Federal Communications Commission Washington, D. C. 20554

Approved by OMB 3060-0627 Expires 01/31/98

## FOR FCC USE ONLY **FCC 302-AM** APPLICATION FOR AM **BROADCAST STATION LICENSE**

(Please read instructions before filling out form.

FOR COMMISSION USE ONLY	
FILE NO.	

(i rease read mendadorio polore mining out romi.	FILE NO.						
SECTION I - APPLICANT FEE INFORMATION							
PAYOR NAME (Last, First, Middle Initial)							
Kensington Digital Media, L.L.C. FRN 00	021225537						
MAILING ADDRESS (Line 1) (Maximum 35 characters) PO Box 681044							
MAILING ADDRESS (Line 2) (Maximum 35 characters)							
CITY Franklin	STATE OR COUNTRY (if fo	reign address)	ZIP CODE 37068				
TELEPHONE NUMBER (include area code) 260-413-0144	CALL LETTERS WPLN	OTHER FCC IDE 21473	NTIFIER (If applicable)				
2. A. Is a fee submitted with this application?			Yes ✓ No				
B. If No, indicate reason for fee exemption (see 47 C.F.R. Section							
Governmental Entity  Noncommercial educ	cational licensee 0	ther (Please explain	):				
C. If Yes, provide the following information:							
Enter in Column (A) the correct Fee Type Code for the service you are applying for. Fee Type Codes may be found in the "Mass Media Services Fee Filing Guide." Column (B) lists the Fee Multiple applicable for this application. Enter fee amount due in Column (C).							
(A) (B)	(C)						
FEE TYPE FEE MULTIPLE	FEE DUE FOR FEI TYPE CODE IN COLUMN (A)		FOR FCC USE ONLY				
0 0 1	\$						
To be used only when you are requesting concurrent actions which result in a requirement to list more than one Fee Type Code.							
(A) (B) (B) 1	(C)		FOR FCC USE ONLY				
	L						
ADD ALL AMOUNTS SHOWN IN COLUMN C, AND ENTER THE TOTAL HERE. THIS AMOUNT SHOULD EQUAL YOUR ENCLOSED	TOTAL AMOUNT REMITTED WITH TH APPLICATION	IS	FOR FCC USE ONLY				
REMITTANCE.							

SECTION II - APPLICAN	T INFORMATION						
NAME OF APPLICANT     Kensington Digital Media, L.I	L.C.						
MAILING ADDRESS PO Box 681044							
CITY Franklin			STATE TN		ZIP CODE 37068		
2. This application is for:	Commercial AM Direct	[ tional	Noncomm	nercial s Ion-Directional	ee Attached	Exhibi	
Call letters	Community of License	Construct	ion Permit File No.	Modification of Construction Permit File No(s).	Expiration Date of Construction Perm		
WPLN	Madison, TN			Terract he reo(3).	Construction 7 cm	nt	
3. Is the station no accordance with 47 C.F.  If No, explain in an Exhi		to autor	matic program	test authority in	Exhibit No.	No	
4. Have all the terms, conditions, and obligations set forth in the above described construction permit been fully met?						No	
If No, state exceptions in	n an Exhibit.				N/A		
5. Apart from the changes already reported, has any cause or circumstance arisen since the grant of the underlying construction permit which would result in any statement or representation contained in the construction permit application to be now incorrect?						No	
If Yes, explain in an Exhibit.							
6. Has the permittee filed its Ownership Report (FCC Form 323) or ownership certification in accordance with 47 C.F.R. Section 73.3615(b)?					Yes	No	
certification in accordant	ce with 47 C.F.A. Geotion	70.001	5(6):		Does not	apply	
If No, explain in an Exhi	Exhibit No. N/A						
or administrative body was criminal proceeding, bro	ing been made or an adv vith respect to the applica ought under the provisions elated antitrust or unfair nit; or discrimination?	nt or pa	rties to the appli law relating to tl	cation in a civil or he following: any	Yes	No	
involved, including an id (by dates and file numbinformation has been required by 47 U.S.C. S of that previous submiss the call letters of the st	attach as an Exhibit a fullentification of the court of bers), and the disposition earlier disclosed in confection 1.65(c), the application by reference to the fation regarding which the of filing; and (ii) the dispositions	r admining of the nection ant need file numles application	strative body an litigation. Who with another a only provide: (in the case ation or Section	nd the proceeding nere the requisite application or as i) an identification of an application, 1.65 information	Exhibit No.		

8. Does the applicant, or any party to the application, have the expanded band (1605-1705 kHz) or a permit or license expanded band that is held in combination (pursuant to the 5 with the AM facility proposed to be modified herein?	lor	
If Yes, provide particulars as an Exhibit.		Exhibit No. N/A
The APPLICANT hereby waives any claim to the use of any against the regulatory power of the United States because requests and authorization in accordance with this application amended).	e use of the same, whet	her by license or otherwise, and
The APPLICANT acknowledges that all the statements ma material representations and that all the exhibits are a material		
CERTIFI	CATION	
<ol> <li>By checking Yes, the applicant certifies, that, in the case or she is not subject to a denial of federal benefits that incl to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U case of a non-individual applicant (e.g., corporation, partner association), no party to the application is subject to a deincludes FCC benefits pursuant to that section. For the depurposes, see 47 C.F.R. Section 1.2002(b).</li> <li>I certify that the statements in this application are true, coand are made in good faith.</li> </ol>	udes FCC benefits pursua .S.C. Section 862, or, in the ship or other unincorporate enial of federal benefits the finition of a "party" for the	ant he ed aat se
Name	Signature	
Anthony Didier	/s/ Anthony Didier	c
Title Managing Member	Date 11/3/2022	Telephone Number 260-413-0144
WILLFUL FALSE STATEMENTS ON THIS FORM AR	E PUNISHABLE BY FIN	E AND/OR IMPRISONMENT

## WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION

FCC NOTICE TO INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT

The solicitation of personal information requested in this application is authorized by the Communications Act of 1934, as amended. The Commission will use the information provided in this form to determine whether grant of the application is in the public interest. In reaching that determination, or for law enforcement purposes, it may become necessary to refer personal information contained in this form to another government agency. In addition, all information provided in this form will be available for public inspection. If information requested on the form is not provided, the application may be returned without action having been taken upon it or its processing may be delayed while a request is made to provide the missing information. Your response is required to obtain the requested authorization.

Public reporting burden for this collection of information is estimated to average 639 hours and 53 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, can be sent to the Federal Communications Commission, Records Management Branch, Paperwork Reduction Project (3060-0627), Washington, D. C. 20554. Do NOT send completed forms to this address.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, P.L. 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3), AND THE PAPERWORK REDUCTION ACT OF 1980, P.L. 96-511, DECEMBER 11, 1980, 44 U.S.C. 3507.

SECTION III - LICENSE APPLICATION ENGINEERING DATA									
Name of Applicant									
PURPOSE OF A	UTHORIZATIO	ON APPLIED FOR	(check one)						
✓ 5	Station License	•	Direct Mea	surement of Po	wer				
Facilities authorized in construction permit									
Call Sign		onstruction Permit	Frequency	Hours of Ope	ration	Power in	kilowatts		
WPLN	(if applicable)	)	(kHz)   1430	Unlimited		Night 1	Day 15		
2. Station location									
State City or Town									
Tennes	200			Madisc	'n				
		*************************************		Madisc	/ I I				
3. Transmitter lo	cation					Street address			
State	County			City or Town	City or Town		ration)		
TN	Davids	on		Madisor	n	(or other identifice Nesbitt Lane	, (1011)		
4. Main studio lo	cation					<u></u>			
State	County			City or Town		Street address			
NA	NA			NA		(or other identific	ation)		
				<u> </u>		NA			
5. Remote contro		n (specify only if at	thorized direction			Cttdd			
State	County			City or Town		Street address (or other identification)			
						(e. earler raeminication)			
6. Has type-approved stereo generating equipment been installed?  7. Does the sampling system meet the requirements of 47 C.F.R. Section 73.68?  Ves Vos No Not Applicable  Attach as an Exhibit a detailed description of the sampling system as installed.  Exhibit No. No Change									
8. Operating con		rront (in amporac)	without	DE common r	oint or antenna	current (in amner	ae) without		
RF common point or antenna current (in amperes) without modulation for night system  4.65  RF common point or antenna current (in amperes) without modulation for day system  17.23						oo, mareut			
Measured antenna or common point resistance (in ohms) at operating frequency Night Day 50.5				Measured antenna or common point reactance (in ohms) at operating frequency Night Day +0 +0			(in ohms) at		
Antenna indicatio	ns for direction								
Towers Antenna monitor Phase reading(s) in degrees Night Day		Antenna monitor sample current ratio(s)		Antenna base currents					
		Night		Night	Day	Night	Day		
1	**********	0	NA	1	NA	1	NA		
2		52		0.947		0.916			
3		73.5		0.84		0.865			
4		133.2		0.628		0.0			
				, ,					
Manufacturer and	type of anten	na monitor: 8/	L		.1.				

## SECTION III - Page 2

9. Description of antenna system ((f directional antenna is used, the information requested below should be given for each element of the array. Use separate sheets if necessary.) All 4 towers identical in heights.

Type Radiator  Guyed steel tower	Overall height in meters of radiator above base insulator, or above base, if grounded.  54.3	Overall heigh above ground obstruction lie	d (without	Overall height in met above ground (include obstruction lighting) 52.4 (no light	de loa de Ex	antenna is either top ided or sectionalized, scribe fully in an hibit.  Exhibit No. NA		
Excitation Series Shunt  Geographic coordinates to nearest second. For directional antenna give coordinates of center of array. For single vertical radiator give tower location.								
North Latitude 36	° 16 ' 1	9 "	West Longitud	<sup>de</sup> 86 ° 42	2 '	53 "		
If not fully described above, attach as an Exhibit further details and dimensions including any other antenna mounted on tower and associated isolation circuits.  Also, if necessary for a complete description, attach as an Exhibit a sketch of the details and dimensions of ground system.  Exhibit No. NA  Exhibit No. NA								
Permit? NA.  11. Give reasons for the	10. In what respect, if any, does the apparatus constructed differ from that described in the application for construction permit or in the permit?  NA.  11. Give reasons for the change in antenna or common point resistance.							
No change in licensed parameters. Filing to change to commercial status.  I certify that I represent the applicant in the capacity indicated below and that I have examined the foregoing statement of technical information and that it is true to the best of my knowledge and belief.								
Name (Please Print or T	-, ,	1	-	ck appropriate box below Digitally Obicore.	signed by Charles M.	Anderson p, ou, .com, c=US		
Address (include ZIP Code)  5900 Lake Cyrus Drive  Hoover, AL 35244  Telephone No. (Include Area Code) 270-535-4432								
Technical Director			Registered	d Professional Engine	er			
Chief Operator			/ Technical	Consultant				
Other (specify)								