



Pillsbury  
Winthrop  
Shaw  
Pittman LLP

2300 N Street, N.W.  
Washington, D.C. 20037-1128

Tel 202.663.8000  
Fax 202.663.8007  
[www.pillsburylaw.com](http://www.pillsburylaw.com)

**Kathryn R. Schmeltzer**  
202.663.8000  
[kathryn.schmeltzer@pillsburylaw.com](mailto:kathryn.schmeltzer@pillsburylaw.com)

June 30, 2005

Via Electronic Filing and Courier to  
Mellon Bank

Marlene H. Dortch  
Secretary  
Federal Communications Commission  
445 12<sup>th</sup> Street, S.W.  
Washington, DC 20554

**Re: Request for Waiver of the Replication/Maximization Interference  
Protection Deadline and for Special Temporary Authority (STA)  
WGME-DT, Portland, ME (FIN: 25683)  
MB Docket No. 03-15**

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Dear Ms. Dortch:

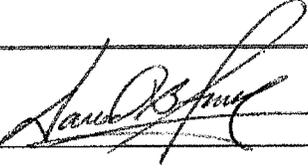
By this letter, WGME Licensee LLC, the permittee of WGME-DT, Portland, Maine ("WGME"), hereby requests, to the extent necessary, a temporary six-month extension and waiver of the July 1, 2005 replication/maximization interference protection deadline and an STA to operate at low power. *See* Public Notice, DA 05-1636 (June 15, 2005). The station completed construction of its full-power digital station and recently filed a license application seeking to cover its construction permit, File No. BLCDT-20050602ABZ. However, on June 24, 2005, WGME filed an application to modify its construction permit to specify a different antenna with a slightly different height above average terrain and with a different azimuth pattern than that stated in the construction permit. Following grant of the modification application, WGME will promptly amend its pending license application. Under such circumstances, WGME believes that it has complied with the replication/maximization interference protection deadline. *See* Public Notice, DA 05-1636, at 2 (June 15, 2005) ("[A] station subject to [the] deadline must either have a license for its operating facilities ... or by that date file with the Commission a license application or an application for modification to be followed shortly by a license application.").



**ANTI-DRUG ABUSE ACT CERTIFICATION**

The applicant certifies that, in the case of an individual applicant, he or she is not subject to a denial of federal benefits pursuant to section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. §862, or, in the case of a non-individual applicant (e.g. corporation, partnership or other unincorporated association), no party to the application is subject to a denial of federal benefits pursuant to that section. For the definition of a "party" for these purposes, see 47 C.F.R. §1.2002(b).

Yes                       No

<b>WGME Licensee, LLC</b> Name of Applicant	Signature 
Date <i>6/29/05</i>	<b>Secretary, Treasurer of Sole Member</b> Title

READ INSTRUCTIONS CAREFULLY  
BEFORE PROCEEDING

FEDERAL COMMUNICATIONS COMMISSION  
REMITTANCE ADVICE

Approved by OMB  
3060-0589  
Page: 1 of 1

(1) LOCK BOX # <b>358165</b>		SPECIAL USE ONLY	
		FCC USE ONLY	
<b>SECTION A - PAYER INFORMATION</b>			
(2) PAYER NAME (if paying by credit card enter name exactly as it appears on the card) <b>Sinclair Broadcast Group, Inc.</b>		(3) TOTAL AMOUNT PAID (U.S. Dollars and cents) <b>\$150.00</b>	
(4) STREET ADDRESS LINE NO. 1 <b>c/o Pillsbury Winthrop Shaw Pittman LLP</b>			
(5) STREET ADDRESS LINE NO. 2 <b>2300 N Street, N.W.</b>			
(6) CITY <b>Washington</b>		(7) STATE <b>DC</b>	(8) ZIP CODE <b>20037</b>
(9) DAYTIME TELEPHONE NUMBER (include area code) <b>202-663-8217</b>		(10) COUNTRY CODE (if not in U.S.A.)	
<b>FCC REGISTRATION NUMBER (FRN) REQUIRED</b>			
(11) PAYER (FRN) <b>0004331096</b>		(12) FCC USE ONLY	
IF MORE THAN ONE APPLICANT, USE CONTINUATION SHEETS (FORM 159-C) COMPLETE SECTION BELOW FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET			
(13) APPLICANT NAME <b>WGME Licensee LLC</b>			
(14) STREET ADDRESS LINE NO. 1 <b>c/o Pillsbury Winthrop Shaw Pittman LLP (Attn: K. Schmeltzer)</b>			
(15) STREET ADDRESS LINE NO. 2 <b>2300 N Street, N.W.</b>			
(16) CITY <b>Washington</b>		(17) STATE <b>DC</b>	(18) ZIP CODE <b>20037</b>
(19) DAYTIME TELEPHONE NUMBER (include area code) <b>202-663-8217</b>		(20) COUNTRY CODE (if not in U.S.A.)	
<b>FCC REGISTRATION NUMBER (FRN) REQUIRED</b>			
(21) APPLICANT (FRN) <b>0004970950</b>		(22) FCC USE ONLY	
COMPLETE SECTION C FOR EACH SERVICE, IF MORE BOXES ARE NEEDED, USE CONTINUATION SHEET			
(23A) CALL SIGN/OTHER ID <b>WGME-DT</b>	(24A) PAYMENT TYPE CODE <b>MGT</b>	(25A) QUANTITY <b>1</b>	
(26A) FEE DUE FOR (PTC) <b>\$150.00</b>	(27A) TOTAL FEE <b>\$150.00</b>	FCC USE ONLY	
(28A) FCC CODE 1 <b>25683</b>		(29A) FCC CODE 2	
(23B) CALL SIGN/OTHER ID	(24B) PAYMENT TYPE CODE	(25B) QUANTITY	
(26B) FEE DUE FOR (PTC)	(27B) TOTAL FEE	FCC USE ONLY	
(28B) FCC CODE 1		(29B) FCC CODE 2	
<b>SECTION D - CERTIFICATION</b>			
<b>CERTIFICATION STATEMENT</b> I, _____, certify under penalty of perjury that the foregoing and supporting information is true and correct to the best of my knowledge, information and belief. SIGNATURE _____ DATE _____			
<b>SECTION E - CREDIT CARD PAYMENT INFORMATION</b>			
MASTERCARD _____ VISA _____ AMEX _____ DISCOVER _____			
ACCOUNT NUMBER _____		EXPIRATION DATE _____	
I hereby authorize the FCC to charge my credit card for the service(s)/authorization herein described.			
SIGNATURE _____		DATE _____	

Sinclair Broadcast Group, Inc.  
10706 Beaver Dam Rd  
Cockeysville, MD 21030

**Wachovia Bank, N.A.**  
Silver Spring, Maryland 20900

65-7293  
2550

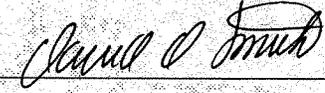
Check No. **115001024**

Pay One Hundred Fifty Dollars And 00 Cents\*\*\*\*\*

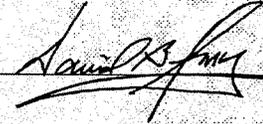
VENDOR NO.	DATE	AMOUNT
431	29-JUN-05	\$*****150.00

To  
The  
Order  
Of  
FCC  
WASHINGTON, DC

Authorized Signature



Authorized Signature



⑈ 115001024 ⑈ ⑆ 255072935⑆ 2079900105432⑈