

City of Beaumont



Application for Region 51 Radio Spectrum

Kirby Richard
Internal Services Director

Mr. Doug Frankhouser, Chairman
NPSPAC Region 51

Dear Chairman Frankhouser:

The City of Beaumont respectfully requests the modification of its existing licensed frequency call sign WPMJ575 for implementation of a countywide trunked radio system. This frequency modification is required to provide the coverage and loading for the expected number of users in this regional radio system.

Jefferson County, City of Beaumont and Mid/South County agencies, through the execution of an inter-local agreement, will become participating members of the Jefferson County Regional Radio System.

The appropriate APCO and FCC forms have been completed and are attached.

The equipment for the system has been purchased and is in the process of being installed. Implementation will be complete within six (6) months after the FCC has authorized the requested frequencies.

Sincerely,

Bart Bartkowiak
Chief Technology Officer
City of Beaumont

Region 51 Application for Radio Spectrum From City of Beaumont

SYSTEM DESIGN

City of Beaumont is applying for a license modification to the current 821 MHz frequencies licensed on call sign WPMJ575. Some of the currently licensed frequencies need to be redistributed throughout the county to help in the implementation of the countywide trunking system.

FUNDING STATEMENT

This project has been purchased and implementation is currently in progress.

IMPLEMENTATION SCHEDULE

City of Beaumont intends to have these additional sites and repeaters fully implemented within six (6) months of receiving the license.

EXISTING FREQUENCY STATEMENT

The frequencies are filed with the FCC under file number 9805A019387 with call sign WPMJ575.

THE FOLLOWING ITEMS WILL BE INCLUDED:

1. Name of Applicant: Beaumont, City of
2. Name of Preparer: Bart Bartkowiak
3. Title: Chief Technology Officer
4. Mailing Address: 602 Marina Dr.
Beaumont, TX 77704
5. Telephone Number: (409) 880-3793
6. Residential Population: 113,000
7. Business/Tourist Population:
8. Square Mile Area: 84 (City of Beaumont)

9. Unique Geographic Considerations:
The countywide radio system's elevation at its southern end is at or near sea level. Areas at the northern end are heavily wooded.
10. Unique Demographic Considerations:
Southern Region is home to a large number of petrochemical industrial facilities.
11. List all Department/Divisions within above Applicant which have separate Communications Systems:

None

**DEPARTMENT/DIVISION FREQUENCY USE
SECTION B**

PRODUCE ONE SECTION B FOR EACH EXISTING CHANNEL:

1. Name of Applicant: Beaumont, City of
2. Name of Department/Division: City of Beaumont Police Department
3. Number of personnel in this Department/division which regularly use radios (excluding dispatchers):

500
4. Carrier Frequency: 851/806.9000
851/806.9875
852/807.2625
852/807.7000
853/808.2875
853/808.5500
853/808.7125
853/808.8125
854/809.3625
858/813.7375
859/814.7375

If Mobile Relay or Duplex Channel, Indicate paired frequency:

Is this part of a trunked system? Yes

Is this part of a mutual aid system? Yes

5. FCC assigned call sign(s): WPMJ575
6. FCC Part 90 Service Category: (Local Government Radio Service, Police Radio Service, Fire Radio Service, Highway Maintenance Radio Service, Forestry-Conservation Radio Service, Special Emergency Radio Service, Other)

Police Radio Service

7. Station Classification from License (include all that apply):(Voice, Data/Telemetry, Base Station [FB], Mobile Relay [Repeater] [FB2], Mobile [MO], Control Station [FX1], other-indicate specifics)

FB2, FX1, MO

8. Number of Mobiles in service and in operation at this time on this frequency (not including "Convertacom" units):

400

Are these same units listed on another frequency? NO

9. Number of Portables (handhelds) in service and in operation at this time on this frequency not including spare units:

420

How many of these are used with a convertacom? None

How many of these same units are listed on other frequencies? List quantity and frequencies: None

10. How many individual radio transmissions occur during an average 24 hour period? (Indicate estimated or measured):

14,000 Est.

