# Reference Copy Only. Do Not Mail to the FCC as an Application.

Submitted: 02/24/2023 at 10:21:39

File Number: 0010431435

### **FCC 601**

#### **Main Form**

Radio Service Code:
 PW

10) Is the Applicant exempt from FCC regulatory fees?

circumstances.

11) Does this application include a request for a Waiver of the Commission's

Rule(s)? If 'Yes', attach an exhibit providing rule number(s) and explaining

12) Are the frequencies or parameters requested in this filing covered by grandfathered privileges, previously approved by waiver, or functionally integrated with an existing station?

# FCC Application for Radio Service Authorization: Wireless Telecommunications Bureau Public Safety and Homeland Security Bureau

1a) Existing Radio Service Code:

Approved by OMB

3060 - 0798

See instructions for public burden estimate

2)	(Select only one) ( NE - New MD - Modification AM - Amendment	MD ) RO - Renewal Only RM - Renewal/Modification CA - Cancellation of License	WD - Withdrawal of Application	NT - Required Notifica EX - Requests for Exte	
3a)			pecial Temporary Authorization (STA), enterons. Otherwise enter 'N/A' (Not Applicable)		(N) <u>MSN/A</u>
3b)		or Special Temporary Authority du or an explanation of situations cor	e to an emergency situation, enter 'Y'; othersidered to be an emergency.	erwise enter 'N'.	( ) <u>Y</u> es <u>N</u> o
4)	If this application is fo currently on file with the		enter the file number of the pending applica	ation	File Number
5)	or Administrative Upd	late, enter the call sign of the exis	Renewal/Modification, Cancellation of Licer sting FCC license. he FCC call sign assigned to the geograph		Call Sign WXR376
6a)		r a New, Amendment, Renewal ( on date (this item is optional).	Only, or Renewal/Modification, enter the red	quested	MM DD
6b)	is the license used to	provide service to customers (C)	odification and the license is a geographic a , or is the license used for private business ic safety communications needs ( <b>P</b> )?		( ) <u>C</u> <u>P</u>
7) Is	radio service rules fo	und in Parts 22 and 90 of the C	mission's Rules when read in conjunction w commission's Rules? (NOTE: This questio or applicability and full text of § 1.929).		( <b>Y</b> ) <u>Y</u> es <u>N</u> o
8)	Are attachments (other	than associated schedules) beir	g filed with this application?		( <b>N</b> ) <u>Y</u> es <u>N</u> o

