

READ INSTRUCTIONS CAREFULLY
BEFORE PROCEEDING

FEDERAL COMMUNICATIONS COMMISSION
REMITTANCE ADVICE

Approved by OMB
3060-0589
Page 1 of 1

(1) LOCK BOX # 358165		SPECIAL USE ONLY	
		FCC USE ONLY	
SECTION A - PAYER INFORMATION			
(2) PAYER NAME (if paying by credit card enter name exactly as it appears on the card) New DMIC, Inc.		(3) TOTAL AMOUNT PAID (U.S. Dollars and cents) \$270.00	
(4) STREET ADDRESS LINE NO. 1 5151 Wisconsin Ave., NW			
(5) STREET ADDRESS LINE NO. 2			
(6) CITY Washington		(7) STATE DC	(8) ZIP CODE 20016
(9) DAYTIME TELEPHONE NUMBER (include area code) 202-8953088		(10) COUNTRY CODE (if not in U.S.A.) US	
FCC REGISTRATION NUMBER (FRN) REQUIRED			
(11) PAYER (FRN) 0001659374		(12) FCC USE ONLY	
IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C) COMPLETE SECTION BELOW FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET			
(13) APPLICANT NAME NEW DMIC, INC.			
(14) STREET ADDRESS LINE NO. 1 5151 WISCONSIN AVE., NW			
(15) STREET ADDRESS LINE NO. 2 C/O MOLLY PAUKER			
(16) CITY WASHINGTON		(17) STATE DC	(18) ZIP CODE 20016 -
(19) DAYTIME TELEPHONE NUMBER (include area code) 2028953088		(20) COUNTRY CODE (if not in U.S.A.) USA	
FCC REGISTRATION NUMBER (FRN) REQUIRED			
(21) APPLICANT (FRN) 0001659374		(22) FCC USE ONLY	
COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET			
(23A) CALL SIGN/OTHER ID KDFI-DT	(24A) PAYMENT TYPE CODE MJT	(25A) QUANTITY 1	
(26A) FEE DUE FOR (PTC) \$270.00	(27A) TOTAL FEE \$270.00	FCC USE ONLY	
(28A) FCC CODE 1 17037		(29A) FCC CODE 2 CDBS20070213ABD	
(23B) CALL SIGN/OTHER ID	(24B) PAYMENT TYPE CODE	(25B) QUANTITY	
(26B) FEE DUE FOR (PTC)	(27B) TOTAL FEE	FCC USE ONLY	
(28B) FCC CODE 1		(29B) FCC CODE 2	
SECTION D - CERTIFICATION			
CERTIFICATION STATEMENT I, <u>Molly Pauker</u> , certify under penalty of perjury that the foregoing and supporting information is true and correct to the best of my knowledge, information and belief.			
SIGNATURE <u>Molly Pauker</u>		DATE <u>2/13/2007</u>	
SECTION E - CREDIT CARD PAYMENT INFORMATION			
MASTERCARD _____ VISA _____ AMEX _____ DISCOVER _____			
ACCOUNT NUMBER _____		EXPIRATION DATE _____	
I hereby authorize the FCC to charge my credit card for the service(s)/authorization herein described.			
SIGNATURE _____		DATE _____	

Federal Communications Commission Washington, D.C. 20554	Approved by OMB 3060-0837 (June 2002)	FOR FCC USE ONLY
FCC 302-DTV		FOR COMMISSION USE ONLY FILE NO. - 20070213ABD
APPLICATION FOR DIGITAL TELEVISION BROADCAST STATION LICENSE		
Read INSTRUCTIONS Before Filling Out Form		

