

# Appendix D

**FCC 601**  
Main Form

## FCC Application for Wireless Telecommunications Bureau Radio Service Authorization

Approved by OMB  
3060-0798  
See instructions for  
Public burden estimate

1) Radio Service Code: <b>SY</b>	1a) Existing Radio Service Code:
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**General Information**

<b>2)</b>	(Select only one)      ( <b>NE</b> )	<b>NE</b> - New <b>MD</b> - Modification <b>AM</b> - Amendment	<b>RO</b> - Renewal Only <b>RM</b> - Renewal / Modification <b>CA</b> - Cancellation of License	<b>AU</b> - Administrative Update <b>WD</b> - Withdrawal of Application <b>DU</b> - Duplicate License	<b>NT</b> - Required Notifications <b>EX</b> - Requests for Extension of Time <b>RL</b> - Registered Location/Link
<b>3a)</b>	If this request is for a <b>D</b> evelopmental License, <b>D</b> emonstration License, or a <b>S</b> pecial Temporary Authorization (STA), enter the code and attach the required exhibit as described in the instructions. Otherwise enter <b>N</b> (Not Applicable).			( <b>N</b> ) <b>D M S N/A</b>	
<b>3b)</b>	If this request is for a 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.			( <b>N</b> ) <b>Yes No</b>	
<b>4)</b>	If this request is for an Amendment or Withdrawal, enter the file number of the pending application currently on file with the FCC.			File Number	
<b>5)</b>	If this request 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	
<b>6)</b>	If this request is for a New, Amendment, Renewal Only, or Renewal/Modification, enter the requested authorization expiration date (this item is optional).			MM      DD	
<b>7)</b>	Is this application "major" as defined in Section §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 Section			( <b>Y</b> ) <b>Yes No</b>	
<b>8)</b>	Are attachments being filed with this application?			( <b>N</b> ) <b>Yes No</b>	

**Fees, Waivers, and Exemptions**

<b>9)</b>	Is the applicant exempt from FCC application fees?	( <b>Y</b> ) <b>Yes No</b>
<b>10)</b>	Is the applicant exempt from FCC regulatory fees?	( <b>Y</b> ) <b>Yes No</b>
<b>11a)</b>	Does this application include a request for Waiver of the Commission's rule(s)? If "Yes", attach an exhibit providing rule number(s) and explaining circumstances.	( <b>N</b> ) <b>Yes No</b>
<b>11b)</b>	If 11a is "Y", enter the number of rule section(s) being waived.	Number of Rule Section(s):
<b>12)</b>	Are the frequencies or parameters requested in this filing covered by grandfathered privileges, previously approved by waiver, or functionally integrated with an existing station?	( <b>N</b> ) <b>Yes No</b>

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## Applicant Information

13) FCC Registration Number (FRN): <b>0001540038</b>			
14) Applicant/Licensee legal entity type: (Select One) <b>G</b> <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Unincorporated Association <input type="checkbox"/> Trust <input type="checkbox"/> Government Entity <input checked="" type="checkbox"/> Consortium <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Other (Description of Legal Entity)			
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 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): <b>MARIN, COUNTY OF</b>			
18) Attention To: <b>COMM SERVICES</b>			
19) P. O. Box <b>4055</b>	And/Or	20) Street Address:	
21) City: <b>SAN RAFAEL</b>	22) State: <b>CA</b>	23) Zip Code: <b>94913-4055</b>	
24) Telephone Number: <b>(415) 499-7242</b>	25) FAX: <b>(415) 499-3738</b>		
26) E-Mail Address:			

## 27) Demographics (Optional)

<b>Race:</b>		
<input type="checkbox"/> American Indian or Alaska Native	<input type="checkbox"/> Hispanic or Latino	<input type="checkbox"/> Male
<input type="checkbox"/> Asian	<input type="checkbox"/> Not Hispanic or Latino	<input type="checkbox"/> Female
<input type="checkbox"/> Black or African-American		
<input type="checkbox"/> Native Hawaiian or Other Pacific Islander		
<input type="checkbox"/> White		

## 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)

30) First Name: <b>BILL</b>	MI:	Last Name: <b>RUCK</b>	Suffix:
31) Company Name: <b>CSI TELECOMMUNICATIONS, INC. CONSULTING ENGINEERS</b>			
32) Attention To:			
33) P. O. Box:	And/Or	34) Street Address: <b>750 BATTERY STREET, SUITE 350</b>	
35) City: <b>SAN FRANCISCO</b>	36) State: <b>CA</b>	37) Zip Code: <b>94111-1555</b>	
38) Telephone Number: <b>(415) 751-8845</b>	39) FAX: <b>(415) 292-9981</b>		
40) E-Mail Address: <b>bruck@csitele.com</b>			

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## Regulatory Status

41) This filing is for authorization to provide or use the following type(s) of radio service offering (enter all that apply): ( <input type="checkbox"/> ) <u>C</u> ommon Carrier ( <input type="checkbox"/> ) <u>N</u> on-Common Carrier ( <input checked="" type="checkbox"/> ) <u>P</u> rivate, internal communications ( <input type="checkbox"/> ) <u>B</u> roadcast Services ( <input type="checkbox"/> ) <u>B</u> and <u>M</u> anager
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## Type of Radio Service

42) This filing is for authorization to provide the following type(s) of radio service (enter all that apply): ( <input checked="" type="checkbox"/> ) <u>F</u> ixed ( <input type="checkbox"/> ) <u>M</u> obile ( <input type="checkbox"/> ) <u>R</u> adiolocation ( <input type="checkbox"/> ) <u>S</u> atellite (sound) ( <input type="checkbox"/> ) <u>B</u> roadcast Services
43) Interconnected Service? ( <input type="checkbox"/> ) <u>Y</u> es <u>N</u> o

## Alien Ownership Questions

44) Is the applicant a foreign government or the representative of any foreign government?	( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> o
45) Is the applicant an alien or the representative of an alien?	( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> o
46) Is the applicant a corporation organized under the laws of any foreign government?	( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> 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?	( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> 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?	( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> o
48b) If the answer to the above question 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?  If the answer to 48B is 'N', attach to this application a date-stamped copy of a request for a foreign ownership ruling pursuant to Section 310(b)(4) of the Communications Act.	( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> o

## 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, construction permit denied by the Commission?	( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> 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?	( <input type="checkbox"/> ) <u>N</u> <u>Y</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?	( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> o

## Aeronautical Advisory Station (Unicom) Certification

52) ( <input type="checkbox"/> ) 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.
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## Broadband Radio Service and Educational Broadband Service Cable Cross-Ownership

53a) Will the requested facilities be used to provide multichannel video programming service?	( <input type="checkbox"/> ) <u>Y</u> es <u>N</u> o
53b) If the answer to 53a is yes, does 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 with the geographic service area of the requested facilities?	( <input type="checkbox"/> ) <u>Y</u> es <u>N</u> o
<b>Note:</b> 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?	( <input type="checkbox"/> ) <u>Y</u> es <u>N</u> o
<b>Note:</b> 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?	( <input type="checkbox"/> ) <u>Y</u> es <u>N</u> o
<b>Note:</b> 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'.	

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## 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 Section §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 Section §1.2002(c) of the rules, 47 CFR §1.2002(c). See Section §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 radio - frequency 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: <b>SHELLY</b>	MI:	Last Name: <b>NELSON</b>	Suffix:
57) Title: <b>COMM SERVICES MANAGER</b>			
Signature:			Date:
<b>FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID.</b>			
Upon grant of this license application, the license 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 in this application.			
<b>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).</b>			













# Appendix D

**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: <b>90.20a</b>	2) Describe Activity: <b>GOVERNMENT AGENCY PROTECTING LIFE AND PROPERTY</b>
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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?			( <b>N</b> ) <u>Y</u> es / <u>N</u> o

**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.	( <b>N</b> ) <u>Y</u> es / <u>N</u> o
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**ASSOCIATED CALL SIGNS** (Attach additional sheets if required)

9)				

**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"/> Broadcast Network Entity <input type="checkbox"/> Television Cable Operator <input type="checkbox"/> Motion Picture Producer <input checked="" 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
A	1	4 PETER BEHR DRIVE, SAN RAFAEL, MARIN, CA	(415) 499-7241



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## FREQUENCY INFORMATION

28 Action A/M/D	29 Location Number	30 Antenna Number	31 Frequency [MHz]		32 Station Class	33 Num. Units	34 Num. Paging Receivers	35 Output Power [Watts]	36 ERP [Watts]	37 Emission Designators
			Existing if modified	New/Modified						
A	1	1		769.79375	FB	1		63.200	200.000	8K10F1E
A	1	1		769.79375	FB2	1		63.200	200.000	8K10F1E
A	1	1		770.04375	FB	1		63.200	200.000	8K10F1E
A	1	1		770.04375	FB2	1		63.200	200.000	8K10F1E
A	1	1		770.59375	FB	1		63.200	200.000	8K10F1E
A	1	1		770.59375	FB2	1		63.200	200.000	8K10F1E
A	1	1		771.06875	FB	1		63.200	200.000	8K10F1E
A	1	1		771.06875	FB2	1		63.200	200.000	8K10F1E
A	1	1		771.29375	FB	1		63.200	200.000	8K10F1E
A	1	1		771.29375	FB2	1		63.200	200.000	8K10F1E
A	1	1		771.59375	FB	1		63.200	200.000	8K10F1E
A	1	1		771.59375	FB2	1		63.200	200.000	8K10F1E
A	1	1		771.89375	FB	1		63.200	200.000	8K10F1E
A	1	1		771.89375	FB2	1		63.200	200.000	8K10F1E
A	1	1		772.19375	FB	1		63.200	200.000	8K10F1E
A	1	1		772.19375	FB2	1		63.200	200.000	8K10F1E
A	1	1		772.49375	FB	1		63.200	200.000	8K10F1E
A	1	1		772.49375	FB2	1		63.200	200.000	8K10F1E
A	1	1		772.79375	FB	1		63.200	200.000	8K10F1E
A	1	1		772.79375	FB2	1		63.200	200.000	8K10F1E
A	1	1		773.21875	FB	1		63.200	200.000	8K10F1E
A	1	1		773.21875	FB2	1		63.200	200.000	8K10F1E
A	1	1		773.89375	FB	1		63.200	200.000	8K10F1E
A	1	1		773.89375	FB2	1		63.200	200.000	8K10F1E
A	1	1		774.44375	FB	1		63.200	200.000	8K10F1E
A	1	1		774.44375	FB2	1		63.200	200.000	8K10F1E
A	2	1		769.79375	FB	1		7.900	100.000	8K10F1E
A	2	1		769.79375	FB2	1		7.900	100.000	8K10F1E
A	2	1		770.04375	FB	1		7.900	100.000	8K10F1E
A	2	1		770.04375	FB2	1		7.900	100.000	8K10F1E