11. How many of these transmissions occur per hour during peak periods?(Indicate estimated or measured):

900 Est.

- 12: If this is a Voice Channel, what is the typical air time per individual transmission?: (Less than five seconds, More than five but less than ten seconds, More than ten seconds)

4 Seconds

**ADDITIONAL INFORMATION
SECTION C**

PRODUCE ONE SECTION C FOR EACH DEPARTMENT/DIVISION:

1. Name of Applicant: Beaumont, City of
2. Name of Department/Division: City of Beaumont Police Department
3. How many channels are being requested for this division? None
4. State the intended use of the requested frequencies and the proposed system structure and spectrum considerations (interoperability):

The City of Beaumont is not requesting any new frequencies

5. What frequency band is desired for the new frequency?

N/A

6. Explain requirements for the selected band and reason why others spectrum will not suffice:

The City of Beaumont is requesting a license modification to the existing 821 MHz license in order to participate in a countywide radio system. This will provide the City with greater interoperability.

SHORT FORM
PUBLIC SAFETY PLANNING COMMITTEE FREQUENCY ASSIGNMENT REQUEST
For the 821/866-869 Mhz band
For inclusion as part of the
REGION 51 Public Safety Communications initial Frequency
Assignment

Name of applicant: Beaumont, City of
Mailing Address: 602 Marina Dr.
City, State, Zip: Beaumont TX 77704

Authorized Signature _____

Kirby Richard
Internal Services Director

Is this a request for a new station?

No

If for a new station, will it be trunked or conventional?

Is this a request for expansion of an existing system?

Yes, The City of Beaumont's existing trunked system is being migrated and incorporated into the new countywide trunking system

If for expansion of an existing 800 Mhz station, how many RF channels are there in the existing system?

10

How many RF channels are you requesting from the new 821/866 Mhz band?

None. The City of Beaumont is requesting modifications to the existing license only.

Please list your existing frequencies and briefly describe their use.

Existing Frequencies	851/806.9000
	851/806.9875
	852/807.2625
	852/807.7000
	853/808.2875
	853/808.5500
	853/808.7125

853/808.8125
854/809.3625
858/813.7375
859/814.7375

This frequency is currently being used by a City wide system for the City of Beaumont

Will the use of the requested frequencies replace use of existing frequencies currently licensed?

No.

If use of the requested frequencies will replace the use of existing frequencies currently licensed, you may be required to “give back” some current frequencies. Please list the frequencies you would consider as “give back” after your new channels are in operation.

N/A

Please give a month and year estimate for when you would expect the channels to become operational?

February 2010

Please describe any actions that your entity has taken to fund the purchase of equipment for the requested channels. If no action has occurred, please indicate that no action has been accomplished and indicate how you expect your entity to fund the purchase of new equipment and what date you expect it to occur.

Jefferson County’s countywide trunked system has been purchased and implementation is in progress.

Please give the proposed latitude and longitude where the requested frequency transmitters will be located

			Crown	Hwy 73
Latitude			30:03:31.7 N	29:49:37 N
Longitude			94:15:40.0 W	94:13:45 W

Keeping in mind the jurisdictional boundary restrictions, please give the approximate radius, in miles, that you expect to cover from the proposed transmitter site.

		Crown	Hwy 73
		15	13

Please give the ground elevation at the site where the transmitting antenna will be located.

		Crown	Hwy 73
		9.4	1.4

Please give the average ground elevation for the radius that you expect to cover.

		Crown	Hwy 73
		9.4	1.4

Please give the height the transmitting antenna will be mounted above average elevation

		Crown	Hwy 73
		300	300



APCO International

AFC

FDR-3 Form

Page ___

of ___ Automated Frequency Coordination

only) 351 N. Williamson Blvd. Daytona Beach, FL 32114-1112

Beaumont (386) 322-2500

APCO ID# (APCO use

OFFICIAL NAME OF APPLICANT City of

CONTACT NAME E-MAIL Bart

Bartkowiak BBartkowiak@ci.beaumont.tx.us

- VHF LOW BAND (30-50 MHz)
VHF HIGH BAND (150-174 MHz)
UHF BAND HIGH POWER (450-470 MHz)
UHF BAND LOW POWER (450-470 MHz)
UHF TV BAND (470-512 MHz)
NPSPAC (821-824/866-869 MHz)
800 MHz (806-823/851-868 MHz)
X TRUNKED
CONVENTIONAL
SLOW GROWTH