( Y )Yes No

( N )Yes No

( **N** )<u>Y</u>es <u>N</u>o

1016/2419     101   Applicant/Licensee Legal Entity Type: (Select One)   Individual ( )   Unincorporated Association ( )   ITrust ( X ) Government Entity ( )   Corporation ( )   Limited Liability Compani   Individual ( )   Unincorporated Association ( )   ITrust ( X )   Government Entity ( )   Corporation ( )   Limited Liability Compani   Itrust ( )   Corporation ( )   Limited Liability Partnership ( )   Consortium   Itrust ( )   Corporation ( )   Limited Liability Partnership ( )   Consortium   Itrust ( )   Corporation ( )   Limited Liability Partnership ( )   Consortium   Itrust ( )   Corporation ( )   Limited Liability Partnership ( )   Consortium   Itrust ( )   Corporation ( )   Limited Liability Partnership ( )   Consortium   Itrust ( )   Corporation ( )   Limited Liability Partnership ( )   Consortium   Itrust ( )   Corporation ( )   Consortium   Itrust ( )   Consortium   Corporation   Corpo	pplicant Information								
Applicant/Licensee Legal Entity Type: (Select One)   Individual ( )   Unincorporated Association ( )   Trust ( X ) Government Entity ( ) Corporation ( )   Limited Liability Companish ( )   General Partnership ( )   Limited Partnership ( )   Limited Partnership ( )   Corporation ( )   Limited Liability Partnership ( )   Limited Liability Partnership ( )   Corporation ( )   Limited Liability Partnership ( )   Limited Liability Partnership ( )   Limited Liability Partnership ( )   Corporation ( )   Limited Liability Partnership ( )   Limited Liabi	3) FCC Registration Number (FRN):								
District   Description   Des	Applicant/Licensee Legal Entity Type: (Select One )Individual ( )Unincorporated Association	ı ( )Tru	,	•	, , ,	·	( )Limited	d Liability	Company
party and for which proper Commission approval has not been received or proper notification not provided?    Mi: Last Name: Suffix: Suffix: Suffix: Suffix: Mi: Last Name: Suffix: Suf		date a resi	ult from th	ne sale i	(or transfer of control)	of the licens	e(s) to	T (	) <u>Y</u> es <u>N</u> o
Texas, State of (DPS)  3) Attention To: ENGINEERING SERVICES, IOD  3) Op 70, Box:  4087  4087  5805 N. Lamar  10) City:  AUSTIN  10 Telephone Number:  (512)424-7332  10 Telephone Number:  (512)424-7332  10 E-Mail Address:  22) State:  23) Zip Code:  TX  78773-0259  25) Fax:  (512)424-5320  25) E-Mail Address:  (512)424-5320  26 Ender:  (Male								`	<i>_</i>
Texas, State of (DPS)   Attention To:   Ethnicity:   (1)   Hispanic or Latino   (1)   Horest	6) First Name (if individual):		MI: L	ast Nan	ne:			Suffix:	
Texas, State of (DPS)   Attention To:   Ethnicity:   (1)   Hispanic or Latino   (1)   Horest	7) Legal Entity Name (if other than individual):								
3) Attention To:   ENGINEERING SERVICES, IDD									
20   No. Box:	8) Attention To:								
4087	ENGINEERING SERVICES, IOD								
City:	9) P.O. Box:	And/O	r 20) St	reet Add	dress:				
AUSTIN TX 78773-0259  I) Telephone Number: (512)424-2732 (512)424-5320  S) E-Mail Address:  DPSTECHNICAL.ASSISTANCE@DPS.TEXAS.GOV  P) Demographics (Optional) ace:    )American Indian or Alaska Native    )Asian    )Asian    )Black or African-American    )Native Hawaiian or Other Pacific Islander    )White  3) Name of Real Party in Interest 3) Name of Real Party in Interest of Applicant (If different from policant)    )Check here if same as Applicant.  1) Check here if same as Applicant.  1) Company Name:    Texas Department of Public Safety  2) Response of Pacific Islander  2) Proc Registration Number (FRN) of Real Party in Interest:  Suffix:  1) Company Name:    Texas Department of Public Safety  2) Response of Pacific Islander  3) Poly Response of Pacific Islander  4087  And    (And    ) And    (B) Street Address:    (512)424-7134  3) Pax:    (512)424-7134  (512)424-7134  (512)424-7134  (512)424-7320	4087		58	805 N.	Lamar				
25) Fax: (512)424-2732 (512)424-5320	1) City:				22) State	e:			
(512)424-2732 (512)424-2732 (512)424-5320  (512)424-5320							78773-	0259	
Demographics (Optional)   Ethnicity:   Gender:   () Male   () Ma	I) Telephone Number:			2	,				
DPSTECHNICAL.ASSISTANCE@DPS.TEXAS.GOV  7) Demographics (Optional) ace:	,				(512)424-5320				
7) Demographics (Optional) ace:	,		.,						
ace:   American Indian or Alaska Native   Ethnicity: ( ) Hispanic or Latino   ( ) Male     Asian   ( ) Not Hispanic or Latino   ( ) Female     Black or African-American   ( ) Not Hispanic or Latino   ( ) Female     Black or African-American   ( ) Not Hispanic or Latino   ( ) Female     Black or African-American   ( ) Not Hispanic or Latino   ( ) Female     Black or African-American   ( ) Not Hispanic or Latino   ( ) Female     Black or African-American   ( ) Not Hispanic or Latino   ( ) Female     Black or African-American   ( ) Female     Black or African   ( ) Female     Black or African   ( ) Female     Black or Afri	DPSTECHNICAL.ASSISTANCE@DPS.TE	XAS.GU	V						
) American Indian or Alaska Native ) Asian ) Asian ) Black or African-American ) Native Hawaiian or Other Pacific Islander ) White  al Party in Interest 3) Name of Real Party in Interest of Applicant (If different from pplicant):  ntact Information (If different from the Applicant) ) Check here if same as Applicant.  D) First Name:  Native Hawaiian or Other Pacific Islander ) White  29) FCC Registration Number (FRN) of Real Party in Interest:  phicarty:  NII: Last Name:  Suffix:  1) Company Name:  Texas Department of Public Safety  2) Attention To:  PUB SAFETY COMM SVC  3) P.O. Box: 4087  And /Or  34) Street Address: 50 City: Austin  36) State: TX  37) Zip Code: 78773-0259  39) Fax: (512)424-7134  39) Fax: (512)424-734  39) Fax: (512)424-734	7) Demographics (Optional)				<u> </u>				
)Asian )Black or African-American )Native Hawaiian or Other Pacific Islander )White  al Party in Interest 3) Name of Real Party in Interest of Applicant (If different from pplicant):  al Party in Interest 3) Name of Real Party in Interest of Applicant (If different from pplicant):  al Party in Interest 3) Name of Real Party in Interest of Applicant (If different from pplicant):  al Party in Interest 3) Name of Real Party in Interest of Applicant (If different from pplicant):  al Party in Interest 3) Name of Real Party in Interest 408	lace:		•	o or Lati	20	Gen			
)Black or African-American )Native Hawaiian or Other Pacific Islander )White  al Party in Interest B) Name of Real Party in Interest of Applicant (If different from policant):  ntact Information (If different from the Applicant) ) Check here if same as Applicant.  D) First Name:  MI: Last Name:  Suffix:  1) Company Name:  Texas Department of Public Safety  2) Attention To: PUB SAFETY COMM SVC  3) P.O. Box: 4087  And /Or   And /Or   34) Street Address: 4087  5) City: Austin  36) State: TX   37) Zip Code: T8773-0259  39) Fax: (512)424-7134  0) E-Mail Address:	)American mulan of Alaska Native	,	, ,			(	Jiviaie		
)Native Hawaiian or Other Pacific Islander )White  al Party in Interest B) Name of Real Party in Interest of Applicant (If different from pplicant):  ntact Information (If different from the Applicant) ) Check here if same as Applicant.  O) First Name:  MI: Last Name: Suffix:  1) Company Name:  Texas Department of Public Safety  2) Attention To: PUB SAFETY COMM SVC  3) P.O. Box: 4087  And /Or  And /Or  And /Or  34) Street Address: 5805 N LAMAR  36) State: TX  37) Zip Code: TX  78773-0259  3) Telephone Number: (512)424-7134  0) E-Mail Address:	)Asian	(	)Not Hisp	oanic or	Latino	(	)Female		
al Party in Interest 3) Name of Real Party in Interest of Applicant (If different from pplicant):  129) FCC Registration Number (FRN) of Real Party in Interest:  129) FCC Registration Number (FRN) of Real Party in Interest:  129) FCC Registration Number (FRN) of Real Party in Interest:  129) FCC Registration Number (FRN) of Real Party in Interest:  129) FCC Registration Number (FRN) of Real Party in Interest:  120) First Name:  130) First Name:  140  150 Company Name:  150 Company Name:  160 Texas Department of Public Safety  170 And Normal Address:  170 And Normal Address:  170 Street Address:  170 State:  171 Tax State:  172 Tax State:  173 Tax State:  174 Tax State:  175 Tax State:  176 Tax State:  177 Tax State:  177 Tax State:  178 Tax	)Black or African-American								
al Party in Interest 3) Name of Real Party in Interest of Applicant (If different from pplicant):  129) FCC Registration Number (FRN) of Real Party in Interest:  129) FCC Registration Number (FRN) of Real Party in Interest:  129) FCC Registration Number (FRN) of Real Party in Interest:  129) FCC Registration Number (FRN) of Real Party in Interest:  129) FCC Registration Number (FRN) of Real Party in Interest:  120) First Name:  130) First Name:  140  150 Company Name:  150 Company Name:  160 Texas Department of Public Safety  170 And Normal Address:  170 And Normal Address:  170 Street Address:  170 State:  171 Tax State:  172 Tax State:  173 Tax State:  174 Tax State:  175 Tax State:  176 Tax State:  177 Tax State:  177 Tax State:  178 Tax	)Native Hawaiian or Other Pacific Islander								
al Party in Interest B) Name of Real Party in Interest of Applicant (If different from pplicant):    29) FCC Registration Number (FRN) of Real Party in Interest:   29) FCC Registration Number (FRN) of Real Party in Interest:   29) FCC Registration Number (FRN) of Real Party in Interest:   29) FCC Registration Number (FRN) of Real Party in Interest:   20) First Name:	,								
Solution   Name of Real Party in Interest of Applicant (If different from policant):   29) FCC Registration Number (FRN) of Real Party in Interest:	)vvnite								
Intact Information (If different from the Applicant)  (If different from the Applicant	al Party in Interest				O) FCC Denistration A	lumb on /EDN	) of Dool Do		
Check here if same as Applicant.   MI:   Last Name:   Suffix:     Company Name:   Texas Department of Public Safety	8) Name of Real Party in Interest of Applicant (If diff pplicant):	erent from	1	2	9) FCC Registration r	Number (FRIN	) of Real Pa	arty in inte	erest:
Check here if same as Applicant.   MI:   Last Name:   Suffix:     Company Name:   Texas Department of Public Safety									
Check here if same as Applicant.   MI:   Last Name:   Suffix:     Company Name:   Texas Department of Public Safety	entact Information (If different from the Applicant)								
1) Company Name:	) Check here if same as Applicant.		Lan	11	Maria				0.45
Texas Department of Public Safety  2) Attention To:     PUB SAFETY COMM SVC  3) P.O. Box:     4087  And     /Or  And     /Or  S805 N LAMAR  5) City:     Austin  3) Telephone Number:     (512)424-7134  (5) E-Mail Address:  34) Street Address:     /Or  34) Street Address:     /Or  36) State:     TX     /Or  78773-0259  39) Fax:     (512)424-5320	U) FIRST Name:		IVII:	Last	Name:				Sumx:
Texas Department of Public Safety  2) Attention To:     PUB SAFETY COMM SVC  3) P.O. Box:     4087  And     /Or  And     /Or  S805 N LAMAR  5) City:     Austin  3) Telephone Number:     (512)424-7134  (5) E-Mail Address:  34) Street Address:     /Or  34) Street Address:     /Or  36) State:     TX     /Or  78773-0259  39) Fax:     (512)424-5320	1) Company Name:								
PUB SAFETY COMM SVC  3) P.O. Box: 4087  And /Or 5805 N LAMAR  5) City: Austin  36) State: TX  37) Zip Code: 78773-0259  39) Fax: (512)424-7134  39) Fax: (512)424-5320  39) E-Mail Address:									
4087	2) Attention To: PUB SAFETY COMM SVC								
5) City: Austin  36) State: TX  78773-0259  37) Zip Code: 78773-0259  39) Fax: (512)424-7134  (512)424-5320  D) E-Mail Address:	3) P.O. Box: 4087						1		
Austin TX 78773-0259  B) Telephone Number: (512)424-7134 (512)424-5320  D) E-Mail Address:	5) City:		1				37) <i>7</i>	ip Code:	
(512)424-7134 (512)424-5320 (512)424-5320									59
	8) Telephone Number: (512)424-7134			39					
	0) E-Mail Address:								