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A	2	1		770.59375	FB2	1		7.900	100.000	8K10F1E
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A	2	1		771.06875	FB2	1		7.900	100.000	8K10F1E
A	2	1		771.29375	FB	1		7.900	100.000	8K10F1E
A	2	1		771.29375	FB2	1		7.900	100.000	8K10F1E
A	2	1		771.59375	FB	1		7.900	100.000	8K10F1E
A	2	1		771.59375	FB2	1		7.900	100.000	8K10F1E
A	2	1		771.89375	FB	1		7.900	100.000	8K10F1E
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A	2	1		772.49375	FB	1		7.900	100.000	8K10F1E
A	2	1		772.49375	FB2	1		7.900	100.000	8K10F1E
A	2	1		772.79375	FB	1		7.900	100.000	8K10F1E
A	2	1		772.79375	FB2	1		7.900	100.000	8K10F1E
A	2	1		773.21875	FB	1		7.900	100.000	8K10F1E
A	2	1		773.21875	FB2	1		7.900	100.000	8K10F1E
A	2	1		773.89375	FB	1		7.900	100.000	8K10F1E
A	2	1		773.89375	FB2	1		7.900	100.000	8K10F1E
A	2	1		774.44375	FB	1		7.900	100.000	8K10F1E
A	2	1		774.44375	FB2	1		7.900	100.000	8K10F1E
A	3	1		769.79375	FB	1		63.200	200.000	8K10F1E
A	3	1		769.79375	FB2	1		63.200	200.000	8K10F1E
A	3	1		770.04375	FB	1		63.200	200.000	8K10F1E
A	3	1		770.04375	FB2	1		63.200	200.000	8K10F1E
A	3	1		770.59375	FB	1		63.200	200.000	8K10F1E
A	3	1		770.59375	FB2	1		63.200	200.000	8K10F1E
A	3	1		771.06875	FB	1		63.200	200.000	8K10F1E
A	3	1		771.06875	FB2	1		63.200	200.000	8K10F1E

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A	3	1		771.29375	FB2	1		63.200	200.000	8K10F1E
A	3	1		771.59375	FB	1		63.200	200.000	8K10F1E
A	3	1		771.59375	FB2	1		63.200	200.000	8K10F1E
A	3	1		771.89375	FB	1		63.200	200.000	8K10F1E
A	3	1		771.89375	FB2	1		63.200	200.000	8K10F1E
A	3	1		772.19375	FB	1		63.200	200.000	8K10F1E
A	3	1		772.19375	FB2	1		63.200	200.000	8K10F1E
A	3	1		772.49375	FB	1		63.200	200.000	8K10F1E
A	3	1		772.49375	FB2	1		63.200	200.000	8K10F1E
A	3	1		772.79375	FB	1		63.200	200.000	8K10F1E
A	3	1		772.79375	FB2	1		63.200	200.000	8K10F1E
A	3	1		773.21875	FB	1		63.200	200.000	8K10F1E
A	3	1		773.21875	FB2	1		63.200	200.000	8K10F1E
A	3	1		773.89375	FB	1		63.200	200.000	8K10F1E
A	3	1		773.89375	FB2	1		63.200	200.000	8K10F1E
A	3	1		774.44375	FB	1		63.200	200.000	8K10F1E
A	3	1		774.44375	FB2	1		63.200	200.000	8K10F1E
A	4	1		769.79375	FB	1		22.300	50.000	8K10F1E
A	4	1		769.79375	FB2	1		22.300	50.000	8K10F1E
A	4	1		770.04375	FB	1		22.300	50.000	8K10F1E
A	4	1		770.04375	FB2	1		22.300	50.000	8K10F1E
A	4	1		770.59375	FB	1		22.300	50.000	8K10F1E
A	4	1		770.59375	FB2	1		22.300	50.000	8K10F1E
A	4	1		771.06875	FB	1		22.300	50.000	8K10F1E
A	4	1		771.06875	FB2	1		22.300	50.000	8K10F1E
A	4	1		771.29375	FB	1		22.300	50.000	8K10F1E
A	4	1		771.29375	FB2	1		22.300	50.000	8K10F1E
A	4	1		771.59375	FB	1		22.300	50.000	8K10F1E
A	4	1		771.59375	FB2	1		22.300	50.000	8K10F1E

# Appendix D

## FREQUENCY INFORMATION

28 Action A/M/D	29 Location Number	30 Antenna Number	31 Frequency [MHz]		32 Station Class	33 Num. Units	34 Num. Paging Receivers	35 Output Power [Watts]	36 ERP [Watts]	37 Emission Designators
			Existing if modified	New/Modified						
A	4	1		771.89375	FB	1		22.300	50.000	8K10F1E
A	4	1		771.89375	FB2	1		22.300	50.000	8K10F1E
A	4	1		772.19375	FB	1		22.300	50.000	8K10F1E
A	4	1		772.19375	FB2	1		22.300	50.000	8K10F1E
A	4	1		772.49375	FB	1		22.300	50.000	8K10F1E
A	4	1		772.49375	FB2	1		22.300	50.000	8K10F1E
A	4	1		772.79375	FB	1		22.300	50.000	8K10F1E
A	4	1		772.79375	FB2	1		22.300	50.000	8K10F1E
A	4	1		773.21875	FB	1		22.300	50.000	8K10F1E
A	4	1		773.21875	FB2	1		22.300	50.000	8K10F1E
A	4	1		773.89375	FB	1		22.300	50.000	8K10F1E
A	4	1		773.89375	FB2	1		22.300	50.000	8K10F1E
A	4	1		774.44375	FB	1		22.300	50.000	8K10F1E
A	4	1		774.44375	FB2	1		22.300	50.000	8K10F1E
A	5	1		769.79375	FB	1		100.000	100.000	8K10F1E
A	5	1		769.79375	FB2	1		100.000	100.000	8K10F1E
A	5	1		770.04375	FB	1		100.000	100.000	8K10F1E
A	5	1		770.04375	FB2	1		100.000	100.000	8K10F1E
A	5	1		770.59375	FB	1		100.000	100.000	8K10F1E
A	5	1		770.59375	FB2	1		100.000	100.000	8K10F1E
A	5	1		771.06875	FB	1		100.000	100.000	8K10F1E
A	5	1		771.06875	FB2	1		100.000	100.000	8K10F1E
A	5	1		771.29375	FB	1		100.000	100.000	8K10F1E
A	5	1		771.29375	FB2	1		100.000	100.000	8K10F1E
A	5	1		771.59375	FB	1		100.000	100.000	8K10F1E
A	5	1		771.59375	FB2	1		100.000	100.000	8K10F1E
A	5	1		771.89375	FB	1		100.000	100.000	8K10F1E
A	5	1		771.89375	FB2	1		100.000	100.000	8K10F1E
A	5	1		772.19375	FB	1		100.000	100.000	8K10F1E
A	5	1		772.19375	FB2	1		100.000	100.000	8K10F1E

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			Existing if modified	New/Modified						
A	5	1		772.49375	FB	1		100.000	100.000	8K10F1E
A	5	1		772.49375	FB2	1		100.000	100.000	8K10F1E
A	5	1		772.79375	FB	1		100.000	100.000	8K10F1E
A	5	1		772.79375	FB2	1		100.000	100.000	8K10F1E
A	5	1		773.21875	FB	1		100.000	100.000	8K10F1E
A	5	1		773.21875	FB2	1		100.000	100.000	8K10F1E
A	5	1		773.89375	FB	1		100.000	100.000	8K10F1E
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A	5	1		774.44375	FB	1		100.000	100.000	8K10F1E
A	5	1		774.44375	FB2	1		100.000	100.000	8K10F1E
A	6	1		769.79375	FB	1		100.000	100.000	8K10F1E
A	6	1		769.79375	FB2	1		100.000	100.000	8K10F1E
A	6	1		770.04375	FB	1		100.000	100.000	8K10F1E
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A	6	1		772.49375	FB2	1		100.000	100.000	8K10F1E
A	6	1		772.79375	FB	1		100.000	100.000	8K10F1E
A	6	1		772.79375	FB2	1		100.000	100.000	8K10F1E



# Appendix D

**FCC 601**  
Main Form

## FCC Application for Wireless Telecommunications Bureau Radio Service Authorization

Approved by OMB  
3060-0798  
See instructions for  
Public burden estimate

1) Radio Service Code: <b>SY</b>	1a) Existing Radio Service Code:
----------------------------------	----------------------------------

**General Information**

<b>2)</b>	(Select only one)      ( <b>NE</b> )	<b>NE</b> - New <b>MD</b> - Modification <b>AM</b> - Amendment	<b>RO</b> - Renewal Only <b>RM</b> - Renewal / Modification <b>CA</b> - Cancellation of License	<b>AU</b> - Administrative Update <b>WD</b> - Withdrawal of Application <b>DU</b> - Duplicate License	<b>NT</b> - Required Notifications <b>EX</b> - Requests for Extension of Time <b>RL</b> - Registered Location/Link
<b>3a)</b>	If this request is for a <b>D</b> evelopmental License, <b>D</b> emonstration License, or a <b>S</b> pecial Temporary Authorization (STA), enter the code and attach the required exhibit as described in the instructions. Otherwise enter <b>N</b> (Not Applicable).			( <b>N</b> ) <b>D M S N/A</b>	
<b>3b)</b>	If this request is for a 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.			( <b>N</b> ) <b>Yes No</b>	
<b>4)</b>	If this request is for an Amendment or Withdrawal, enter the file number of the pending application currently on file with the FCC.			File Number	
<b>5)</b>	If this request 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	
<b>6)</b>	If this request is for a New, Amendment, Renewal Only, or Renewal/Modification, enter the requested authorization expiration date (this item is optional).			MM      DD	
<b>7)</b>	Is this application "major" as defined in Section §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 Section			( <b>Y</b> ) <b>Yes No</b>	
<b>8)</b>	Are attachments being filed with this application?			( <b>N</b> ) <b>Yes No</b>	