11 NO. OF FREQUENCIES REQUESTED

METHOD OF PAYMENT

*CHECK NO: PURCHASE ORDER/VOUCHER NO:

*CREDIT CARD PAYMENT: CREDIT CARD NO:

EXP. DATE: AMOUNT AUTHORIZED

\$

RECEIPT ADDRESS:

Name Attn.:

Street City State Zip Code

*BILLING AUTHORIZATION (SIGNATURE AND BILLING ADDRESS REQUIRED):

By signing below, authorization would be given for APCO to bill for the necessary APCO coordination fees according to the most current APCO fee schedule. It would be the responsibility of the signor to make payment when due.

DATE

Bart Bartkowiak

AUTHORIZED NAME (please print)

AUTHORIZED SIGNATURE

BILLING ADDRESS:

Name City of Beaumont Attn: Bart Bartkowiak
Street 602 Marina Dr. City Beaumont State TX Zip Code 77704

COMPLY FULLY WITH ALL INSTRUCTIONS ON REVERSE SIDE

Table with 5 columns: APCO FEE (APCO use only), L O C, A N T, A D D, M O D E L, TRANSMIT FREQUENCY, RECEIVE FREQUENCY, ANT. DOWN TILT, SQUELCH TONES

	#	#						
	1	1	X			854.36250	809.36250	
	1	1	X			859.73750	814.73750	
	1	1	X			858.73750	813.73750	
	2	1	X			809.36250	854.36250	
	2	1	X			814.73750	859.73750	
	2	1	X			813.73750	858.73750	
	4	1	X			854.36250	809.36250	
	4	1	X			859.73750	814.73750	
	4	1	X			858.73750	813.73750	
	5	1	X			854.36250	809.36250	
	5	1	X			853.81250	808.81250	
	5	1	X			852.26250	807.26250	
	5	1	X			852.70000	807.70000	
	5	1	X			853.28750	808.28750	
	5	1	X			853.55000	808.55000	
	5	1	X			853.71250	808.71250	
	5	1	X			851.90000	806.90000	
	5	1	X			859.73750	814.73750	
	5	1	X			851.98750	806.98750	
	5	1	X			858.73750	813.73750	
	6	1	X			854.36250	809.36250	
	6	1	X			853.81250	808.81250	
	6	1	X			852.26250	807.26250	
	6	1	X			852.70000	807.70000	
	6	1	X			853.28750	808.28750	
	6	1	X			853.55000	808.55000	
	6	1	X			853.71250	808.71250	
	6	1	X			851.90000	806.90000	
	6	1	X			859.73750	814.73750	
	6	1	X			851.98750	806.98750	
	6	1	X			858.73750	813.73750	
	7	1	X			809.36250	854.36250	
	7	1	X			808.81250	853.81250	
	7	1	X			807.26250	852.26250	
	7	1	X			807.70000	852.70000	
	7	1	X			808.28750	853.28750	
	7	1	X			808.55000	853.55000	
	7	1	X			808.71250	853.71250	
	7	1	X			806.90000	851.90000	
	7	1	X			814.73750	859.73750	
	7	1	X			806.98750	851.98750	
	7	1	X			813.73750	858.73750	

Land Mobile Radio Spectrum is a limited natural resource which is already overly congested. This means it must be recognized as a shared resource. No one has ever had a sole-ownership claim to any part of it. It is important that all users recognize this. Frequency coordination, therefore, is a process of recommending frequency(ies) which will limit, to the maximum extent possible, harmful interference to new or existing systems while at the same time providing useable channels for all eligible licensees. Authority for this process is outlined in Section 90.175 of the FCC Rules and Regulations.

Master I.D. No.: Will be entered by APCO AFC Office.

PAGE ____ OF ____: Use for multiple page applications, e.g., PAGE 1 OF 3.

OFFICIAL NAME OF APPLICANT: Enter name of applicant the same as shown on FCC Form 601, Item 13 on the Main Form, which should be the name of the governmental entity such as “_____, STATE OF”, “_____,COUNTY OF , (STATE)”, “_____, CITY OF, (STATE)”, etc.

CONTACT NAME: Enter the name of the contact person for this application who can answer technical or administrative questions, if necessary.

