

FEDERAL COMMUNICATIONS COMMISSION WASHINGTON, DC 20554

CABLE COMMUNITY REGISTRATION FCC Form 322

Approval Date: April 2, 1984

MI0906

1. Indicate the name, mailing address, and telephone number of the cable system operator.

Legal Name	FCC Registration No. (FRN)			
CITY OF WYANDOTTE				
Assumed/ doing business as (dba) name CITY OF WYANDOTTE				
Mailing Address 3005 BIDDLE AVENUE	City WYANDOTTE	State MI	Zip Code 48192	
Telephone No.	Email (optional)			
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2. Indicate whether the operator is an individual, private association, partnership, corporation, or government entity.

Individual	Association	Partnership	1	Corporation
Government Entity	Limited Liability Corp.	Limited Partnership		Other

3. Indicate the name, telephone number, and e-mail address (if any) of the person responsible for questions regarding this form.

Name of Contact	Telephone No.	E-mail Address
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4. Indicate the Physical System Identifier (PSID) if the community will be served by an existing system 004262

5. Provide a date (MM/YYYY) when this community began service. __01/1983

6. Indicate the community name, county, state, and type code of the community from the list provided in the instructions.

Name of Community	County	State	Type Code
WYANDOTTE	WAYNE	MI	4

7. Indicate the local television broadcast signals (i.e. call signs) to be carried on this system.

CBET	CICOTV	WDIV	WGPRTV	WGTETV	WJBKTV	WKBDTV	WTBS	WTVS
WWOR	WXON	WXYZTV						

8. Certification

By signing below, the operator also certifies that neither the operator nor any other "party" to the notification is subject to a denial of federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. § 862. For the definition of a "party" for this purpose, see 47 C.F.R. § 1.2002(b).

Type or Print Name	Title
Signature	Date

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. § 1001) AND/OR REVOCATION OF ANY STATION LICENSE (47 U.S.C. § 312 (a) (1)), AND/OR FORFEITURE (47 U.S.C. § 503).