Reg	ulatory Status										
41)	) This filing is fo	r authorization to provide or	use the follow	ving type(s) of ra	dio service	e offering (enter a	II that apply)	:			
(	) <u>C</u> ommon Ca	rrier ( ) <u>N</u> on-Common	Carrier (	X )Private, inte	rnal comm	nunications (	) <u>B</u> roadcas	t Services	( ) <u>E</u>	<u>3</u> and <u>M</u> a	anager
Тур	e of Radio Serv	vice									
42)	) This filing is fo	r authorization to provide the	e following typ	oe(s) of radio ser	vice (choo	se all that apply):					
(	) <u>F</u> ixed	( <b>X</b> ) <u>M</u> obile	( ) <u>R</u>	adiolocation	(	) <u>S</u> atellite (sound	d) (	) <u>B</u> roadcas	st Service	s	
43)	) Does the Appl	icant propose to provide ser	vice interconi	nected to the pub	olic telepho	one network?			( N	) <u>Y</u> es	<u>N</u> o
		Questions (If any answer is tructions for the "Alien Ow			explainin	g the circumstar	nces. In pre	eparing the a	attachme	nt, refe	r to
44)	) Is the Applicar	nt a foreign government or th	e representa	tive of any foreig	n governm	nent?			( N	) <u>Y</u> es	<u>N</u> o
45)	) Is the Applicar	nt an alien or the representat	ive of an alie	n?					( N	) <u>Y</u> es	<u>N</u> o
46)	) Is the Applicar	nt a corporation organized ur	nder the laws	of any foreign go	overnment	?			( N	) <u>Y</u> es	<u>N</u> o
the	• • •	nt a corporation of which mo ves, or by a foreign governm		•			•		( N	) <u>Y</u> es	<u>N</u> o

