



City of Peoria

APPLICATION AND AFFIDAVIT FOR UNIFORM VIDEO SERVICE LICENSE

(Pursuant to Title 9, chapter 13, Arizona Revised Statutes)

Local Government: City of Peoria

I. Applicant:

Date:			
Applicant's Name:			
Principal Place of Business:		Address:	
City:		State:	Zip:
Type of Entity:		Jurisdiction of Formation:	Email:

II. Applicant's principal executive officers or general partners:

Name:		Title:	
Address:			

Name:		Title:	
Address:			

Name:		Title:	
Address:			

Name:		Title:	
Address:			

III. Person(s) authorized to represent Applicant before City of Peoria:

Name:		Title:	
Address:			
Phone:	Fax:	Email:	

Name:		Title:	
Address:			
Phone:	Fax:	Email:	

IV. Check one pursuant to Arizona Revised Statutes Section 9-1411(C)(4):

- Applicant is an Incumbent Cable Operator as provided in Arizona Revised Statutes, Section 9-1401(13).
- Applicant is not an Incumbent Cable Operator. The date on which the Applicant expects to provide Video Services in the Service Area identified below under Section 9-1411(C)(5) is:

Date:

V. For All Applications:

A. Applicant will timely file with the Federal Communications Commission all forms required by that agency before Applicant offers Video Service in the Service Area, including the forms required by 47 Code of Federal Regulations Section 76.1801.

B. The term of the uniform video service license shall be (not to exceed ten years):

Years

C. Applicant agrees to pay all lawful fees and charges imposed by City of Peoria as provided in Arizona Revised Statutes, Section 9-1414(B)(4).

D. Applicant agrees to notify City of Peoria in writing of changes to the above information within thirty days after the change occurs as provided in Arizona Revised Statutes, Section 9-1414(B)(2).

E. Provide an exact description of the Service Area as set forth in Arizona Revised Statutes, Section 9-1411(C)(5), as identified by a geographic information system digital boundary meeting or exceeding national map accuracy standards. (Use attachment if more space is required.)

The Service Area consists of all the territory within the Boundaries of City of Peoria:
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Applicant Verification

I, _____, of lawful age, and being first duly sworn, now states: As an officer of Applicant, I am authorized to and do hereby make the above commitments. I further affirm that all statements made above are true and correct to the best of my knowledge and belief.

<i>Name and Title (printed):</i>	
<i>Signature:</i>	<i>Date:</i>

Local Government Receipt

The foregoing Application and Affidavit for Uniform Video Service License was received by City of Peoria this _____ day of _____, 20__; at _____.

City of Peoria, an Arizona municipal corporation (“Local Government”)

By

Print Name

Title

Address

City, State, Zip

Phone

Fax

Email

Date