**Fees, Waivers, and Exemptions**

<b>9)</b>	Is the applicant exempt from FCC application fees?	( <b>Y</b> ) <b>Yes No</b>
<b>10)</b>	Is the applicant exempt from FCC regulatory fees?	( <b>Y</b> ) <b>Yes No</b>
<b>11a)</b>	Does this application include a request for Waiver of the Commission's rule(s)? If "Yes", attach an exhibit providing rule number(s) and explaining circumstances.	( <b>N</b> ) <b>Yes No</b>
<b>11b)</b>	If 11a is "Y", enter the number of rule section(s) being waived.	Number of Rule Section(s):
<b>12)</b>	Are the frequencies or parameters requested in this filing covered by grandfathered privileges, previously approved by waiver, or functionally integrated with an existing station?	( <b>N</b> ) <b>Yes No</b>

# Appendix D

## Applicant Information

13) FCC Registration Number (FRN): <b>0001540038</b>			
14) Applicant/Licensee legal entity type: (Select One) <b>G</b> <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Unincorporated Association <input type="checkbox"/> Trust <input type="checkbox"/> Government Entity <input checked="" type="checkbox"/> Consortium <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Other (Description of Legal Entity)			
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 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): <b>MARIN, COUNTY OF</b>			
18) Attention To: <b>COMM SERVICES</b>			
19) P. O. Box <b>4055</b>	And/Or	20) Street Address:	
21) City: <b>SAN RAFAEL</b>	22) State: <b>CA</b>	23) Zip Code: <b>94913-4055</b>	
24) Telephone Number: <b>(415) 499-7242</b>	25) FAX: <b>(415) 499-3738</b>		
26) E-Mail Address:			

## 27) Demographics (Optional)

<b>Race:</b>		
<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African-American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	<input type="checkbox"/> Male <input type="checkbox"/> Female

## 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:
--	--

## Contact Information (if different from the applicant)

30) First Name: <b>BILL</b>	MI:	Last Name: <b>RUCK</b>	Suffix:
31) Company Name: <b>CSI TELECOMMUNICATIONS, INC. CONSULTING ENGINEERS</b>			
32) Attention To:			
33) P. O. Box:	And/Or	34) Street Address: <b>750 BATTERY STREET, SUITE 350</b>	
35) City: <b>SAN FRANCISCO</b>	36) State: <b>CA</b>	37) Zip Code: <b>94111-1555</b>	
38) Telephone Number: <b>(415) 751-8845</b>	39) FAX: <b>(415) 292-9981</b>		
40) E-Mail Address: <b>bruck@csitele.com</b>			

# Appendix D

## Regulatory Status

41) This filing is for authorization to provide or use the following type(s) of radio service offering (enter all that apply): ( <input type="checkbox"/> ) <u>C</u> ommon Carrier ( <input type="checkbox"/> ) <u>N</u> on-Common Carrier ( <input checked="" type="checkbox"/> ) <u>P</u> rivate, internal communications ( <input type="checkbox"/> ) <u>B</u> roadcast Services ( <input type="checkbox"/> ) <u>B</u> and <u>M</u> anager
--

## Type of Radio Service

42) This filing is for authorization to provide the following type(s) of radio service (enter all that apply): ( <input checked="" type="checkbox"/> ) <u>F</u> ixed ( <input type="checkbox"/> ) <u>M</u> obile ( <input type="checkbox"/> ) <u>R</u> adiolocation ( <input type="checkbox"/> ) <u>S</u> atellite (sound) ( <input type="checkbox"/> ) <u>B</u> roadcast Services
43) Interconnected Service? ( <input type="checkbox"/> ) <u>Y</u> es <u>N</u> o

## Alien Ownership Questions

44) Is the applicant a foreign government or the representative of any foreign government? ( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> o
45) Is the applicant an alien or the representative of an alien? ( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> o
46) Is the applicant a corporation organized under the laws of any foreign government? ( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> 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? ( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> 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? ( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> o
48b) If the answer to the above question 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? ( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> o  If the answer to 48B is 'N', attach to this application a date-stamped copy of a request for a foreign ownership ruling pursuant to Section 310(b)(4) of the Communications Act.

## 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, construction permit denied by the Commission? ( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> 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? ( <input type="checkbox"/> ) <u>N</u> <u>Y</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? ( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> o

## Aeronautical Advisory Station (Unicom) Certification

52) ( <input type="checkbox"/> ) 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? ( <input type="checkbox"/> ) <u>Y</u> es <u>N</u> o
53b) If the answer to 53a is yes, does 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 with the geographic service area of the requested facilities? ( <input type="checkbox"/> ) <u>Y</u> es <u>N</u> o
<b>Note:</b> 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? ( <input type="checkbox"/> ) <u>Y</u> es <u>N</u> o
<b>Note:</b> 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? ( <input type="checkbox"/> ) <u>Y</u> es <u>N</u> o
<b>Note:</b> 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'.

# Appendix D

## 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 Section §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 Section §1.2002(c) of the rules, 47 CFR §1.2002(c). See Section §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 radio - frequency 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:	MI:	Last Name:	Suffix:
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57) Title:
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Signature:	Date:
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**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 license 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 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).**





# Appendix D

**FCC 601  
Schedule D**

**Wireless Telecommunications 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: <input type="checkbox"/> (A) <input checked="" type="checkbox"/> Add <input type="checkbox"/> Mod <input type="checkbox"/> Del		2) Location Number: <b>3</b>	
3) Location Description: <b>F</b>		4) Area of Operation Code:	5) Location Name: <b>STEWARTS POINT</b>
6) FCC Antenna Structure Registration # or N/A (FAA Notification not Required)			
7) Latitude (DD - MM - SS.S): <b>37-55-47.3</b>		8) Longitude (DDD - MM - SS.S): <b>122-42-58.0</b>	
NAD83 ( <input type="checkbox"/> N ) N or S		NAD83 ( <input type="checkbox"/> W ) E or W	
9) Street Address, Name of Landing Area, or Other Location Description: <b>615 HORSESHOE HILL ROAD</b>			
10) City: <b>BOLINAS</b>		11) State: <b>CA</b>	12) County/Borough/Parish: <b>MARIN</b>
13) Elevation of Site AMSL (meters) ("a" in antenna structure example):  <b>218.70</b>		14) Overall Ht AGL Without Appurtenances (meters) ("b" in antenna structure example):  <b>35.00</b>	15) Overall Ht AGL With Appurtenances (meters) ("c" in antenna structure example):  <b>35.00</b>
16) Support Structure Type: <b>POLE</b>			
17) Location Number: (only for Area of Operation Code "A")		18) Radius (km):	19) Airport Identifier:
			20) Site Status:
21) Maximum Latitude (DD - MM - SS.S): <b>Use for rectangle only (Northwest corner)</b>		22) Maximum Longitude (DDD - MM - SS.S): <b>Use for rectangle only (Northwest corner)</b>	
NAD83 (    ) N or S		NAD83 (    ) E or W	
23) Do you propose to operate in an area that requires frequency coordination with Canada? <span style="float: right;">(    ) Yes <b>No</b></span>			
24) Description: (only for Area of Operation Code "O")			
25) Number of Units:    _____ Hand Held    _____ Mobile    _____ Temporary Fixed    _____ Aircraft    _____ Itinerant			
26) Would a Commission grant of Authorization for this location be an action which may have a significant environmental effect? See Section 1.1307 of 47 CFR. <span style="float: right;">(N) Yes <b>No</b></span> If "Yes", submit an environmental assessment as required by 47 CFR, Sections 1.1308 and 1.1311.			
27a) If the proposed site is located in one of the Quiet Zones listed in Item 27 of the Instructions, provide the date (mm/dd/yy) the proper Quiet Zone entity was notified:			
27b) Has the applicant obtained prior written consent from the proper Quiet Zone entity for the same technical parameters that are specified in this application? <span style="float: right;">(    ) Yes <b>No</b></span>			
28) Do you propose to operate in an area that requires frequency coordination with Mexico? <span style="float: right;">(N) Yes <b>No</b></span>			







# Appendix D

**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: <b>90.20a</b>	2) Describe Activity: <b>GOVERNMENT AGENCY PROTECTING LIFE AND PROPERTY</b>
--------------------------------	---

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

**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.	( <b>N</b> ) <u>Y</u> es / <u>N</u> o
---	---------------------------------------

**ASSOCIATED CALL SIGNS** (Attach additional sheets if required)

9)				

**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"/> Broadcast Network Entity <input type="checkbox"/> Television Cable Operator <input type="checkbox"/> Motion Picture Producer <input checked="" 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
A	1	4 PETER BEHR DRIVE, SAN RAFAEL, MARIN, CA	(415) 499-7241



