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

**RADIO STATION AUTHORIZATION**

LICENSEE: IRONBOUND AMBULANCE SQUAD INC

ATTN: LUIS CARVALHO  
IRONBOUND AMBULANCE SQUAD INC  
399 NEW YORK AVE  
PO BOX 5022  
NEWARK, NJ 07105

<b>Call Sign</b> KRC854	<b>File Number</b> 0010191171
<b>Radio Service</b> PW - Public Safety Pool, Conventional	
<b>Regulatory Status</b> PMRS	
<b>Frequency Coordination Number</b>	

FCC Registration Number (FRN): 0004142881

<b>Grant Date</b> 09-03-2022	<b>Effective Date</b> 09-03-2022	<b>Expiration Date</b> 11-25-2032	<b>Print Date</b> 09-03-2022
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**STATION TECHNICAL SPECIFICATIONS**

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

**Loc. 1 Area of operation**

Other: VIC:ESSEX COUNTY NJ

**Loc. 2 Address: 399 NEW YORK AVE**

**City: NEWARK County: ESSEX State: NJ**

**Lat (NAD83): 40-43-20.4 N Long (NAD83): 074-09-10.5 W ASR No.: Ground Elev: 3.0**

**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	000155.22000000	MO	10		11K2F3E	100.000	100.000			
2	1	000155.22000000	FB	1		11K2F3E	100.000	100.000	24.0	1.0	

**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:** IRONBOUND AMBULANCE SQUAD INC

**Call Sign:** KRC854

**File Number:** 0010191171

**Print Date:** 09-03-2022

**Control Points**

**Control Pt. No. 1**

**Address:** 399 NEW YORK AVE

**City:** NEWARK **County:** ESSEX **State:** NJ **Telephone Number:** (973)589-3796

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**Associated Call Signs**

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<NA>

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**Waivers/Conditions:**

NONE

Reference Copy