owned	the Applicant directly or indirectly controlled by any other corporation of which more than one-fourth of the capital stock ( <b>N</b> ) <u>Y</u> es <u>N</u> o is of record or voted by aliens or their representatives, or by a foreign government or representative thereof, or by any ration organized under the laws of a foreign country?
48b) I	the answer to 47 or 48a is 'Y' select one of the choices below.
	The Applicant is exempt from the provisions of Section 310(b).
	It is not necessary to file a petition for declaratory ruling if the Applicant includes in the attachment required by Item 47 or Item 48a a showing that the requested license(s) is exempt from the provisions of Section 310(b).
	The Applicant has received a declaratory ruling(s) approving its foreign ownership, and the application involves only the acquisition of additional spectrum for the provision of a wireless service in a geographic coverage area for which the Applicant has been previously authorized.
	If checked, include in the attachment required by Item 47 or Item 48a the citation(s) of the applicable declaratory ruling(s) by DA/FCC number, the FCC Record citation, if available, release date, and a statement that there has been no change in the foreign ownership of the Applicant since the issuance of its ruling.
	The Applicant: (i) has received a declaratory ruling(s) approving its foreign ownership, but is not able to make the certification specified immediately above; or (ii) is an "affiliate" of a Licensee or Lessee/Sublessee that received a declaratory ruling(s) under 47 CFR § 1.5000(a) and is relying on the affiliate's ruling for purposes of filing this application as permitted under the affiliate's ruling and 47 CFR § 1.5004(b)
	If checked, and if the Applicant received its declaratory ruling(s) on or after August 9, 2013, include in the attachment required by Item 47 or Item 48a the citation(s) of the Applicant's declaratory ruling(s) by DA/FCC number, the FCC Record citation, if available, release date, and a statement that the Applicant is in compliance with the terms and conditions of its ruling and with the Commission's Rules.
	If checked, and if the Applicant received its declaratory ruling(s) prior to August 9, 2013, include in the attachment required by Item 48a a copy of a petition for declaratory ruling filed contemporaneously with the Commission to extend the Applicant's existing ruling(s) to cover the same radio service(s) and geographic coverage area(s) involved in the application. Alternatively, the Applicant may request a new declaratory ruling pursuant to Section 1.5000(a) of the Commission's Rules, 47 CFR § 1.5000 (a). Petitions for declaratory ruling may be filed electronically on the Internet through the International Bureau Filing System (IBFS) (with a copy attached hereto).
	If checked, and if the Applicant is relying on an affiliate's ruling for purposes of filing this application, include in the attachment required by Item 47 or Item 48a the citation(s) of the applicable declaratory ruling(s) by DA/FCC number, the FCC Record citation, if available, release date, and a statement that the Applicant is in compliance with the terms and conditions of the named affiliate's ruling and with the Commission's Rules. The Applicant must also include a certification of compliance signed by the named affiliate or other qualified entity as specified in 47 CFR § 1.5004(b). See Main Form Instructions for Items 47 or 48a, as applicable.
	The Applicant has not received a declaratory ruling approving its foreign ownership and is requesting a declaratory ruling under 47 CFR § 1.5004(b) in a petition filed contemporaneously with the Commission.
	If checked, include in the attachment required by Item 47 or 48a a copy of the petition for declaratory ruling filed contemporaneously with the Commission pursuant to 47 CFR § 1.5004(b). Petitions for declaratory ruling may be filed electronically on the Internet through the International Bureau Filing System (IBFS) (with a copy attached hereto).