# Appendix D

## FREQUENCY INFORMATION

28 Action A/M/D	29 Location Number	30 Antenna Number	31 Frequency [MHz]		32 Station Class	33 Num. Units	34 Num. Paging Receivers	35 Output Power [Watts]	36 ERP [Watts]	37 Emission Designators
			Existing if modified	New/Modified						
A	1	1		769.79375	FB	1		63.200	200.000	8K10F1E
A	1	1		769.79375	FB2	1		63.200	200.000	8K10F1E
A	1	1		770.04375	FB	1		63.200	200.000	8K10F1E
A	1	1		770.04375	FB2	1		63.200	200.000	8K10F1E
A	1	1		770.59375	FB	1		63.200	200.000	8K10F1E
A	1	1		770.59375	FB2	1		63.200	200.000	8K10F1E
A	1	1		771.06875	FB	1		63.200	200.000	8K10F1E
A	1	1		771.06875	FB2	1		63.200	200.000	8K10F1E
A	1	1		771.29375	FB	1		63.200	200.000	8K10F1E
A	1	1		771.29375	FB2	1		63.200	200.000	8K10F1E
A	1	1		771.59375	FB	1		63.200	200.000	8K10F1E
A	1	1		771.59375	FB2	1		63.200	200.000	8K10F1E
A	1	1		771.89375	FB	1		63.200	200.000	8K10F1E
A	1	1		771.89375	FB2	1		63.200	200.000	8K10F1E
A	1	1		772.19375	FB	1		63.200	200.000	8K10F1E
A	1	1		772.19375	FB2	1		63.200	200.000	8K10F1E
A	1	1		772.49375	FB	1		63.200	200.000	8K10F1E
A	1	1		772.49375	FB2	1		63.200	200.000	8K10F1E
A	1	1		772.79375	FB	1		63.200	200.000	8K10F1E
A	1	1		772.79375	FB2	1		63.200	200.000	8K10F1E
A	1	1		773.21875	FB	1		63.200	200.000	8K10F1E
A	1	1		773.21875	FB2	1		63.200	200.000	8K10F1E
A	1	1		773.89375	FB	1		63.200	200.000	8K10F1E
A	1	1		773.89375	FB2	1		63.200	200.000	8K10F1E
A	1	1		774.44375	FB	1		63.200	200.000	8K10F1E
A	1	1		774.44375	FB2	1		63.200	200.000	8K10F1E
A	2	1		770.51875	FB	1		89.300	200.000	8K10F1E
A	2	1		770.51875	FB2	1		89.300	200.000	8K10F1E
A	2	1		771.44375	FB	1		89.300	200.000	8K10F1E
A	2	1		771.44375	FB2	1		89.300	200.000	8K10F1E

# Appendix D

## FREQUENCY INFORMATION

28 Action A/M/D	29 Location Number	30 Antenna Number	31 Frequency [MHz]		32 Station Class	33 Num. Units	34 Num. Paging Receivers	35 Output Power [Watts]	36 ERP [Watts]	37 Emission Designators
			Existing if modified	New/Modified						
A	2	1		772.34375	FB	1		89.300	200.000	8K10F1E
A	2	1		772.34375	FB2	1		89.300	200.000	8K10F1E
A	2	1		773.49375	FB	1		89.300	200.000	8K10F1E
A	2	1		773.49375	FB2	1		89.300	200.000	8K10F1E
A	2	1		774.91875	FB	1		89.300	200.000	8K10F1E
A	2	1		774.91875	FB2	1		89.300	200.000	8K10F1E
A	3	1		770.79375	FB	1		44.700	100.000	8K10F1E
A	3	1		770.79375	FB2	1		44.700	100.000	8K10F1E
A	3	1		771.74375	FB	1		44.700	100.000	8K10F1E
A	3	1		771.74375	FB2	1		44.700	100.000	8K10F1E
A	3	1		772.64375	FB	1		44.700	100.000	8K10F1E
A	3	1		772.64375	FB2	1		44.700	100.000	8K10F1E
A	3	1		774.16875	FB	1		44.700	100.000	8K10F1E
A	3	1		774.16875	FB2	1		44.700	100.000	8K10F1E
A	4	1			FB	1		31.600	100.000	8K10F1E
A	4	1			FB2	1		31.600	100.000	8K10F1E
A	4	1		769.79375	FB	1		31.600	100.000	8K10F1E
A	4	1		769.79375	FB2	1		31.600	100.000	8K10F1E
A	4	1		770.04375	FB	1		31.600	100.000	8K10F1E
A	4	1		770.04375	FB2	1		31.600	100.000	8K10F1E
A	4	1		770.59375	FB	1		31.600	100.000	8K10F1E
A	4	1		770.59375	FB2	1		31.600	100.000	8K10F1E
A	4	1		771.06875	FB	1		31.600	100.000	8K10F1E
A	4	1		771.06875	FB2	1		31.600	100.000	8K10F1E
A	4	1		771.29375	FB	1		31.600	100.000	8K10F1E
A	4	1		771.29375	FB2	1		31.600	100.000	8K10F1E
A	4	1		771.59375	FB	1		31.600	100.000	8K10F1E
A	4	1		771.59375	FB2	1		31.600	100.000	8K10F1E
A	4	1		771.89375	FB	1		31.600	100.000	8K10F1E
A	4	1		771.89375	FB2	1		31.600	100.000	8K10F1E

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			Existing if modified	New/Modified						
A	4	1		772.19375	FB	1		31.600	100.000	8K10F1E
A	4	1		772.19375	FB2	1		31.600	100.000	8K10F1E
A	4	1		772.49375	FB	1		31.600	100.000	8K10F1E
A	4	1		772.49375	FB2	1		31.600	100.000	8K10F1E
A	4	1		772.79375	FB	1		31.600	100.000	8K10F1E
A	4	1		772.79375	FB2	1		31.600	100.000	8K10F1E
A	4	1		773.21875	FB	1		31.600	100.000	8K10F1E
A	4	1		773.21875	FB2	1		31.600	100.000	8K10F1E
A	4	1		773.89375	FB	1		31.600	100.000	8K10F1E
A	4	1		773.89375	FB2	1		31.600	100.000	8K10F1E
A	4	1		774.44375	FB	1		31.600	100.000	8K10F1E
A	4	1		774.44375	FB2	1		31.600	100.000	8K10F1E
A	5	1		769.79375	FB	1		31.600	100.000	8K10F1E
A	5	1		769.79375	FB2	1		31.600	100.000	8K10F1E
A	5	1		770.04375	FB	1		31.600	100.000	8K10F1E
A	5	1		770.04375	FB2	1		31.600	100.000	8K10F1E
A	5	1		770.59375	FB	1		31.600	100.000	8K10F1E
A	5	1		770.59375	FB2	1		31.600	100.000	8K10F1E
A	5	1		771.06875	FB	1		31.600	100.000	8K10F1E
A	5	1		771.06875	FB2	1		31.600	100.000	8K10F1E
A	5	1		771.29375	FB	1		31.600	100.000	8K10F1E
A	5	1		771.29375	FB2	1		31.600	100.000	8K10F1E
A	5	1		771.59375	FB	1		31.600	100.000	8K10F1E
A	5	1		771.59375	FB2	1		31.600	100.000	8K10F1E
A	5	1		771.89375	FB	1		31.600	100.000	8K10F1E
A	5	1		771.89375	FB2	1		31.600	100.000	8K10F1E
A	5	1		772.19375	FB	1		31.600	100.000	8K10F1E
A	5	1		772.19375	FB2	1		31.600	100.000	8K10F1E
A	5	1		772.49375	FB	1		31.600	100.000	8K10F1E
A	5	1		772.49375	FB2	1		31.600	100.000	8K10F1E

# Appendix D

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28 Action A/M/D	29 Location Number	30 Antenna Number	31 Frequency [MHz]		32 Station Class	33 Num. Units	34 Num. Paging Receivers	35 Output Power [Watts]	36 ERP [Watts]	37 Emission Designators
			Existing if modified	New/Modified						
A	5	1		772.79375	FB	1		31.600	100.000	8K10F1E
A	5	1		772.79375	FB2	1		31.600	100.000	8K10F1E
A	5	1		773.21875	FB	1		31.600	100.000	8K10F1E
A	5	1		773.21875	FB2	1		31.600	100.000	8K10F1E
A	5	1		773.89375	FB	1		31.600	100.000	8K10F1E
A	5	1		773.89375	FB2	1		31.600	100.000	8K10F1E
A	5	1		774.44375	FB	1		31.600	100.000	8K10F1E
A	5	1		774.44375	FB2	1		31.600	100.000	8K10F1E
A	6	1		769.79375	FB	1		31.600	100.000	8K10F1E
A	6	1		769.79375	FB2	1		31.600	100.000	8K10F1E
A	6	1		770.04375	FB	1		31.600	100.000	8K10F1E
A	6	1		770.04375	FB2	1		31.600	100.000	8K10F1E
A	6	1		770.59375	FB	1		31.600	100.000	8K10F1E
A	6	1		770.59375	FB2	1		31.600	100.000	8K10F1E
A	6	1		771.06875	FB	1		31.600	100.000	8K10F1E
A	6	1		771.06875	FB2	1		31.600	100.000	8K10F1E
A	6	1		771.29375	FB	1		31.600	100.000	8K10F1E
A	6	1		771.29375	FB2	1		31.600	100.000	8K10F1E
A	6	1		771.59375	FB	1		31.600	100.000	8K10F1E
A	6	1		771.59375	FB2	1		31.600	100.000	8K10F1E
A	6	1		771.89375	FB	1		31.600	100.000	8K10F1E
A	6	1		771.89375	FB2	1		31.600	100.000	8K10F1E
A	6	1		772.19375	FB	1		31.600	100.000	8K10F1E
A	6	1		772.19375	FB2	1		31.600	100.000	8K10F1E
A	6	1		772.49375	FB	1		31.600	100.000	8K10F1E
A	6	1		772.49375	FB2	1		31.600	100.000	8K10F1E
A	6	1		772.79375	FB	1		31.600	100.000	8K10F1E
A	6	1		772.79375	FB2	1		31.600	100.000	8K10F1E
A	6	1		773.21875	FB	1		31.600	100.000	8K10F1E
A	6	1		773.21875	FB2	1		31.600	100.000	8K10F1E



# Appendix D

**FCC 601**  
Main Form

## FCC Application for Wireless Telecommunications Bureau Radio Service Authorization

Approved by OMB  
3060-0798  
See instructions for  
Public burden estimate

1) Radio Service Code: <b>SY</b>	1a) Existing Radio Service Code:
----------------------------------	----------------------------------