E-MAIL: Enter the e-mail address for the contact person, if available.

FREQUENCY BAND PREFERRED: Check appropriate block. This is essential if APCO is to choose a frequency.

METHOD OF PAYMENT: A check or purchase order/voucher is acceptable for payment. Make check or money order payable to APCO AFC, Inc. A copy of the purchase order should be included with the application package. APCO also accepts Discover, American Express, Master Card and VISA credit card payments. Complete the information requested, including the receipt address for credit card payments. If preferred, the billing authorization section can be completed which will allow APCO to bill for the necessary APCO coordination fees. A signature and billing address would be required.

IN THE SECTION AT THE BOTTOM OF THE PAGE: Enter the data requested in the same order as listed on the FCC Form 601, Schedule H, Page 3, including mobiles and control stations with antennas under 6 meters. Be sure that site designators (LOC # column) and antenna designators (ANT # column) agree with the 601 Form as well as frequency(ies).

The next three columns are for frequencies and/or sites to be added (ADD), modified (MOD), or deleted (DEL) . Check appropriate block.

TRANSMIT FREQUENCY: Enter the output frequency (if a specific frequency is being requested). If APCO is to find the frequency, leave it blank.

RECEIVE FREQUENCY: Enter the receive frequency associated with the transmit frequency indicated. If APCO is to find this frequency, leave it blank.

ANT. DOWN TILT: Enter (in degrees) the angle of downward tilt of the Main Power Lobe of the antenna below the horizontal plane. If no tilt is involved, enter 0 (zero).

TRANSMIT & RECEIVE SQUELCH TONE: Enter the tone (in Hz) of the transmitter output and receiver input if this is a tone-coded squelch system. For digitally coded systems, enter “D” plus the code designator, e.g., D - 115, etc.

Please use additional forms for more than 10 transmitter lines.

NOTE: While some of the data requested on this form is not required by the FCC, it is in your best interest to provide it for our database in order to better protect your system when APCO coordinates the frequency(ies) in the future for other applicants.

APPLICANT REMARKS: (Enter pertinent information which will enable APCO to understand what you are trying to accomplish by this application.)

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

1) Radio Service Code:	1a) Existing Radio Service Code: YE
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General Information

2) (Select only one) (MD)	
NE - New	RO - Renewal Only
MD - Modification	RM - Renewal/Modification
AM - Amendment	CA - Cancellation of License
AU - Administrative Update	WD - Withdrawal of Application
DU - Duplicate License	NT - Required Notifications
	EX - Requests for Extension of Time
	RL - Registered Location/Link
3a) If this application is for a <u>D</u> evelopmental License, <u>D</u> emonstration License, or a <u>S</u> pecial Temporary Authorization (STA), enter the code and attach the required exhibit as described in the instructions. Otherwise enter ' <u>N</u> ' (Not Applicable).	(N) <u>D</u> <u>M</u> <u>S</u> <u>N/A</u>
3b) If this application is for Special Temporary Authority due to an emergency situation, enter 'Y'; otherwise enter 'N'. Refer to Rule 1.915 for an explanation of situations considered to be an emergency.	(N) <u>Y</u> es <u>No</u>
4) If this application is for an Amendment or Withdrawal, enter the file number of the pending application currently on file with the FCC.	File Number
5) If this application is for a Modification, Renewal Only, Renewal/Modification, Cancellation of License, Duplicate License, or Administrative Update, enter the call sign of the existing FCC license. If this is a request for Registered Location/Link, enter the FCC call sign assigned to the geographic license.	Call Sign WPMJ575
6) If this application is for a New, Amendment, Renewal Only, or Renewal/Modification, enter the requested authorization expiration date (this item is optional).	MM DD ____ / ____
7) Is this application "major" as defined in §1.929 of the Commission's Rules when read in conjunction with the applicable radio service rules found in Parts 22 and 90 of the Commission's Rules? (NOTE: This question only applies to certain site-specific applications. See the instructions for applicability and full text of §1.929).	(Y) <u>Y</u> es <u>No</u>
8) Are attachments (other than associated schedules) being filed with this application?	(N) <u>Y</u> es <u>No</u>

