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License Renewal Request Yes, we want EWA to electronically file the renewal for our license(s): Address: Telephone: _____Fax:______ Call Sign(s): Expiration Date(s): Authorized Signor: Contact if Different from Licensee: Email:_____Telephone:____ Please complete the following information: 1. The licensee's FCC Registration Number (FRN) is 2(a) The licensee's FCC Universal Licensing System (ULS) Password is ______ 2(b) The Licensee does not have a ULS Password. We request that EWA obtain one on the licensee's behalf and complete a password reset for the FRN shown above. Use the licensees Taxpayer Identification Number (TIN) to reset the password: Fee and payment: For information regarding EWA and FCC fees to file electronically, please see EWA's website at https://www.enterprisewireless.org/resources/schedule services. ☐ Enclosed is a check in the amount of \$_______ to cover all applicable fees. (Make check payable to EWA) \square Charge to: \square VISA \square MasterCard ☐ American Express Expiration Date: Credit Card Number: Name as it appears on Credit Card: Mailing Address: Authorized Signature:_____

Mail or e-mail the completed form and payment to the Emmitsburg, MD address above.