**General Information**

<b>2)</b>	(Select only one)      ( <b>NE</b> )	<b>NE</b> - New <b>MD</b> - Modification <b>AM</b> - Amendment	<b>RO</b> - Renewal Only <b>RM</b> - Renewal / Modification <b>CA</b> - Cancellation of License	<b>AU</b> - Administrative Update <b>WD</b> - Withdrawal of Application <b>DU</b> - Duplicate License	<b>NT</b> - Required Notifications <b>EX</b> - Requests for Extension of Time <b>RL</b> - Registered Location/Link
<b>3a)</b>	If this request is for a <b>D</b> evelopmental License, <b>D</b> emonstration License, or a <b>S</b> pecial Temporary Authorization (STA), enter the code and attach the required exhibit as described in the instructions. Otherwise enter <b>N</b> (Not Applicable).			( <b>N</b> ) <b>D M S N/A</b>	
<b>3b)</b>	If this request is for a 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.			( <b>N</b> ) <b>Yes No</b>	
<b>4)</b>	If this request is for an Amendment or Withdrawal, enter the file number of the pending application currently on file with the FCC.			File Number	
<b>5)</b>	If this request 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	
<b>6)</b>	If this request is for a New, Amendment, Renewal Only, or Renewal/Modification, enter the requested authorization expiration date (this item is optional).			MM      DD	
<b>7)</b>	Is this application "major" as defined in Section §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 Section			( <b>Y</b> ) <b>Yes No</b>	
<b>8)</b>	Are attachments being filed with this application?			( <b>N</b> ) <b>Yes No</b>	

**Fees, Waivers, and Exemptions**

<b>9)</b>	Is the applicant exempt from FCC application fees?	( <b>Y</b> ) <b>Yes No</b>
<b>10)</b>	Is the applicant exempt from FCC regulatory fees?	( <b>Y</b> ) <b>Yes No</b>
<b>11a)</b>	Does this application include a request for Waiver of the Commission's rule(s)? If "Yes", attach an exhibit providing rule number(s) and explaining circumstances.	( <b>N</b> ) <b>Yes No</b>
<b>11b)</b>	If 11a is "Y", enter the number of rule section(s) being waived.	Number of Rule Section(s):
<b>12)</b>	Are the frequencies or parameters requested in this filing covered by grandfathered privileges, previously approved by waiver, or functionally integrated with an existing station?	( <b>N</b> ) <b>Yes No</b>

# Appendix D

## Applicant Information

13) FCC Registration Number (FRN): <b>0001540038</b>			
14) Applicant/Licensee legal entity type: (Select One) <b>G</b> <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Unincorporated Association <input type="checkbox"/> Trust <input type="checkbox"/> Government Entity <input checked="" type="checkbox"/> Consortium <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Other (Description of Legal Entity)			
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 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): <b>MARIN, COUNTY OF</b>			
18) Attention To: <b>COMM SERVICES</b>			
19) P. O. Box <b>4055</b>	And/Or	20) Street Address:	
21) City: <b>SAN RAFAEL</b>	22) State: <b>CA</b>	23) Zip Code: <b>94913-4055</b>	
24) Telephone Number: <b>(415) 499-7242</b>	25) FAX: <b>(415) 499-3738</b>		
26) E-Mail Address:			

## 27) Demographics (Optional)

<b>Race:</b>		
<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African-American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	<input type="checkbox"/> Male <input type="checkbox"/> Female

## 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:
--	--

## Contact Information (if different from the applicant)

30) First Name: <b>BILL</b>	MI:	Last Name: <b>RUCK</b>	Suffix:
31) Company Name: <b>CSI TELECOMMUNICATIONS, INC. CONSULTING ENGINEERS</b>			
32) Attention To:			
33) P. O. Box:	And/Or	34) Street Address: <b>750 BATTERY STREET, SUITE 350</b>	
35) City: <b>SAN FRANCISCO</b>	36) State: <b>CA</b>	37) Zip Code: <b>94111-1555</b>	
38) Telephone Number: <b>(415) 751-8845</b>	39) FAX: <b>(415) 292-9981</b>		
40) E-Mail Address: <b>bruck@csitele.com</b>			

# Appendix D

## Regulatory Status

41) This filing is for authorization to provide or use the following type(s) of radio service offering (enter all that apply): ( <input type="checkbox"/> ) <u>C</u> ommon Carrier ( <input type="checkbox"/> ) <u>N</u> on-Common Carrier ( <input checked="" type="checkbox"/> ) <u>P</u> rivate, internal communications ( <input type="checkbox"/> ) <u>B</u> roadcast Services ( <input type="checkbox"/> ) <u>B</u> and <u>M</u> anager
--

## Type of Radio Service

42) This filing is for authorization to provide the following type(s) of radio service (enter all that apply): ( <input checked="" type="checkbox"/> ) <u>F</u> ixed ( <input type="checkbox"/> ) <u>M</u> obile ( <input type="checkbox"/> ) <u>R</u> adiolocation ( <input type="checkbox"/> ) <u>S</u> atellite (sound) ( <input type="checkbox"/> ) <u>B</u> roadcast Services
43) Interconnected Service? ( <input type="checkbox"/> ) <u>Y</u> es <u>N</u> o

## Alien Ownership Questions

44) Is the applicant a foreign government or the representative of any foreign government? ( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> o
45) Is the applicant an alien or the representative of an alien? ( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> o
46) Is the applicant a corporation organized under the laws of any foreign government? ( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> 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? ( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> 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? ( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> o
48b) If the answer to the above question 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? ( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> o  If the answer to 48B is 'N', attach to this application a date-stamped copy of a request for a foreign ownership ruling pursuant to Section 310(b)(4) of the Communications Act.

## 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, construction permit denied by the Commission? ( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> 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? ( <input type="checkbox"/> ) <u>N</u> <u>Y</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? ( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> o

## Aeronautical Advisory Station (Unicom) Certification

52) ( <input type="checkbox"/> ) 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.
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## Broadband Radio Service and Educational Broadband Service Cable Cross-Ownership

53a) Will the requested facilities be used to provide multichannel video programming service? ( <input type="checkbox"/> ) <u>Y</u> es <u>N</u> o
53b) If the answer to 53a is yes, does 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 with the geographic service area of the requested facilities? ( <input type="checkbox"/> ) <u>Y</u> es <u>N</u> o
<b>Note:</b> 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? ( <input type="checkbox"/> ) <u>Y</u> es <u>N</u> o
<b>Note:</b> 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? ( <input type="checkbox"/> ) <u>Y</u> es <u>N</u> o
<b>Note:</b> 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'.

# Appendix D

## 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 Section §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 Section §1.2002(c) of the rules, 47 CFR §1.2002(c). See Section §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 radio - frequency 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: <b>SHELLY</b>	MI:	Last Name: <b>NELSON</b>	Suffix:
57) Title: <b>COMM SERVICES MANAGER</b>			
Signature:			Date:
<b>FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID.</b>			
Upon grant of this license application, the license 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 in this application.			
<b>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).</b>			











# Appendix D

**FCC 601  
Schedule D**

**Wireless Telecommunications 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: <b>( A )</b> <u>A</u> dd <u>M</u> od <u>D</u> el		2) Location Number: <b>6</b>	
3) Location Description: <b>F</b>		4) Area of Operation Code:	5) Location Name: <b>HAMMOCK HILL</b>
6) FCC Antenna Structure Registration # or N/A (FAA Notification not Required)			
7) Latitude (DD - MM - SS.S): <b>38-09-47.0</b>		<b>NAD83</b> ( <b>N</b> ) <u>N</u> or <u>S</u>	8) Longitude (DDD - MM - SS.S): <b>122-43-24.3</b>
<b>NAD83</b> ( <b>W</b> ) <u>E</u> or <u>W</u>			
9) Street Address, Name of Landing Area, or Other Location Description: <b>OFF OF HICKS VALLEY RD</b>			
10) City: <b>MARSHALL</b>	11) State: <b>CA</b>	12) County/Borough/Parish: <b>MARIN</b>	
13) Elevation of Site AMSL (meters) ("a" in antenna structure example):  <b>276.90</b>	14) Overall Ht AGL Without Appurtenances (meters) ("b" in antenna structure example):  <b>12.00</b>	15) Overall Ht AGL With Appurtenances (meters) ("c" in antenna structure example):  <b>12.00</b>	
16) Support Structure Type: <b>TOWER</b>			
17) Location Number: (only for Area of Operation Code "A")	18) Radius (km):	19) Airport Identifier:	20) Site Status:
21) Maximum Latitude (DD - MM - SS.S): <b>Use for rectangle only (Northwest corner)</b>		<b>NAD83</b> (    ) <u>N</u> or <u>S</u>	22) Maximum Longitude (DDD - MM - SS.S): <b>Use for rectangle only (Northwest corner)</b>
			<b>NAD83</b> (    ) <u>E</u> or <u>W</u>
23) Do you propose to operate in an area that requires frequency coordination with Canada?			(    ) <b>Yes</b> <b>No</b>
24) Description: (only for Area of Operation Code "O")			
25) Number of Units:    _____ Hand Held    _____ Mobile    _____ Temporary Fixed    _____ Aircraft    _____ Itinerant			
26) Would a Commission grant of Authorization for this location be an action which may have a significant environmental effect? See Section 1.1307 of 47 CFR. If "Yes", submit an environmental assessment as required by 47 CFR, Sections 1.1308 and 1.1311.			<b>( N )</b> <u>Yes</u> <b>No</b>
27a) If the proposed site is located in one of the Quiet Zones listed in Item 27 of the Instructions, provide the date (mm/dd/yy) the proper Quiet Zone entity was notified:			
27b) Has the applicant obtained prior written consent from the proper Quiet Zone entity for the same technical parameters that are specified in this application?			(    ) <b>Yes</b> <b>No</b>
28) Do you propose to operate in an area that requires frequency coordination with Mexico?			<b>( N )</b> <u>Yes</u> <b>No</b>

# Appendix D

**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: <b>90.20a</b>	2) Describe Activity: <b>GOVERNMENT AGENCY PROTECTING LIFE AND PROPERTY</b>
--------------------------------	---

