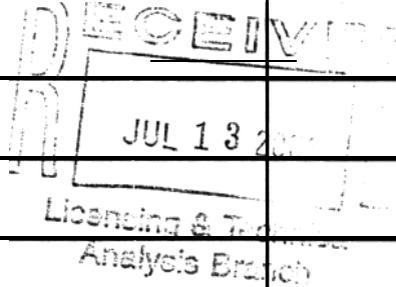


Applicant/Licensee Information

1) First Name (if individual):	MI.	Last Name	Suffix
2) Applicant Name (if entity) <i>ORIGINAL</i> McCaw Communications of Johnstown. Inc.		3) Applicant TIN: 	

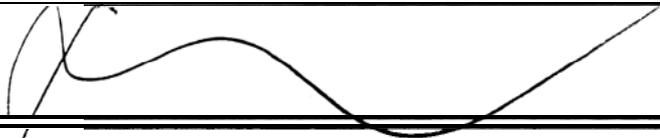
Related FCC Regulated Businesses of Applicant/Licensee

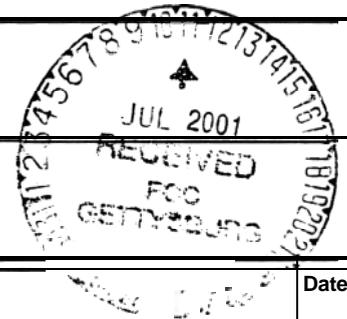
4a) Name and address of all FCC Regulated Businesses owned by Applicant/Licensee (use additional sheets, if necessary):	4b) Principal Business:	4c) TIN:	4d) Percent of interest Held:
None			



Signature

5) Typed or Printed Name of Party Authorized to Sign

First Name: Douglas	MI: I	Last Name: Brandon	Suffix:
Title: Vice President			
Signature: 			Date: 7/10/01



Failure To Sign This Application May Result In Dismissal Of The Application And Forfeiture Of Any Fees Paid

WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U S Code, Title 18 Section 1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U S Code, Title 47, Section 312(a)(1)). AND/OR FORFEITURE (US Code, Title 47, Section 503)