Basic Qualification Questions  49) Has the Applicant or any party to this application had any FCC station authorization, license or construction	(	N	) <u>Y</u> es	No
permit revoked or had any application for an initial, modification or renewal of FCC station authorization, license, or construct permit denied by the Commission?				
50) Has the Applicant or any party to this application, or any party directly or indirectly controlling the Applicant, ever been convicted of a felony by any state or federal court?	(	N	) <u><b>Y</b></u> es	<u>N</u> o
51) Has any court finally adjudged the Applicant or any party directly or indirectly controlling the Applicant guilty of unlawfully monopolizing or attempting unlawfully to monopolize radio communication, directly or indirectly, through control of manufacture or sale of radio apparatus, exclusive traffic arrangement, or any other means or unfair methods of competition?	(	N	) <u>Y</u> es	<u>N</u> o
Note: If the answer to any of 49-51 is 'Y', attach an exhibit explaining the circumstances.				
Aeronautical Advisory Station (Unicom) Certification				
52) ( ) I certify that the station will be located on property of the airport to be served, and, in cases where the airport does not he tower, RCO, or FAA flight service station, that I have notified the owner of the airport and all aviation service organizations lowithin ten days prior to application.				t
Broadband Radio Service and Educational Broadband Service Cable Cross-Ownership  53a) Will the requested facilities be used to provide multichannel video programming service?	(		) <u><b>Y</b></u> es	<u>N</u> o
53b) If the answer to question 53a is 'Y', does the Applicant operate, control or have an attributable interest	- (		) <u>Y</u> es	No
(as defined in 47 CFR § 27.1202) in a cable television system whose franchise area is located within the geographic service area of the requested facilities?	(		<u>)1</u> 03	<u>14</u> 0
Note: If the answer to question 53b is 'Y', attach an exhibit explaining how the Applicant complies with 47 CFR § 27.1202 or justifying a waiver of that rule. If a waiver of the Commission Rule(s) is being requested, Item 11a must be answered 'Y'.				
Broadband Radio Service and Educational Broadband Service (Part 27)				
54) (For EBS only) Does the Applicant comply with the programming requirements contained in 47 CFR § 27.1203?	(		) <u>Y</u> es	<u>N</u> o
Note: If the answer to item 54 is 'N', attach an exhibit explaining how the Applicant complies with 47 CFR § 27.1203 of the Commission's Rules or justifying a waiver of that rule. If a waiver of the Commission Rule(s) is being requested, Item 11a must	be			
answered 'Y'. 55) (For BRS and EBS) Does the Applicant comply with 47 CFR §§ 27.50, 27.55, and 27.1221?	(		) <u>Y</u> es	<u>N</u> o
Note: If the answer to item 55 is 'N', attach an exhibit justifying a waiver of that rule(s). If a waiver of the Commission Rule(s) is being requested, Item 11a must be answered 'Y'.	S			
For Applicants Who Participated in an Auction				
56) Is the Applicant a qualifying rural wireless partnership or a member of a qualifying rural wireless partnership?		(	) <u><b>Y</b></u> e:	s <u>N</u> o
Note: If the answer to item 56 is 'Y', attach an exhibit listing all members of the qualifying rural wireless partnership, including FRN numbers.	their			
Fay Danawal Amiliaanta				
For Renewal Applicants 57) Operation/Performance Requirement Certification				
For a site-based license]: Applicant certifies that it is continuing to operate consistent with its most recently filed construction	(	) <b>Y</b> e	s <u>N</u> o	
notification (or most recent authorization, if no construction notification was required).  For a geographic license, commercial service - licensee in its initial license term with an interim performance				
requirement]: Applicant certifies that it has met its interim performance requirement, that over the portion of the license term ollowing the interim performance requirement, it continues to use its facilities to provide at least the level of service required by its interim performance requirement, it has met its final performance requirement, and it continues to use its facilities to provide at least the level of service required by its final performance requirement through the end of the license term.	(	) <u>Y</u> e	s <u>N</u> o	
For a geographic license, commercial service - licensee in its initial license term with no interim performance requirement]: Applicant certifies that it has met its final performance requirement and it continues to use its facilities to provide at least the level of service required by its final performance requirement through the end of the license term. [Note: licensee must provide a showing demonstrating that the final performance requirement has been met, either separately in a timely	(	) <u><b>Y</b></u> e	s <u>N</u> o	
application for notification of completion of construction, or as part of its renewal application, depending on the radio service.]  For a geographic license, commercial service - licensee in any subsequent term]: Applicant certifies that it continues to				
use its facilities to provide at least the level of service required by its final performance requirement through the end of any subsequent license terms.	(	) <u>Y</u> e	s <u>N</u> o	
For a geographic license, private systems - licensee in its initial license term with an interim performance equirement]: Applicant certifies that it has met its interim performance requirement, that over the portion of the license term ollowing the interim performance requirement, it continues to use its facilities to further its private business or public	(	) <u>Y</u> e	s <u>N</u> o	
nterest/public safety communications needs at or above the level required to meet its interim performance requirement, it has met its final performance requirement, and it continues to use its facilities to provide at least the level of operation required by its inal performance requirement through the end of the license term.				
For a geographic license, private systems - licensee in its initial license term with no interim performance equirement]: Applicant certifies that it has met its final performance requirement, it continues to use its facilities to further its	(	) <u><b>Y</b></u> e	s <u>N</u> o	
private business or public interest/public safety communications needs, and it continues to use its facilities to provide at least the evel of operation required by its final performance requirement through the end of the license term. [Note: licensee must				