Fees, Waivers, and Exemptions

9) Is the Applicant exempt from FCC application fees?	() <u>Y</u> es <u>No</u>
10) Is the Applicant exempt from FCC regulatory fees?	() <u>Y</u> es <u>No</u>
11a) 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 circumstances.	(N) <u>Y</u> es <u>No</u>
11b) If 11a is 'Y', enter the number of rule sections involved.	Number of Rule Section(s): _____
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?	(N) <u>Y</u> es <u>No</u>

Applicant Information

13) FCC Registration Number (FRN): 0001672070			
14) Applicant/Licensee Legal Entity Type: (Select One) () Individual () Unincorporated Association () Trust (<input checked="" type="checkbox"/>) Government Entity () Corporation () Limited Liability Company () General Partnership () Limited Partnership () Limited Liability Partnership () Consortium () Other: _____			
15) If the Licensee name is being updated, is the update a result from the sale (or transfer of control) of the license(s) to another party and for which proper Commission approval has not been received or proper notification not provided?			(<input type="checkbox"/>) Yes <input checked="" type="checkbox"/> No
16) First Name (if individual):	MI:	Last Name:	Suffix:
17) Legal Entity Name (if other than individual): Beaumont, City of			
18) Attention To: Bart Bartkowiak			
19) P.O. Box:	And/Or	20) Street Address: 602 Marina Dr.	
21) City: Beaumont		22) State: TX	23) Zip Code: 77704
24) Telephone Number: (409) 880-3793		25) FAX: (409) 832-1573	
26) E-Mail Address: BBartkowiak@ci.beaumont.tx.us			

27) Demographics (Optional):

Race: () American Indian or Alaska Native () Asian () Black or African-American () Native Hawaiian or Other Pacific Islander () White	Ethnicity: () Hispanic or Latino () Not Hispanic or Latino	Gender: () Male () Female
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Real Party in Interest

28) Name of Real Party in Interest of Applicant (If different from Applicant):	29) FCC Registration Number (FRN) of Real Party in Interest:
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Contact Information (If different from the Applicant)**() Check here if same as Applicant.**

30) First Name:	MI:	Last Name:	Suffix:
31) Company Name:			
32) Attention To:			
33) P.O. Box:	And /Or	34) Street Address:	
35) City:		36) State:	37) Zip Code:
38) Telephone Number:		39) FAX:	

40) E-Mail Address:

Regulatory Status

41) This filing is for authorization to provide or use the following type(s) of radio service offering (enter all that apply):
() **C**ommon Carrier () **N**on-Common Carrier (**X**) **P**rivate, internal communications () **B**roadcast Services () **B**and **M**anager

Type of Radio Service

42) This filing is for authorization to provide the following type(s) of radio service (choose all that apply):
(**X**) **F**ixed (**X**) **M**obile () **R**adiolocation () **S**atellite (sound) () **B**roadcast
43) Does the Applicant propose to provide service interconnected to the public telephone network? (**N**) **Y**es **N**o

Alien Ownership Questions (If any answer is 'Y', provide an attachment explaining the circumstances)

44) Is the Applicant a foreign government or the representative of any foreign government? (**N**) **Y**es **N**o
45) Is the Applicant an alien or the representative of an alien? (**N**) **Y**es **N**o
46) Is the Applicant a corporation organized under the laws of any foreign government? (**N**) **Y**es **N**o
47) Is the Applicant a corporation of which more than one-fifth of the capital stock is owned of record or voted by aliens or their representatives or by a foreign government or representative thereof or by any corporation organized under the laws of a foreign country? (**N**) **Y**es **N**o
48a) Is the Applicant directly or indirectly controlled by any other corporation of which more than one-fourth of the capital stock is owned of record or voted by aliens, their representatives, or by a foreign government or representative thereof, or by any corporation organized under the laws of a foreign country? (**N**) **Y**es **N**o
48b) If the answer to 48a is 'Y', has the Applicant received a ruling(s) under Section 310(b)(4) of the Communications Act with respect to the same radio service involved in this application? () **Y**es **N**o
If the answer to 48b is 'Y', include in the exhibit required by Item 48a the citation(s) of the applicable declaratory ruling(s) by DA/FCC number of the FCC Record citation, if available, release date, and any other identifying information
If the answer to 48b is 'N', attach to this filing a date-stamped copy of a request for a foreign ownership ruling pursuant to Section 310(b)(4) of the Communications Act. It is not necessary to file a request for a foreign ownership ruling if the Applicant includes in the exhibit required by Item 48a a showing that the requested license(s) is exempt from the provisions of Section 310(b)(4).

