

REFERENCE COPY

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**Federal Communications Commission
Public Safety and Homeland Security Bureau**

RADIO STATION AUTHORIZATION

LICENSEE: ADDISON, VILLAGE OF

ATTN: COUNTY FIRE SERVICE
ADDISON, VILLAGE OF
VILLAGE HALL
PO BOX B
ADDISON, NY 14801

Call Sign KCX949	File Number
Radio Service PW - Public Safety Pool, Conventional	
Regulatory Status PMRS	
Frequency Coordination Number	

FCC Registration Number (FRN):

Grant Date 04-28-1997	Effective Date 04-28-1997	Expiration Date 06-29-2002	Print Date
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STATION TECHNICAL SPECIFICATIONS

Fixed Location Address or Mobile Area of Operation

Loc. 1 Area of operation

Other: VIC: ADDISON NY

Loc. 2 Address: FIRE STATION CORNER OF MAIN & TUSCARORA ST

City: ADDISON **County:** STEUBEN **State:** NY

Lat (NAD83): 42-06-12.3 N **Long (NAD83):** 077-13-58.9 W **ASR No.:** **Ground Elev:**

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	000046.22000000	MO	10		20K0F3E	110.000				
1	1	000046.40000000	MO	10		20K0F3E	110.000				
2	1	000046.22000000	FB	1		20K0F3E	110.000		18.0		
2	1	000046.40000000	FB	1		20K0F3E	110.000		18.0		

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: ADDISON, VILLAGE OF

Call Sign: KCX949

File Number:

Print Date:

Control Points

Control Pt. No. 1

Address:

City: **County:** **State:** **Telephone Number:** (607)359-2100

Associated Call Signs

<NA>

Waivers/Conditions:

NONE