for notification of completion of construction, or as part of its renewal application, depending on the radio service.]

[For a geographic license, private systems - licensee in any subsequent term]: Applicant certifies that it continues to use its facilities to further its private business or public interest/public safety communications needs at or above the level required to meet its final performance requirement through the end of any subsequent license terms.	(	) <u>Y</u> es <u>N</u> o
[For a partitioned or disaggregated license without a performance requirement, for the first renewal application filed after effective date of the rules]: Applicant certifies that the partitioned and/or disaggregated license that is the subject of this renewal application has no separate performance requirement and that this is the first renewal of this license filed subsequent to the effective date of the rules.	(	) <u>Y</u> es <u>N</u> o
[For a partitioned or disaggregated license without a performance requirement, for any subsequent renewal filings]: Applicant certifies that it continues to use its facilities to provide service or to further the applicant's private business or public interest/public safety needs.	(	) <u>Y</u> es <u>N</u> o
Discontinuance of Service Certification		

by Applicant certifies that no permanent discontinuance of service or operation, as applicable, occurred during its current license term.	( ) <u>Y</u> es <u>N</u> o
Note: If the response to either item 57 or item 58 is 'N', attach an exhibit that demonstrates that over the course of the license term, the Applicant provided and continues to provide service to the public, or operated and continues to operate the license to meet the Applicant's private business or public interest/public safety communications needs. This exhibit must include a detailed description of the Applicant's provision of service or, when allowed under the relevant service rules or pursuant to waiver, use of the spectrum for private business or public interest/public safety communications needs, during the entire license period and address, as applicable: 1) the level and quality of service provided by the applicant (e.g., the population served, the area served, the number of subscribers, the services offered); (2) the date service commenced, whether service was ever interrupted, and the duration of any interruption or outage; (3) the extent to which service is provided to rural areas; (4) the extent to which service is provided to qualifying tribal land as defined in 47 CFR § 1.2110(e)(3)(i); and (5) any other factors associated with the level of service to the public. The licensee may note in its exhibit: 1) any grant(s) of waiver or extension of a performance deadline or license renewal subject to meeting a performance requirement; or 2) if the final performance deadline and/or expiration date for the license accelerated because the licensee did not meet an interim performance requirement.	

