REFERENCE COPY

This is not an official FCC license. It is a record of public information contained in the FCC's licensing database on the date that this reference copy was generated. In cases where FCC rules require the presentation, posting, or display of an FCC license, this document may not be used in place of an official FCC license.



Federal Communications Commission Public Safety and Homeland Security Bureau

RADIO STATION AUTHORIZATION

LICENSEE: FINGER LAKES AMBULANCE EMS INC

FINGER LAKES AMBULANCE EMS INC 20 CRANE ST PO BOX 616 CLIFTON SPRINGS, NY 14432-0616 Call Sign WNQS573

Radio Service
PW - Public Safety Pool, Conventional

Regulatory Status
PMRS

Frequency Coordination Number

FCC Registration Number (FRN): 0003401247

Grant Date	Effective Date	Expiration Date	Print Date		
09-09-2004	09-09-2004	11-16-2014			

STATION TECHNICAL SPECIFICATIONS

Fixed Location Address or Mobile Area of Operation

Loc. 1 Address: 20 CRANE ST

City: CLIFTON SPRINGS County: ONTARIO State: NY

Lat (NAD83): 42-57-45.2 N Long (NAD83): 077-09-29.9 W ASR No.: Ground Elev: 213.0

Loc. 2 Area of operation

Operating within a 121.0 km radius around 42-57-45.2 N, 077-09-29.9 W,

ONTARIO county, NY

Antennas

]	Loc	Ant	Frequencies	Sta.	No.	No.	Emission	Output EI	RP A	Ant.	Ant.	Construct
ľ	No.	No.	(MHz)	Cls.	Units	Pagers	Designator	Power (w	vatts) l	Ht./Tp	AAT	Deadline
								(watts)	1	meters	meters	Date
	1	1	000155.26500000	FB	1	25	20K0F3E	100.000 325	25.000	30.0		
									\			
4	2	1	000155.26500000	MO	20		20K0F3E	100.000				

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: FINGER LAKES AMBULANCE EMS INC

Call Sign: WNQS573 File Number: Print Date:

Control Pt. No. 2
Address: 20 Crane Street

City: Clifton Springs County: ONTARIO State: NY Telephone Number: (315)462-6642

Associated Call Signs

<NA>

Waivers/Conditions:

NONE