Basic Qualification Questions

49) Has the Applicant or any party to this application had any FCC station authorization, license or construction permit revoked or had any application for an initial, modification or renewal of FCC station authorization, license, or construction permit denied by the Commission? (**N**) **Y**es **N**o
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**) **Y**es **N**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**) **Y**es **N**o
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 have a control tower, RCO, or FAA flight service station, that I have notified the owner of the airport and all aviation service organizations located at the airport within ten days prior to application.

Broadband Radio Service and Educational Broadband Service Cable Cross-Ownership

53a) Will the requested facilities be used to provide multichannel video programming service? (**N**) **Y**es **N**o
53b) If the answer to question 53a is 'Y', does the Applicant operate, control or have an attributable interest (as defined in Section 27.1202 of the Commission's Rules) in a cable television system whose franchise area is located within the geographic service area of the requested facilities? () **Y**es **N**o
Note: If the answer to question 53b is 'Y', attach an exhibit explaining how the Applicant complies with Section 27.1202 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'.

Broadband Radio Service and Educational Broadband Service (Part 27)

54) (For EBS only) Does the Applicant comply with the programming requirements contained in Section 27.1203 of the Commission's Rules? () **Y**es **N**o
Note: If the answer to item 54 is 'N', attach an exhibit explaining how the Applicant complies with Section 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 Sections 27.50, 27.55, and 27.1221 of the Commission's Rules? () Yes **No**

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'.

General Certification Statements

- 1) 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.
- 2) 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.
- 3) 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.
- 4) 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 §1.2002(b) of the rules, 47 CFR § 1.2002(b), for the definition of "party to the application" as used in this certification.
- 5) 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 application, or (3) is not required to file ownership data under the Commission's Rules.
- 6) 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 C.F.R. 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 C.F.R. 1.1310 and 2.1093; or, (3) are the subject of one or more Environmental Assessments filed with the Commission.
- 7) 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).
- 8) 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.

Signature

56) Typed or Printed Name of Party Authorized to Sign

First Name: Bart	MI:	Last Name: Bartkowiak	Suffix:
57) Title: Chief Technology Officer			
Signature:			58) Date:

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).

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

Eligibility

1) Rule Section: Part 90	2) Describe Activity: APPLICANT IS A GOVERNMENT AGENCY, RADIO SYSTEM WILL BE USED TO COORDINATE PUBLIC SAFETY AND COMMUNITY ACTIVITIES
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Frequency Coordinator Information (if not self-coordinated)

3) Frequency Coordination Number	4) Name of Frequency Coordinator	5) Telephone Number	6) Coordination Date
7) Has this application been successfully coordinated?			(<input type="checkbox"/>) <u>Yes</u> / <input type="checkbox"/> <u>No</u>

Extended Implementation (Slow Growth)

8) Are you requesting a new or modified extended implementation plan? If 'Yes', attach an exhibit with a justification and a proposed station construction schedule.	(<input type="checkbox"/>) <u>Yes</u> / <input type="checkbox"/> <u>No</u>
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Associated Call Signs (Attach additional sheets if required)

9) WPMJ575				

Broadcast Auxiliary Only

If there is an associated Parent Station, complete Items 10-12.	10) Facility Id of Parent Station:	11) Radio Service of Parent Station:	12) City and State of Parent Station Principal Community:
13) If there is no associated parent station, this Applicant is a: (<input type="checkbox"/>) <input type="checkbox"/> Broadcast Network Entity <input type="checkbox"/> Television <input type="checkbox"/> Cable Operator <input type="checkbox"/> Motion Picture Producer <input type="checkbox"/> Television Producer			14) State of Primary Operation:

Control Point(s) (Other than at the transmitter) (Attach additional sheets if required)

15) Action A/M/D	16) Control Point Number	17) Location Street Address, City or Town, County/Borough/Parish, State	18) Telephone Number

