Approved by OMB (Office of Management and Budget) 3060-0386

July 2002

# Request for Silent Authority of an FM Translator Station Application

Authorization

Reference Copy FAQ

File Number: 0000207477 | Submit Date: 01/23/2023 | Call Sign: W280EC | Facility ID: 145612 | FRN: 0014336119 | State: New Hampshire | City:

CONCORD

Service: FX Purpose: Request for Silent STA Status: Granted Status Date: 02/02/2023 Expiration Date: 08/01/2023 Filing Status: Active

#### APPLICATION SECTIONS

#### **General Information**

**Applicant Information** 

**Contact Representatives** 

Station Status

Certification

Attachments

### **General Information**

Section	Question	Response
Attachments	Are attachments (other than associated schedules) being filed with this application?	Yes

### **Applicant Information**

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### Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
NEW HAMPSHIRE FAMILY RADIO, LLC Doing Business As: NEW HAMPSHIRE FAMILY RADIO, LLC	P.O. BOX 2108 CONCORD, NH 03302 United States	+1 (603) 225-5521	cmartinez@nhtalkradio.com	Limited Liability Company

# **Contact Representatives (2)**

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Contact Name	Address	Phone	Email	Contact Type
PAUL FELDMAN	1300 NORTH 17TH	+1 (703)	FELDMAN@FHHLAW.COM	Legal
FLETCHER, HEALD &	STREET	812-0400		Representative
HILDRETH, PLC	11TH FLOOR			
	ARLINGTON, VA			
	22209			
	United States			
PETER STOHRER	P.O. BOX 40	+1 (603)	PSTOHRER@COMCAST.NET	Technical
PRESIDENT	CONCORD, NH	345-1470		Representative
NEW HAMPSHIRE	03362			
FAMILY RADIO	United States			

## Station Status

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Question	Response	
Date Station Went Silent	01/07/2023	

**Certification**Back to Top ↑

Section	Question	Response
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 authorization or otherwise, and requests an Authorization in accordance with this application (See Section 304 of the Communications Act of 1934, as amended.).	
	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 . See §1.2002(b) of the rules, 47 CFR §1.2002(b), for the definition of "party to the application" as used in this certification \$1.2002(c). 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 this application, and are true, complete, correct, and made in good faith.	
Authorized Party to Sign	FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID  Upon grant of this application, the Authorization Holder may be subject to certain construction or coverage requirements. Failure to meet the construction or coverage requirements will result in automatic cancellation of the Authorization. Consult appropriate FCC regulations to determine the construction or coverage requirements that apply to the type of Authorization 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 AUTHORIZATION (U.S. Code, Title 47, \$312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, \$503).	
	I certify that this application includes all required and relevant attachments.	Yes
	I declare, under penalty of perjury, that I am an authorized representative of the above-named applicant for the Authorization(s) specified above.	Gordon J Humphrey Sole Member 01/23/2023

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File Name	Uploaded By	Attachment Type	Description
W280EC Silent STA Exhibit - Final.PDF	Applicant	All Purpose	

Submit a help request for assistance or contact (877) 480-3201 or TTY: (717) 338-2824 | Pay Fees

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