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

**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.	( <b>N</b> ) <u>Y</u> es / <u>N</u> o
---	---------------------------------------

**ASSOCIATED CALL SIGNS** (Attach additional sheets if required)

9)				

**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"/> Broadcast Network Entity <input type="checkbox"/> Television Cable Operator <input type="checkbox"/> Motion Picture Producer <input checked="" 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
A	1	4 PETER BEHR DRIVE, SAN RAFAEL, MARIN, CA	(415) 499-7241



# Appendix D

## FREQUENCY INFORMATION

28 Action A/M/D	29 Location Number	30 Antenna Number	31 Frequency [MHz]		32 Station Class	33 Num. Units	34 Num. Paging Receivers	35 Output Power [Watts]	36 ERP [Watts]	37 Emission Designators
			Existing if modified	New/Modified						
A	1	1		769.85625	FB	1		5.000	50.000	8K10F1E
A	1	1		769.85625	FB2	1		5.000	50.000	8K10F1E
A	1	1		771.21875	FB	1		5.000	50.000	8K10F1E
A	1	1		771.21875	FB2	1		5.000	50.000	8K10F1E
A	1	1		772.04375	FB	1		5.000	50.000	8K10F1E
A	1	1		772.04375	FB2	1		5.000	50.000	8K10F1E
A	1	1		772.94375	FB	1		5.000	50.000	8K10F1E
A	1	1		772.94375	FB2	1		5.000	50.000	8K10F1E
A	1	1		774.71875	FB	1		5.000	50.000	8K10F1E
A	1	1		774.71875	FB2	1		5.000	50.000	8K10F1E
A	2	1		770.51875	FB	1		15.800	50.000	8K10F1E
A	2	1		770.51875	FB2	1		15.800	50.000	8K10F1E
A	2	1		771.44375	FB	1		15.800	50.000	8K10F1E
A	2	1		771.44375	FB2	1		15.800	50.000	8K10F1E
A	2	1		772.34375	FB	1		15.800	50.000	8K10F1E
A	2	1		772.34375	FB2	1		15.800	50.000	8K10F1E
A	2	1		773.49375	FB	1		15.800	50.000	8K10F1E
A	2	1		773.49375	FB2	1		15.800	50.000	8K10F1E
A	2	1		774.91875	FB	1		15.800	50.000	8K10F1E
A	2	1		774.91875	FB2	1		15.800	50.000	8K10F1E
A	3	1		769.79375	FB	1		15.800	50.000	8K10F1E
A	3	1		769.79375	FB2	1		15.800	50.000	8K10F1E
A	3	1		770.04375	FB	1		15.800	50.000	8K10F1E
A	3	1		770.04375	FB2	1		15.800	50.000	8K10F1E
A	3	1		770.59375	FB	1		15.800	50.000	8K10F1E
A	3	1		770.59375	FB2	1		15.800	50.000	8K10F1E
A	3	1		771.06875	FB	1		15.800	50.000	8K10F1E
A	3	1		771.06875	FB2	1		15.800	50.000	8K10F1E
A	3	1		771.29375	FB	1		15.800	50.000	8K10F1E

# Appendix D

## FREQUENCY INFORMATION

28 Action A/M/D	29 Location Number	30 Antenna Number	31 Frequency [MHz]		32 Station Class	33 Num. Units	34 Num. Paging Receivers	35 Output Power [Watts]	36 ERP [Watts]	37 Emission Designators
			Existing if modified	New/Modified						
A	3	1		771.29375	FB2	1		15.800	50.000	8K10F1E
A	3	1		771.59375	FB	1		15.800	50.000	8K10F1E
A	3	1		771.59375	FB2	1		15.800	50.000	8K10F1E
A	3	1		771.89375	FB	1		15.800	50.000	8K10F1E
A	3	1		771.89375	FB2	1		15.800	50.000	8K10F1E
A	3	1		772.19375	FB	1		15.800	50.000	8K10F1E
A	3	1		772.19375	FB2	1		15.800	50.000	8K10F1E
A	3	1		772.49375	FB	1		15.800	50.000	8K10F1E
A	3	1		772.49375	FB2	1		15.800	50.000	8K10F1E
A	3	1		772.79375	FB	1		15.800	50.000	8K10F1E
A	3	1		772.79375	FB2	1		15.800	50.000	8K10F1E
A	3	1		773.21875	FB	1		15.800	50.000	8K10F1E
A	3	1		773.21875	FB2	1		15.800	50.000	8K10F1E
A	3	1		773.89375	FB	1		15.800	50.000	8K10F1E
A	3	1		773.89375	FB2	1		15.800	50.000	8K10F1E
A	3	1		774.44375	FB	1		15.800	50.000	8K10F1E
A	3	1		774.44375	FB2	1		15.800	50.000	8K10F1E
A	4	1		770.51875	FB	1		99.800	50.000	8K10F1E
A	4	1		770.51875	FB2	1		99.800	50.000	8K10F1E
A	4	1		771.44375	FB	1		99.800	50.000	8K10F1E
A	4	1		771.44375	FB2	1		99.800	50.000	8K10F1E
A	4	1		772.34375	FB	1		99.800	50.000	8K10F1E
A	4	1		772.34375	FB2	1		99.800	50.000	8K10F1E
A	4	1		773.49375	FB	1		99.800	50.000	8K10F1E
A	4	1		773.49375	FB2	1		99.800	50.000	8K10F1E
A	4	1		774.91875	FB	1		99.800	50.000	8K10F1E
A	4	1		774.91875	FB2	1		99.800	50.000	8K10F1E
A	5	1		770.51875	FB	1		15.800	50.000	8K10F1E
A	5	1		770.51875	FB2	1		15.800	50.000	8K10F1E
A	5	1		771.44375	FB	1		15.800	50.000	8K10F1E



# Appendix D

**FCC 601**  
Main Form

## FCC Application for Wireless Telecommunications Bureau Radio Service Authorization

Approved by OMB  
3060-0798  
See instructions for  
Public burden estimate

1) Radio Service Code: <b>SY</b>	1a) Existing Radio Service Code:
----------------------------------	----------------------------------

**General Information**

<b>2)</b>	(Select only one)      ( <b>NE</b> )	<b>NE</b> - New <b>MD</b> - Modification <b>AM</b> - Amendment	<b>RO</b> - Renewal Only <b>RM</b> - Renewal / Modification <b>CA</b> - Cancellation of License	<b>AU</b> - Administrative Update <b>WD</b> - Withdrawal of Application <b>DU</b> - Duplicate License	<b>NT</b> - Required Notifications <b>EX</b> - Requests for Extension of Time <b>RL</b> - Registered Location/Link
<b>3a)</b>	If this request is for a <b>D</b> evelopmental License, <b>D</b> emonstration License, or a <b>S</b> pecial Temporary Authorization (STA), enter the code and attach the required exhibit as described in the instructions. Otherwise enter <b>N</b> (Not Applicable).			( <b>N</b> ) <b>D M S N/A</b>	
<b>3b)</b>	If this request is for a 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.			( <b>N</b> ) <b>Yes No</b>	
<b>4)</b>	If this request is for an Amendment or Withdrawal, enter the file number of the pending application currently on file with the FCC.			File Number	
<b>5)</b>	If this request 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	
<b>6)</b>	If this request is for a New, Amendment, Renewal Only, or Renewal/Modification, enter the requested authorization expiration date (this item is optional).			MM      DD	
<b>7)</b>	Is this application "major" as defined in Section §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 Section			( <b>Y</b> ) <b>Yes No</b>	
<b>8)</b>	Are attachments being filed with this application?			( <b>N</b> ) <b>Yes No</b>	

**Fees, Waivers, and Exemptions**

<b>9)</b>	Is the applicant exempt from FCC application fees?	( <b>Y</b> ) <b>Yes No</b>
<b>10)</b>	Is the applicant exempt from FCC regulatory fees?	( <b>Y</b> ) <b>Yes No</b>
<b>11a)</b>	Does this application include a request for Waiver of the Commission's rule(s)? If "Yes", attach an exhibit providing rule number(s) and explaining circumstances.	( <b>N</b> ) <b>Yes No</b>
<b>11b)</b>	If 11a is "Y", enter the number of rule section(s) being waived.	Number of Rule Section(s):
<b>12)</b>	Are the frequencies or parameters requested in this filing covered by grandfathered privileges, previously approved by waiver, or functionally integrated with an existing station?	( <b>N</b> ) <b>Yes No</b>

# Appendix D

## Applicant Information

13) FCC Registration Number (FRN): <b>0001540038</b>			
14) Applicant/Licensee legal entity type: (Select One) <b>G</b> <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Unincorporated Association <input type="checkbox"/> Trust <input type="checkbox"/> Government Entity <input checked="" type="checkbox"/> Consortium <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Other (Description of Legal Entity)			
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 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): <b>MARIN, COUNTY OF</b>			
18) Attention To: <b>COMM SERVICES</b>			
19) P. O. Box <b>4055</b>	And/Or	20) Street Address:	
21) City: <b>SAN RAFAEL</b>	22) State: <b>CA</b>	23) Zip Code: <b>94913-4055</b>	
24) Telephone Number: <b>(415) 499-7242</b>	25) FAX: <b>(415) 499-3738</b>		
26) E-Mail Address:			

## 27) Demographics (Optional)

<b>Race:</b>		
<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African-American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	<input type="checkbox"/> Male <input type="checkbox"/> Female

## 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:
--	--

## Contact Information (if different from the applicant)

30) First Name: <b>BILL</b>	MI:	Last Name: <b>RUCK</b>	Suffix:
31) Company Name: <b>CSI TELECOMMUNICATIONS, INC. CONSULTING ENGINEERS</b>			
32) Attention To:			
33) P. O. Box:	And/Or	34) Street Address: <b>750 BATTERY STREET, SUITE 350</b>	
35) City: <b>SAN FRANCISCO</b>	36) State: <b>CA</b>	37) Zip Code: <b>94111-1555</b>	
38) Telephone Number: <b>(415) 751-8845</b>	39) FAX: <b>(415) 292-9981</b>		
40) E-Mail Address: <b>bruck@csitele.com</b>			