#### Regulatory Compliance Certification [same for all]

regulatory compilation continuation [dame for all]		
59) Applicant certifies that it has substantially complied with all applicable FCC rules, policies, and the Communications Act of 1934, as amended.	( ) <u>Y</u> es <u>N</u> o	
<b>Note:</b> If the response to item 59 is 'N', attach an exhibit explaining the circumstances and demonstrating why Applicant's license should be renewed.		

#### **General Certification Statements**

- The Applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and requests an authorization in accordance with this application.
- The Applicant certifies that grant of this application would not cause the Applicant to be in violation of any pertinent cross-ownership or attribution rules." \*If the Applicant has sought a waiver of any such rule in connection with this application, it may make this certification subject to the outcome of the waiver request.
- The Applicant certifies that all statements made in this application and in the exhibits, attachments, or documents incorporated by reference are material, are part of 3) this application, and are true, complete, correct, and made in good faith.
- The Applicant certifies that neither the Applicant nor any other party to the application is subject to a denial of Federal benefits pursuant to § 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. § 862, because of a conviction for possession or distribution of a controlled substance. This certification does not apply to applications filed in services exempted under § 1.2002(c) of the rules, 47 CFR § 1.2002(c). See 47 CFR § 1.2002(b) for the definition of "party to the application" as used in this
- The Applicant certifies that it either (1) has current required ownership data on file with the Commission, (2) is filing updated ownership data simultaneously with this 5) application, or (3) is not required to file ownership data under the Commission's Rules.
- The Applicant certifies that the facilities, operations, and transmitters for which this authorization is hereby requested are either: (1) categorically excluded from routine environmental evaluation for RF exposure as set forth in 47 CFR § 1.1307(b); or, (2) have been found not to cause human exposure to levels of radiofrequency radiation in excess of the limits specified in 47 CFR §§ 1.1310 and 2.1093; or, (3) are the subject of one or more Environmental Assessments filed with the Commission.
- The Applicant certifies that it has reviewed the appropriate Commission Rules defining eligibility to hold the requested license(s) and is eligible to hold the requested license(s).
- The Applicant certifies that it is not in default on any payment for Commission licenses and that it is not delinquent on any non-tax debt owed to any federal agency.
- The Applicant certifies that the Applicant and all of the related individuals and entities required to be disclosed on this application and FCC Form 602 (FCC Ownership Disclosure Information for the Wireless Telecommunications Services) are not person(s) who have been, for reasons of national security, barred by any agency of the Federal Government from bidding on a contract, participating in an auction, or receiving a grant. This certification applies only to applications for licenses for spectrum that is required by Sections 6103, 6401-6403 of the Middle Class Tax Relief and Job Creation Act of 2012, codified at 47 U.S.C. §§ 309, 1413, 1451-1452, to be assigned by a system of competitive bidding under 47 U.S.C. § 309(j).

#### Signature

60)Typed or Printed Name of Party Authorized to Sign

First Name:			Last Name:		Suffix:						
BENJAMIN			WILSON								
61) Title: DIRECTOR, FLEET AND TECHNICAL SERVICES,											
Signature:				62) Date:							
BENJAMIN WILSON				02/24/20	)23						
				•							

#### FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID.

Upon grant of this license application, the Licensee may be subject to certain construction or coverage requirements. Failure to meet the construction or coverage requirements will result in termination of the license. Consult appropriate FCC regulations to determine the construction or coverage requirements that apply to the type of license requested in this application.

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

# FCC 601 Schedule D

# Wireless Telecommunications Bureau and/or Public Safety and Homeland Security Bureau Schedule for Station Locations and Antenna Structures

