs**

**Conditions:**

Pursuant to §309(h) of the Communications Act of 1934, as amended, 47 U.S.C. §309(h), this license is subject to the following conditions: This license shall not vest in the licensee any right to operate the station nor any right in the use of the frequencies designated in the license beyond the term thereof nor in any other manner than authorized herein. Neither the license nor the right granted thereunder shall be assigned or otherwise transferred in violation of the Communications Act of 1934, as amended. See 47 U.S.C. § 310(d). This license is subject in terms to the right of use or control conferred by §706 of the Communications Act of 1934, as amended. See 47 U.S.C. §606.

**Licensee Name:** UNIVERSITY OF WISCONSIN NUCLEAR

**Call Sign:** WQME513

**File Number:**

**Print Date:**

**Waivers/Conditions:**

NONE

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