# Appendix D

## Regulatory Status

41) This filing is for authorization to provide or use the following type(s) of radio service offering (enter all that apply): ( <input type="checkbox"/> ) <u>C</u> ommon Carrier ( <input type="checkbox"/> ) <u>N</u> on-Common Carrier ( <input checked="" type="checkbox"/> ) <u>P</u> rivate, internal communications ( <input type="checkbox"/> ) <u>B</u> roadcast Services ( <input type="checkbox"/> ) <u>B</u> and <u>M</u> anager
--

## Type of Radio Service

42) This filing is for authorization to provide the following type(s) of radio service (enter all that apply): ( <input checked="" type="checkbox"/> ) <u>F</u> ixed ( <input checked="" type="checkbox"/> ) <u>M</u> obile ( <input type="checkbox"/> ) <u>R</u> adiolocation ( <input type="checkbox"/> ) <u>S</u> atellite (sound) ( <input type="checkbox"/> ) <u>B</u> roadcast Services
43) Interconnected Service? ( <input type="checkbox"/> ) <u>Y</u> es <u>N</u> o

## Alien Ownership Questions

44) Is the applicant a foreign government or the representative of any foreign government?	( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> o
45) Is the applicant an alien or the representative of an alien?	( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> o
46) Is the applicant a corporation organized under the laws of any foreign government?	( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> 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?	( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> 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?	( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> o
48b) If the answer to the above question 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?  If the answer to 48B is 'N', attach to this application a date-stamped copy of a request for a foreign ownership ruling pursuant to Section 310(b)(4) of the Communications Act.	( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> o

## 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, construction permit denied by the Commission?	( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> 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?	( <input type="checkbox"/> ) <u>N</u> <u>Y</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?	( <input type="checkbox"/> ) <u>N</u> <u>Y</u> es <u>N</u> o

## Aeronautical Advisory Station (Unicom) Certification

52) ( <input type="checkbox"/> ) 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?	( <input type="checkbox"/> ) <u>Y</u> es <u>N</u> o
53b) If the answer to 53a is yes, does 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 with the geographic service area of the requested facilities?	( <input type="checkbox"/> ) <u>Y</u> es <u>N</u> o
<b>Note:</b> 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?	( <input type="checkbox"/> ) <u>Y</u> es <u>N</u> o
<b>Note:</b> 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?	( <input type="checkbox"/> ) <u>Y</u> es <u>N</u> o
<b>Note:</b> 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'.	

# Appendix D

## 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 Section §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 Section §1.2002(c) of the rules, 47 CFR §1.2002(c). See Section §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 radio - frequency 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: <b>SHELLY</b>	MI:	Last Name: <b>NELSON</b>	Suffix:
57) Title: <b>COMM SERVICES MANAGER</b>			
Signature:			Date:
<b>FAILURE TO SIGN THIS APPLICATION MAY RESULT IN DISMISSAL OF THE APPLICATION AND FORFEITURE OF ANY FEES PAID.</b>			
Upon grant of this license application, the license 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 in this application.			
<b>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).</b>			











# Appendix D

**FCC 601  
Schedule D**

**Wireless Telecommunications 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: <input checked="" type="checkbox"/> <b>A</b> <input type="checkbox"/> <b>Add</b> <input type="checkbox"/> <b>Mod</b> <input type="checkbox"/> <b>Del</b>		2) Location Number: <b>6</b>	
3) Location Description:		4) Area of Operation Code:	5) Location Name: <b>RADIO SHOP</b>
6) FCC Antenna Structure Registration # or N/A (FAA Notification not Required)			
7) Latitude (DD - MM - SS.S): <b>37-59-53.7</b>		8) Longitude (DDD - MM - SS.S): <b>122-32-08.9</b>	
<b>NAD83</b> ( <input checked="" type="checkbox"/> <b>N</b> ) <b>N</b> or <b>S</b>		<b>NAD83</b> ( <input type="checkbox"/> <b>W</b> ) <b>E</b> or <b>W</b>	
9) Street Address, Name of Landing Area, or Other Location Description: <b>4 PETER BEHR DRIVE</b>			
10) City: <b>SAN RAFAEL</b>		11) State: <b>CA</b>	
12) County/Borough/Parish: <b>MARIN</b>			
13) Elevation of Site AMSL (meters) ("a" in antenna structure example):  <b>5.00</b>		14) Overall Ht AGL Without Appurtenances (meters) ("b" in antenna structure example):  <b>6.00</b>	
15) Overall Ht AGL With Appurtenances (meters) ("c" in antenna structure example):  <b>7.00</b>			
16) Support Structure Type: <b>BPOLE</b>			
17) Location Number: (only for Area of Operation Code "A")		18) Radius (km):	
		19) Airport Identifier:	
		20) Site Status:	
21) Maximum Latitude (DD - MM - SS.S): <b>Use for rectangle only (Northwest corner)</b>		22) Maximum Longitude (DDD - MM - SS.S): <b>Use for rectangle only (Northwest corner)</b>	
<b>NAD83</b> (   ) <b>N</b> or <b>S</b>		<b>NAD83</b> (   ) <b>E</b> or <b>W</b>	
23) Do you propose to operate in an area that requires frequency coordination with Canada? <span style="float: right;">( <input checked="" type="checkbox"/> ) <b>Yes</b>   <input type="checkbox"/> <b>No</b></span>			
24) Description: (only for Area of Operation Code "O")			
25) Number of Units:    _____ Hand Held    _____ Mobile    _____ Temporary Fixed    _____ Aircraft    _____ Itinerant			
26) Would a Commission grant of Authorization for this location be an action which may have a significant environmental effect? See Section 1.1307 of 47 CFR. If "Yes", submit an environmental assessment as required by 47 CFR, Sections 1.1308 and 1.1311. <span style="float: right;">( <input checked="" type="checkbox"/> ) <b>Yes</b>   <input type="checkbox"/> <b>No</b></span>			
27a) If the proposed site is located in one of the Quiet Zones listed in Item 27 of the Instructions, provide the date (mm/dd/yy) the proper Quiet Zone entity was notified:			
27b) Has the applicant obtained prior written consent from the proper Quiet Zone entity for the same technical parameters that are specified in this application? <span style="float: right;">(   ) <b>Yes</b>   <input type="checkbox"/> <b>No</b></span>			
28) Do you propose to operate in an area that requires frequency coordination with Mexico? <span style="float: right;">( <input checked="" type="checkbox"/> ) <b>Yes</b>   <input type="checkbox"/> <b>No</b></span>			





# Appendix D

**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: <b>90.20a</b>	2) Describe Activity: <b>GOVERNMENT AGENCY PROTECTING LIFE AND PROPERTY</b>
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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?			( <b>N</b> ) <u>Y</u> es / <u>N</u> o

**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.	( <b>N</b> ) <u>Y</u> es / <u>N</u> o
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**ASSOCIATED CALL SIGNS** (Attach additional sheets if required)

9)				

**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"/> Broadcast Network Entity <input type="checkbox"/> Television Cable Operator <input type="checkbox"/> Motion Picture Producer <input checked="" 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
A	1	4 PETER BEHR DRIVE, SAN RAFAEL, MARIN, CA	(415) 499-7241



# Appendix D

## FREQUENCY INFORMATION

28 Action A/M/D	29 Location Number	30 Antenna Number	31 Frequency [MHz]		32 Station Class	33 Num. Units	34 Num. Paging Receivers	35 Output Power [Watts]	36 ERP [Watts]	37 Emission Designators
			Existing if modified	New/Modified						
A	1	1		769.85625	FB	1		31.600	100.000	8K10F1E
A	1	1		769.85625	FB2	1		31.600	100.000	8K10F1E
A	1	1		771.21875	FB	1		31.600	100.000	8K10F1E
A	1	1		771.21875	FB2	1		31.600	100.000	8K10F1E
A	1	1		772.04375	FB	1		31.600	100.000	8K10F1E
A	1	1		772.04375	FB2	1		31.600	100.000	8K10F1E
A	1	1		772.94375	FB	1		31.600	100.000	8K10F1E
A	1	1		772.94375	FB2	1		31.600	100.000	8K10F1E
A	1	1		774.71875	FB	1		31.600	100.000	8K10F1E
A	1	1		774.71875	FB2	1		31.600	100.000	8K10F1E
A	2	1		770.79375	FB	1		31.600	100.000	8K10F1E
A	2	1		770.79375	FB2	1		31.600	100.000	8K10F1E
A	2	1		771.74375	FB	1		31.600	100.000	8K10F1E
A	2	1		771.74375	FB2	1		31.600	100.000	8K10F1E
A	2	1		772.64375	FB	1		31.600	100.000	8K10F1E
A	2	1		772.64375	FB2	1		31.600	100.000	8K10F1E
A	2	1		774.16875	FB	1		31.600	100.000	8K10F1E
A	2	1		774.16875	FB2	1		31.600	100.000	8K10F1E
A	2	1			FB	1		31.600	100.000	8K10F1E
A	2	1			FB2	1		31.600	100.000	8K10F1E
A	3	1		769.85625	FB	1		31.600	100.000	8K10F1E
A	3	1		769.85625	FB2	1		31.600	100.000	8K10F1E
A	3	1		771.21875	FB	1		31.600	100.000	8K10F1E
A	3	1		771.21875	FB2	1		31.600	100.000	8K10F1E
A	3	1		772.04375	FB	1		31.600	100.000	8K10F1E
A	3	1		772.04375	FB2	1		31.600	100.000	8K10F1E
A	3	1		772.94375	FB	1		31.600	100.000	8K10F1E
A	3	1		772.94375	FB2	1		31.600	100.000	8K10F1E
A	3	1		774.71875	FB	1		31.600	100.000	8K10F1E