Approved by OMB 3060 - 0798

See 601 Main Form Instructions for public burden estimate

1) Action Requested: ( )	<u>A</u> dd	<u>M</u> od <u>D</u> el	2) Location Number:	
3) Location Description:		4) Area of Operation	Code:	5) Location Name:
6) FCC Antenna Structure Regist	ration Num	iber, FCC 854 File Nur	N/A	
7) Latitude (DD-MM-SS.S):		<b>NAD83</b> ( ) <u>N</u> or <u>S</u>	8) Longitude (DDD-M	MM-SS.S): NAD83 ( ) <u>E</u> or <u>W</u>
9) Street Address, Name of Land	ing Area, o	r Other Location Descr	ription:	
10) City:		11) State:		12) County/Borough/Parish:
13) Elevation of Site AMSL (mete ('a' in antenna structure exam		14) Overall Ht AGL V Appurtenances ( ('b' in antenna si		15) Overall Ht AGL With Appurtenances (meters) ('c' in antenna structure example):
16) Support Structure Type:				L
17) Location Number: (only for Area of Operation Code 'A')	18) Radiu	ıs (km):	19) Airport Identifier:	20) Site Status:
21) Maximum Latitude (DD-MM-S Use for rectangle only (Northwest of		<b>NAD83</b> ( ) <u>N</u> or <u>S</u>	22) Maximum Longitu Use for rectangle only	ude (DDD-MM-SS.S): NAD83 v (Northwest corner) ( ) E or W
23) Do you propose to operate in	an area tha	at requires frequency of	coordination with Canad	da? ( ) <u>Y</u> es <u>N</u> o
24) Description: (only for Area of	Operation (	Code 'O')		
25) Number of Units:	Hand Held_	Mobile	Temporary Fixed	AircraftItinerant
26) Would a Commission grant o environmental effect? See Sect If 'Yes', submit an environme	ion 1.1307 ntal assess	of 47 CFR. sment as required by 4	7 CFR, Sections 1.1308	8 and 1.1311.
27a) If the site is located in one of proper Quiet Zone entity was		Zones listed in Item 27	7b of the Instructions, pr	rovide the date (mm/dd/yyyy) that the
27b) Has the Applicant obtained specified in this application		n consent from the prop	per Quiet Zone entity fo	or the same technical parameters that are ( ) <u>Y</u> es <u>N</u> o
28) Do you propose to operate in	an area th	at requires frequency	coordination with Mexico	o? ( ) <b>Y</b> es <b>N</b> o

FCC 601 Schedule H

## Technical Data Schedule for the Private Land Mobile and Land Mobile Broadcast Auxiliary Radio Services (Parts 90 and 74)

Approved by OMB 3060 - 0798 See 601 Main Form instructions for public burden estimate

Eligibility								
1) Rule Section 90.20	1:	,		CE RADIO COMMUNICAT	TIONS F	OR PROTECTION	N OF LIFE	E AND
Frequency C	Coordinator I	nformation (if no	t self-coordir	nated)				
3) Frequency Coordination Name Number				4) uency Coordinator		5) Telephone Nun	6) Coordination Date	
31PWAP330	259738	Associated I	Public Safet	y Com Officrs Inc	(	(386)322-2500		02/23/2023
7) Has this app	olication been s	uccessfully coordina	ated?		•			( Y )Yes/No
8) Are you requ	uesting a new o	n (Slow Growth) or modified extended	d implementati	ion plan?				( <sub>N</sub> ) <u>Y</u> es/ <u>N</u> o
If 'Yes', atta	ich an exhibit w	rith a justification an	d a proposed	station construction schedule	).			( N ) <u>+</u> 00/ <u>H</u> 0
9) <b>KA2686</b>	ļ	KEP588	WN	WV791				
Broadcast Au	xiliary Only							
If there is an a Parent Statior Items 10-12.		10) Facility Station:	Id of Parent	11) Radio Service of Parent Station:		City and State of F nmunity:	Parent Sta	ation Principal
13) If there is no C <u>a</u> ble Netwo		rent station, this App Broadcast Network		) elevision <b>C</b> able Operator		14) State	e of Primar	y Operation:
<u>L</u> arge Venue	Owner or Oper Sound Compan	ator <u>M</u> otio	n Picture Prod sion Producer	ucer .				
Control Point	(s) (Other tha	an at the transmi	tter) (Attac	ch additional sheets if re	quired)			
15) Action A/M/D	16) Control Poi Number	nt		17) Location City or Town, County/Borough	· ·	State	Tel	18) ephone umber

**Antenna Information** 

Antenna n	ii Oi iii atioii							
19)	20)	21)	22)	23)	24)	25)	26)	27)
Action	Location	Antenna	AAT	Antenna Ht.	Azimuth	Beamwidth	Polarization	Gain (dB)
( )	Number	Number	(meters)	(meters)	(degrees)	(degrees)		` ′
À/M/Ď			,	, ,	, ,	, , ,		
	, ,							

# **Frequency Information**

28) Action ( ) A/M/D	29) Location Number	30) Antenna Number	31) Frequency (MHz)		32) Station Class	33) No. of Units	34) No. of Paging Receivers	35) Output Power (watts)	36) ERP (watts)	37) Emission Designators
A	1	1	Existing (if Mod) 000159.09750000	New	FB2	1		100.000	270.000	11K2F3E (A), 8K10F1D (A), 8K10F1E (A)
	1	1	Existing (if Mod) 000159.21750000	New	FB2	1		100.000	270.000	11K2F3E, 8K10F1D, 8K10F1E, 5K76G1E (D)
	1	2	Existing (if Mod)  000155.46750000	New	FB	1		250.000	500.000	11K2F3E, 8K10F1D, 8K10F1E, 5K76G1E (D)