Section I - General Information

1.	Legal Name of the Applicant NEW DMIC, INC.		
	Mailing Address 5151 WISCONSIN AVE., NW C/O MOLLY PAUKER		
	City WASHINGTON	State or Country (if foreign address) DC	ZIP Code 20016 -
	Telephone Number (include area code) 2028953088		E-Mail Address (if available) MOLLYP@FOXTV.COM
	FCC Registration Number: 0001659374	Call Sign KDFI-DT	Facility Identifier 17037
2.	Contact Representative (if other than Applicant) JOHN C. QUALE, ESQ.		Firm or Company Name SKADDEN, ARPS, SLATE, MEAGHER & FLOM LLP
	Telephone Number (include area code) 2023717200		E-Mail Address (if available) JQUALE@SKADDEN.COM
3.	If this application has been submitted without a fee, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114): <input type="radio"/> Governmental Entity <input type="radio"/> Noncommercial Educational Licensee/Permittee <input type="radio"/> Other <input type="radio"/> N/A (Fee Required)		
4.	Facility Information:		
	a. <input checked="" type="radio"/> Commercial <input type="radio"/> Noncommercial		
	b. <input checked="" type="radio"/> Main <input type="radio"/> Auxiliary		
	c. Community of License:		
	City: DALLAS		State: TX
5.	Program Test Authority:		
	<input type="radio"/> Requesting program test authority.		
	<input checked="" type="radio"/> Station operating pursuant to automatic program test authority (47 C.F.R. Section 73.1620(a)(1)).		
6.	Purpose of Application:		
	<input checked="" type="radio"/> Cover construction permit (list original construction permit file number -- starts with the prefix BPCDT, BPEDT, BMPCDT or BPMEDT):		BMPCDT- 20061114AAX
	<input type="radio"/> Modify an authorized license (list license file number -- starts with the prefix BLCDT, BMLCDT or BMLEDT):		-
	<input type="radio"/> Amend a pending application If an amendment, submit as an Exhibit a listing by Section and Question Number the portions of the pending application that are being revised.		[Exhibit 1]

NOTE: In addition to the information called for in this section, an explanatory exhibit providing full particulars must be submitted for each question for which a "No" response is provided.

Section II - Legal

1.	Certification. Licensee/Permittee certifies that it has answered each question in this application based on its review of the application instructions and worksheets. Licensee/Permittee further certifies that where it has made an affirmative certification below, this certification constitutes its representation that the application satisfies each of the pertinent standards and criteria set forth in the application instructions and worksheets.	<input checked="" type="radio"/> Yes <input type="radio"/> No
2.	Licensee/Permittee certifies that all terms, conditions, and obligations set forth in the underlying construction permit have been fully met.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 2]
3.	Licensee/Permittee certifies that, apart from changes already reported, no cause or circumstance has arisen since the grant of the underlying construction permit which would result in any statement or representation contained in the construction permit application to be now incorrect.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 3]
4.	Character Issues. Licensee/Permittee certifies that neither licensee/permittee nor any party to the application has or has had any interest in, or connection with: a. any broadcast application in any proceeding where character issues were left unresolved or were resolved adversely against the applicant or party to the application; or b. any pending broadcast application in which character issues have been raised.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 4]
5.	Adverse Findings. Licensee/Permittee certifies that, with respect to the licensee/permittee and any party to the application, no adverse finding has been made, nor has an adverse final action been taken by any court or administrative body in a civil or criminal proceeding brought under the provisions of any law related to the following: any felony; mass media-related antitrust or unfair competition; fraudulent statements to another governmental unit; or discrimination.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 5]
6.	Anti-Drug Abuse Act Certification. Licensee/Permittee certifies that neither licensee/permittee nor any party to the application is subject to denial of federal benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. Section 862.	<input checked="" type="radio"/> Yes <input type="radio"/> No
I certify that the statements in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge that all certifications and attached Exhibits are considered material representations. I hereby waive any claim to the use of any particular frequency as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and request an authorization in accordance with this application. (See Section 304 of the Communications Act of 1934, as amended.)		
Typed or Printed Name of Person Signing MOLLY PAUKER		Typed or Printed Title of Person Signing VICE PRESIDENT
Signature		Date 2/13/2007

Section III - Engineering

TECHNICAL SPECIFICATIONS

Ensure that the specifications below are accurate. Contradicting data found elsewhere in this application will be disregarded. All items must be completed. The response "on file" is not acceptable.

TECH BOX

1.	Channel: 36	
2.	Operating Constants	
	Transmitter power output (average power at input to transmission line, after any filter attached to the transmitter,	Transmission line power loss

if used)		
14.56 dBk	28.58 kW	1.46 dB
Antenna Input power	Maximum antenna power gain	Maximum effective radiated power
13.1 dBk	16.9 dB	30 dBk 1000 kW

3. Antenna Data

Manufacturer A-D	Model H90 BROADBAND PANEL 12X12X12X2
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NOTE: In addition to the information called for in this section, an explanatory exhibit providing full particulars must be submitted for each question for which a "No" response is provided.