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)	New 854.36250	FB2	1	0	100	500	20K0F9W
A	1	1	Existing (if mod)	New 859.73750	FB2	1	0	100	500	20K0F9W
A	1	1	Existing (if mod)	New 858.73750	FB2	1	0	100	500	20K0F9W
A	2	1	Existing (if mod)	New 809.36250	FX1	60	0	35	44	20K0F9W
A	2	1	Existing (if mod)	New 814.73750	FX1	60	0	35	44	20K0F9W
A	2	1	Existing (if mod)	New 813.73750	FX1	60	0	35	44	20K0F9W
A	4	1	Existing (if mod)	New 854.36250	FB2	1	0	100	500	20K0F9W
A	4	1	Existing (if mod)	New 859.73750	FB2	1	0	100	500	20K0F9W
A	4	1	Existing (if mod)	New 858.73750	FB2	1	0	100	500	20K0F9W
A	5	1	Existing (if mod)	New 854.36250	FB2	1	0	100	500	20K0F9W
A	5	1	Existing (if mod)	New 853.81250	FB2	1	0	100	500	20K0F9W
A	5	1	Existing (if mod)	New 852.26250	FB2	1	0	100	500	20K0F9W
A	5	1	Existing (if mod)	New 852.70000	FB2	1	0	100	500	20K0F9W
A	5	1	Existing (if mod)	New 853.28750	FB2	1	0	100	500	20K0F9W
A	5	1	Existing (if mod)	New 853.55000	FB2	1	0	100	500	20K0F9W
A	5	1	Existing (if mod)	New 853.71250	FB2	1	0	100	500	20K0F9W
A	5	1	Existing (if mod)	New 851.90000	FB2	1	0	100	500	20K0F9W
A	5	1	Existing (if mod)	New 859.73750	FB2	1	0	100	500	20K0F9W
A	5	1	Existing (if mod)	New 851.98750	FB2	1	0	100	500	20K0F9W
A	5	1	Existing (if mod)	New 858.73750	FB2	1	0	100	500	20K0F9W
A	6	1	Existing (if mod)	New 854.36250	FB2	1	0	100	500	20K0F9W
A	6	1	Existing (if mod)	New 853.81250	FB2	1	0	100	500	20K0F9W
A	6	1	Existing (if mod)	New 852.26250	FB2	1	0	100	500	20K0F9W

A	6	1	Existing (if mod)	New 852.70000	FB2	1	0	100	500	20K0F9W
A	6	1	Existing (if mod)	New 853.28750	FB2	1	0	100	500	20K0F9W
A	6	1	Existing (if mod)	New 853.55000	FB2	1	0	100	500	20K0F9W
A	6	1	Existing (if mod)	New 853.71250	FB2	1	0	100	500	20K0F9W
A	6	1	Existing (if mod)	New 851.90000	FB2	1	0	100	500	20K0F9W
A	6	1	Existing (if mod)	New 859.73750	FB2	1	0	100	500	20K0F9W
A	6	1	Existing (if mod)	New 851.98750	FB2	1	0	100	500	20K0F9W
A	6	1	Existing (if mod)	New 858.73750	FB2	1	0	100	500	20K0F9W
A	7	1	Existing (if mod)	New 809.36250	MO	1100	0	35	62	20K0F9W
A	7	1	Existing (if mod)	New 808.81250	MO	1100	0	35	62	20K0F9W
A	7	1	Existing (if mod)	New 807.26250	MO	1100	0	35	62	20K0F9W
A	7	1	Existing (if mod)	New 807.70000	MO	1100	0	35	62	20K0F9W
A	7	1	Existing (if mod)	New 808.28750	MO	1100	0	35	62	20K0F9W
A	7	1	Existing (if mod)	New 808.55000	MO	1100	0	35	62	20K0F9W
A	7	1	Existing (if mod)	New 808.71250	MO	1100	0	35	62	20K0F9W
A	7	1	Existing (if mod)	New 806.90000	MO	1100	0	35	62	20K0F9W
A	7	1	Existing (if mod)	New 814.73750	MO	1100	0	35	62	20K0F9W
A	7	1	Existing (if mod)	New 806.98750	MO	1100	0	35	62	20K0F9W
A	7	1	Existing (if mod)	New 813.73750	MO	1100	0	35	62	20K0F9W