# Appendix D

## FREQUENCY INFORMATION

28 Action A/M/D	29 Location Number	30 Antenna Number	31 Frequency [MHz]		32 Station Class	33 Num. Units	34 Num. Paging Receivers	35 Output Power [Watts]	36 ERP [Watts]	37 Emission Designators
			Existing if modified	New/Modified						
A	3	1		774.71875	FB2	1		31.600	100.000	8K10F1E
A	4	1		769.85625	FB	1		15.800	50.000	8K10F1E
A	4	1		769.85625	FB2	1		15.800	50.000	8K10F1E
A	4	1		771.21875	FB	1		15.800	50.000	8K10F1E
A	4	1		771.21875	FB2	1		15.800	50.000	8K10F1E
A	4	1		772.04375	FB	1		15.800	50.000	8K10F1E
A	4	1		772.04375	FB2	1		15.800	50.000	8K10F1E
A	4	1		772.94375	FB	1		15.800	50.000	8K10F1E
A	4	1		772.94375	FB2	1		15.800	50.000	8K10F1E
A	4	1		774.71875	FB	1		15.800	50.000	8K10F1E
A	4	1		774.71875	FB2	1		15.800	50.000	8K10F1E
A	5	1		799.79375	MD	5300		35.000	35.000	8K10F1E
A	5	1		799.85625	MD	5300		35.000	35.000	8K10F1E
A	5	1		800.04375	MD	5300		35.000	35.000	8K10F1E
A	5	1		800.51875	MD	5300		35.000	35.000	8K10F1E
A	5	1		800.59375	MD	5300		35.000	35.000	8K10F1E
A	5	1		800.79375	MD	5300		35.000	35.000	8K10F1E
A	5	1		801.06875	MD	5300		35.000	35.000	8K10F1E
A	5	1		801.21875	MD	5300		35.000	35.000	8K10F1E
A	5	1		801.29375	MD	5300		35.000	35.000	8K10F1E
A	5	1		801.44375	MD	5300		35.000	35.000	8K10F1E
A	5	1		801.59375	MD	5300		35.000	35.000	8K10F1E
A	5	1		801.74375	MD	5300		35.000	35.000	8K10F1E
A	5	1		801.89375	MD	5300		35.000	35.000	8K10F1E
A	5	1		802.04375	MD	5300		35.000	35.000	8K10F1E
A	5	1		802.19375	MD	5300		35.000	35.000	8K10F1E
A	5	1		802.34375	MD	5300		35.000	35.000	8K10F1E
A	5	1		802.49375	MD	5300		35.000	35.000	8K10F1E
A	5	1		802.64375	MD	5300		35.000	35.000	8K10F1E
A	5	1		802.79375	MD	5300		35.000	35.000	8K10F1E

# Appendix D

## FREQUENCY INFORMATION

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			Existing if modified	New/Modified						
A	5	1		802.94375	MO	5300		35.000	35.000	8K10F1E
A	5	1		803.21875	MO	5300		35.000	35.000	8K10F1E
A	5	1		803.49375	MO	5300		35.000	35.000	8K10F1E
A	5	1		803.89375	MO	5300		35.000	35.000	8K10F1E
A	5	1		804.16875	MO	5300		35.000	35.000	8K10F1E
A	5	1		804.44375	MO	5300		35.000	35.000	8K10F1E
A	5	1		804.71875	MO	5300		35.000	35.000	8K10F1E
A	5	1		804.91875	MO	5300		35.000	35.000	8K10F1E
A	5	1			MO	5300		35.000	35.000	8K10F1E
A	6	1		799.79375	FX1	1		35.000	35.000	8K10F1E
A	6	1		799.85625	FX1	1		35.000	35.000	8K10F1E
A	6	1		800.04375	FX1	1		35.000	35.000	8K10F1E
A	6	1		800.51875	FX1	1		35.000	35.000	8K10F1E
A	6	1		800.59375	FX1	1		35.000	35.000	8K10F1E
A	6	1		800.79375	FX1	1		35.000	35.000	8K10F1E
A	6	1		801.06875	FX1	1		35.000	35.000	8K10F1E
A	6	1		801.21875	FX1	1		35.000	35.000	8K10F1E
A	6	1		801.29375	FX1	1		35.000	35.000	8K10F1E
A	6	1		801.44375	FX1	1		35.000	35.000	8K10F1E
A	6	1		801.59375	FX1	1		35.000	35.000	8K10F1E
A	6	1		801.74375	FX1	1		35.000	35.000	8K10F1E
A	6	1		801.89375	FX1	1		35.000	35.000	8K10F1E
A	6	1		802.04375	FX1	1		35.000	35.000	8K10F1E
A	6	1		802.19375	FX1	1		35.000	35.000	8K10F1E
A	6	1		802.34375	FX1	1		35.000	35.000	8K10F1E
A	6	1		802.49375	FX1	1		35.000	35.000	8K10F1E
A	6	1		802.64375	FX1	1		35.000	35.000	8K10F1E
A	6	1		802.79375	FX1	1		35.000	35.000	8K10F1E
A	6	1		802.94375	FX1	1		35.000	35.000	8K10F1E
A	6	1		803.21875	FX1	1		35.000	35.000	8K10F1E

# Appendix D

## FREQUENCY INFORMATION

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			Existing if modified	New/Modified						
A	6	1		803.49375	FX1	1		35.000	35.000	8K10F1E
A	6	1		803.89375	FX1	1		35.000	35.000	8K10F1E
A	6	1		804.16875	FX1	1		35.000	35.000	8K10F1E
A	6	1		804.44375	FX1	1		35.000	35.000	8K10F1E
A	6	1		804.71875	FX1	1		35.000	35.000	8K10F1E
A	6	1		804.91875	FX1	1		35.000	35.000	8K10F1E
A	6	1			FX1	1		35.000	35.000	8K10F1E
A	7	1		799.79375	FX1	150		35.000	35.000	8K10F1E
A	7	1		799.85625	FX1	150		35.000	35.000	8K10F1E
A	7	1		800.04375	FX1	150		35.000	35.000	8K10F1E
A	7	1		800.51875	FX1	150		35.000	35.000	8K10F1E
A	7	1		800.59375	FX1	150		35.000	35.000	8K10F1E
A	7	1		800.79375	FX1	150		35.000	35.000	8K10F1E
A	7	1		801.06875	FX1	150		35.000	35.000	8K10F1E
A	7	1		801.21875	FX1	150		35.000	35.000	8K10F1E
A	7	1		801.29375	FX1	150		35.000	35.000	8K10F1E
A	7	1		801.44375	FX1	150		35.000	35.000	8K10F1E
A	7	1		801.59375	FX1	150		35.000	35.000	8K10F1E
A	7	1		801.74375	FX1	150		35.000	35.000	8K10F1E
A	7	1		801.89375	FX1	150		35.000	35.000	8K10F1E
A	7	1		802.04375	FX1	150		35.000	35.000	8K10F1E
A	7	1		802.19375	FX1	150		35.000	35.000	8K10F1E
A	7	1		802.34375	FX1	150		35.000	35.000	8K10F1E
A	7	1		802.49375	FX1	150		35.000	35.000	8K10F1E
A	7	1		802.64375	FX1	150		35.000	35.000	8K10F1E
A	7	1		802.79375	FX1	150		35.000	35.000	8K10F1E
A	7	1		802.94375	FX1	150		35.000	35.000	8K10F1E
A	7	1		803.21875	FX1	150		35.000	35.000	8K10F1E
A	7	1		803.49375	FX1	150		35.000	35.000	8K10F1E
A	7	1		803.89375	FX1	150		35.000	35.000	8K10F1E

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## FREQUENCY INFORMATION

28 Action A/M/D	29 Location Number	30 Antenna Number	31 Frequency [MHz]		32 Station Class	33 Num. Units	34 Num. Paging Receivers	35 Output Power [Watts]	36 ERP [Watts]	37 Emission Designators
			Existing if modified	New/Modified						
A	7	1		804.16875	FX1	150		35.000	35.000	8K10F1E
A	7	1		804.44375	FX1	150		35.000	35.000	8K10F1E
A	7	1		804.71875	FX1	150		35.000	35.000	8K10F1E
A	7	1		804.91875	FX1	150		35.000	35.000	8K10F1E
A	7	1			FX1	150		35.000	35.000	8K10F1E
A	8	1		799.79375	FX1T	10		35.000	35.000	8K10F1E
A	8	1		799.85625	FX1T	10		35.000	35.000	8K10F1E
A	8	1		800.04375	FX1T	10		35.000	35.000	8K10F1E
A	8	1		800.51875	FX1T	10		35.000	35.000	8K10F1E
A	8	1		800.59375	FX1T	10		35.000	35.000	8K10F1E
A	8	1		800.79375	FX1T	10		35.000	35.000	8K10F1E
A	8	1		801.06875	FX1T	10		35.000	35.000	8K10F1E
A	8	1		801.21875	FX1T	10		35.000	35.000	8K10F1E
A	8	1		801.29375	FX1T	10		35.000	35.000	8K10F1E
A	8	1		801.44375	FX1T	10		35.000	35.000	8K10F1E
A	8	1		801.59375	FX1T	10		35.000	35.000	8K10F1E
A	8	1		801.74375	FX1T	10		35.000	35.000	8K10F1E
A	8	1		801.89375	FX1T	10		35.000	35.000	8K10F1E
A	8	1		802.04375	FX1T	10		35.000	35.000	8K10F1E
A	8	1		802.19375	FX1T	10		35.000	35.000	8K10F1E
A	8	1		802.34375	FX1T	10		35.000	35.000	8K10F1E
A	8	1		802.49375	FX1T	10		35.000	35.000	8K10F1E
A	8	1		802.64375	FX1T	10		35.000	35.000	8K10F1E
A	8	1		802.79375	FX1T	10		35.000	35.000	8K10F1E
A	8	1		802.94375	FX1T	10		35.000	35.000	8K10F1E
A	8	1		803.21875	FX1T	10		35.000	35.000	8K10F1E
A	8	1		803.49375	FX1T	10		35.000	35.000	8K10F1E
A	8	1		803.89375	FX1T	10		35.000	35.000	8K10F1E
A	8	1		804.16875	FX1T	10		35.000	35.000	8K10F1E
A	8	1		804.44375	FX1T	10		35.000	35.000	8K10F1E