CERTIFICATION

4. Main Studio Location. The main studio location complies with 47 C.F.R. Section 73.1125.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 6]
5. Constructed Facility The facility was constructed as authorized in the underlying construction permit or complies with 47 C.F.R. Section 73.1690.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 7]
6. Special Operating Conditions. The facility was constructed in compliance with all special operating conditions, terms, and obligations described in the construction permit. An exhibit may be required. Review the underlying construction permit	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 8]
7. Transmitter. The transmitter complies with 47 C.F.R. Section 73.1660.	<input checked="" type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 9]

APPLICATION FILED PURSUANT TO 47 C.F.R. SECTIONS 73.1675(c) OR 73.1690(c).

Only applicants filing this application pursuant to 47 C.F.R. Sections 73.1675(c) or 73.1690(c) must complete the following section.

8. Changing transmitter power output. Is this application being filed to authorize a change in transmitter power output caused by the replacement of an omnidirectional antenna with another omnidirectional antenna or an alteration of the transmission line system? See 47 C.F.R. Sections 73.1690(c)(1) and (c)(10).	<input type="radio"/> Yes <input type="radio"/> No
9. Replacing a directional antenna. Is this application being filed pursuant to 47 C.F.R. Section 73.1690(c)(3) to replace a directional antenna with another directional antenna? If "Yes" to the above, the applicant certifies the following:	<input type="radio"/> Yes <input type="radio"/> No
a. Pattern of Directional Antenna. The proposed theoretical antenna pattern complies with 47 C.F.R. Section 73.1690(c)(3). Exhibit is required.	<input type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 10]
10. Use a formerly licensed main facility as an auxiliary facility. Is this application being filed pursuant to 47 C.F.R. Section 73.1675(c)(1) to request authorization to use a formerly	<input type="radio"/> Yes <input type="radio"/> No

licensed main facility as an auxiliary facility and/or change the ERP of the proposed auxiliary facility?		
If "Yes" to the above, the applicant certifies the following:		
a. Auxiliary antenna service area. The proposed auxiliary facility complies with 47 C.F.R. Section 73.1675(a). Exhibit is required.		<input type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 11]
b. Environmental Protection Act. The proposed facility is excluded from environmental processing under 47 C.F.R. Section 1.1 306 (i.e., the facility will not have a significant environmental impact and complies with the maximum permissible radiofrequency electromagnetic exposure limits for controlled and uncontrolled environments). By checking "Yes" above, the applicant also certifies that it, in coordination with other users of the site, will reduce power or cease operation as necessary to protect persons having access to the site, tower or antenna from radiofrequency electromagnetic exposure in excess of FCC guidelines.		<input type="radio"/> Yes <input type="radio"/> No See Explanation in [Exhibit 12]
11. Change the license status. Is this application being filed pursuant to 47 C.F.R. Section 73.1690(c)(9) to change the license status from commercial to noncommercial or from noncommercial to commercial? If "Yes" to above, submit an exhibit providing full particulars. For applications changing license status from commercial to noncommercial, include Section II of FCC Form 340 as an exhibit to this application.		<input type="radio"/> Yes <input type="radio"/> No [Exhibit 13]

PREPARER'S CERTIFICATION ON PAGE 6 MUST BE COMPLETED AND SIGNED

SECTION III - PREPARER'S CERTIFICATION

I certify that I have prepared Section III (Engineering data) on behalf of the applicant, and that after such preparation, I have examined and found it to be accurate and true to the best of my knowledge and belief.

Name MARK LE VALLEY		Relationship to Applicant (e.g., Consulting Engineer) VP ENGINEERING	
Signature		Date 2/13/2007	
Mailing Address KDFI 400 N. GRIFFIN ST.			
City DALLAS	State or Country (if foreign address) TX	Zip Code 75202 -	
Telephone Number (include area code) 2147204444		E-Mail Address (if available)	

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

Exhibits