



United States of America  
**FEDERAL COMMUNICATIONS COMMISSION**  
**FM BROADCAST STATION LICENSE**

Authorizing Official:

Official Mailing Address:

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URBAN RADIO LICENSES, LLC  
134 SOUTH DIXIE HIGHWAY, SUITE  
206  
HALLANDALE BEACH FL 33009

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Rodolfo F. Bonacci  
Assistant Chief  
Audio Division  
Media Bureau

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Facility Id: 55183

Call Sign: WJZE

License File Number: BLH-20061207AAU

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Grant Date: January 17, 2007

This license expires 3:00 a.m.  
local time, October 01, 2012.

Subject to the provisions of the Communications Act of 1934, subsequent acts and treaties, and all regulations heretofore or hereafter made by this Commission, and further subject to the conditions set forth in this license, the licensee is hereby authorized to use and operate the radio transmitting apparatus herein described.

This license is issued on the licensee's representation that the statements contained in licensee's application are true and that the undertakings therein contained so far as they are consistent herewith, will be carried out in good faith. The licensee shall, during the term of this license, render such broadcasting service as will serve the public interest, convenience, or necessity to the full extent of the privileges herein conferred.

This license shall not vest in the licensee any right to operate the station nor any right in the use of the frequency designated in the license beyond the term hereof, nor in any other manner than authorized herein. Neither the license nor the right granted hereunder shall be assigned or otherwise transferred in violation of the Communications Act of 1934. This license is subject to the right of use or control by the Government of the United States conferred by Section 606 of the Communications Act of 1934.

Callsign: WJZE

License No.: BLH-20061207AAU

Name of Licensee: URBAN RADIO LICENSES, LLC

Station Location: OH-OAK HARBOR

Frequency (MHz): 97.3

Channel: 247

Class: A

Hours of Operation: Unlimited

Transmitter: Type Accepted. See Sections 73.1660, 73.1665 and 73.1670 of the Commission's Rules.

Transmitter output power: 4.5 kW

Antenna type: Directional

Description: ERI LP-2E-DA-HW, two sections, 0.5 wavelength spacing

Antenna Coordinates: North Latitude: 41 deg 28 min 19 sec  
West Longitude: 83 deg 25 min 05 sec

|  | Horizontally Polarized Antenna | Vertically Polarized Antenna |
|--|--------------------------------|------------------------------|
| Effective radiated power in the Horizontal Plane (kW):     | 4.3                            | 4.3                          |
| Height of radiation center above ground (Meters):          | 115                            | 115                          |
| Height of radiation center above mean sea level (Meters):  | 307                            | 307                          |
| Height of radiation center above average terrain (Meters): | 118                            | 118                          |

Antenna structure registration number: 1015474

Overall height of antenna structure above ground (including obstruction lighting if any) see the registration for this antenna structure.

Special operating conditions or restrictions:

- The relative field strength of neither the measured horizontally nor vertically polarized radiation component shall exceed at any azimuth the value indicated on the composite radiation pattern authorized by this construction permit.

A relative field strength of 1.0 on the composite radiation pattern herein authorized corresponds to the following effective radiated power:

4.3 kilowatts.

Principal minima and their associated field strength limits:

250 - 260 degrees True: 0.410 kilowatt

Special operating conditions or restrictions:

- 2 The permittee/licensee in coordination with other users of the site must reduce power or cease operation as necessary to protect persons having access to the site, tower or antenna from radiofrequency electromagnetic fields in excess of FCC guidelines.
  
- 3 \*\*\*\*\* This is a Section 73.215 contour protection grant \*\*\*\*\*  
\*\*\*\*\* as requested by this applicant \*\*\*\*\*

\*\*\* END OF AUTHORIZATION \*\*\*