FCC 394

APPLICATION FOR FRANCHISE AUTHORITY CONSENT TO ASSIGNMENT OR TRANSFER OF CONTROL OF CABLE TELEVISION FRANCHISE

SE	CTION I. GENERAL INFORMA	TION		FOR FRAN	ICHISE AUTHORITY	USE ONLY
DATE	4/20/2012		1. Commun	ity Unit Ident	ification Number:	AZ0369
2. Ap	plication for: Assignment	of Franchise	X	Transfe	r of Control	
3. Franchising Authority: City of Maricopa, AZ						
Identify community where the system/franchise that is the subject of the assignment or transfer of control is located: Maricopa, AZ						
5 Da		stad by the transfe		40400	T	
	te system was acquired or (for system's constru- service was provided to the first subscriber in the	·	romassignor) the	date on	October 20	03
	oposed effective date of closing of the transaction m to transferee/assignee:	n assigning or tran	sferring ownershi	p of the	As soon as pr	acticable
					· · · · · · · · · · · · · · · · · · ·	
7. Att	ach as an Exhibit a schedule of any and all addit	ional information o	r material filed wi	th this		Exhibit No.
ap	olication that is identified in the franchise as requ	ired to be provided	I to the franchisin	g		1 1
aut	hority when requesting its approval of the type o	f transaction that is	the subject of th	is		
	offication.		•			
PAF	RT 1-TRANSFEROR/ASSIGNO	R				
1. Ind	icate the name, mailing address, and telephone	number of the tran	steror/assignor			
	name of Transferor/Assignor (if individual, list las					
Orbitel Holdings, LLC						
Assum	ned name used for doing business (if any)					
Moduli	led hame used for doing business (it any)					
Moiline	atrock address as D.O. Day			·		
Mailing street address or P.O. Box						
A14	21116 N. John Wayne Pa	· · · · · · · · · · · · · · · · · · ·				
City	B. W	State	ZIP Code		No. (include area cod	le)
	Maricopa	AZ	85239	(520) 56	38-88 <u>90</u>	
2,(a)	Affect on an Euclidia a convertible contract on		udalah dan dika sasa			F (11) 11
2.(a)	Attach as an Exhibit a copy of the contract or					Exhibit No.
transfer of control (including any exhibits or schedules thereto necessary in order to understand the						
terms thereof). If there is only an oral agreement, reduce the terms to writing and attach.						
(Confidential trade, business, pricing or marketing information, or other information not otherwise						
	publicly available, may be redacted).					
						·
(b) Does the contract submitted in response to (a) above embody the full and complete agreement Yes X No					Yes X No	
between the transferor/assignor and the transferee/assignee?						
	If No, explain in an Exhibit.					Exhibit No.
						See Exhibit 2
						GOO LAMBUR 2

PART II - TRANSFEREE/ASSIGNEE

1.(a) Indicate the name, mailing address, a			feree/assignee.			
Legal name of Transferee/Assignee (if individual, list last name first)						
Schurz Communications, Inc.						
Assumed name used for doing business (if any)						
Assumed hattle used for doing business (if a	zi iy)					
Mailing street address or P.O. Box	 					
1301 E. Douglas Rd						
City	State	ZIP Code	Telephone No. (include area o	ode)		
Mishawaka	IN	45645	574-247-7237	,		
1	1	····				
(b) Indicate the name, mailing address, ar	nd telephone n	umber of person to	contact, if other than transferee/a	issignee.		
Name of contact person (list last name first)						
Pring A. Lunch						
Brian A. Lynch				······································		
Firm or company name (if any)						
Schurz Communications, In Mailing street address or P.O. Box	<u>C.</u>					
1301 E. Douglas Rd						
City	State	ZIP Code	Telephone No. (include area o	ohe)		
		240-420-2068	Jouon			
1770-700-700-700-700-700-700-700-700-700		10010	1 10 120 2000	······································		
(c) Attach as an Exhibit the name, mailing	address, and t	elephone number o	f each additional person who	Exhibit No.		
should be contacted, if any.			,,, p	N/A		
oriodia do obritadood; il diliyi						
(d) Indicate the address where the system'	s records will t	ne maintained.				
Street address						
21116 N. John Wayne Parkway Suite B-9						
City	State		ZIP Code			
Maricopa	AZ		85239			
2. Indicate on an attached exhibit any plans	to change the	current terms and	conditions of service and	Exhibit No.		
operations of the system as a consequer	ice of the trans	saction for which ap	proval is sought.	3		

SECTION II. TRANSFEREE'S/ASSIGNEE'S LEGAL QUALIFICATIONS

1,	Trans	feree/Assignee is:					
[X	Corporation	a. Jurisdiction of b. Date of incorpo c. For profit or no	Indiana oration: July 3, 1873	d. Name and a	ddress of registered agent in Todd F. Schurz 1301 E. Douglas Rd. Mishawaka, IN 46545	
[Limited Partnership	a. Jurisdiction in		c. Name and ad lurisdiction	ddress of registered agent in	
			b. Date of formati	ion:			
		General Partnership	a. Jurisdiction wh	ose laws govern formation;	b. Date of form	ation:	
		Individual					
	Other. Describe in an Exhibit.						
 List the transferee/assignee, and, if the transferee/assignee is not a natural person, each of its officers, directors, stockholders beneficially holding more than 5% of the outstanding voting shares, general partners, and limited partners holding an equity interest of more than 5%. Use only one column for each individual or entity. Attach additional pages if necessary. (Read carefully - the lettered items below refer to corresponding lines in the following table.) (a) Name, residence, occupation or principal business, and principal place of business. (If other than an individual, also show name, address and citizenship of natural person authorized to vote the voting securities of the applicant that it holds.) List the applicant first, officers, next, then directors and, thereafter, remaining stockholders and/or partners. (b) Citizenship. (c) Relationship to the transferee/assignee (e.g., officer, director, etc.). 							
((d) Number of shares or nature of partnership interest.						
(e) Number of votes. (f) Percentage of votes.							
(a)	Se	e Exhibit 4	·				
(b)							
(c)					****		
(d)							
(e)					·····		
(f)							

3.	If the applicant is a corporation or a limited partnership, is the transferee/assignee formed under the laws of, or duly qualified to transact business in, the State or other jurisdiction in which the system operates?	Yes X No			
	If the answer is No, explain in an Exhibit.	Exhibit No. 5			
4.	Has the transferee/assignee had any Interest in or in connection with an applicant which has been dismissed or denied by any franchise authority?	Yes X No			
	If the answer is Yes, describe circumstances in an Exhibit.	Exhibit No.			
5.	Has an adverse finding been made or an adverse final action been taken by any court or administrative body with respect to the transferee/assignee in a civil, criminal or administrative proceeding, brought under the provisions of any law or regulation related to the following: any felony; revocation, suspension or involuntary transfer of any authorization (including cable franchises) to provide video programming services; mass media related antitrust or unfair competition; fraudulent statements to another government unit; or employment discrimination?	Yes X No			
	If the answer is Yes, attach as an Exhibit a full description of the persons and matter(s) involved, including an identification of any court or administrative body and any proceeding (by dates and file numbers, if applicable), and the disposition of such proceeding.	Exhibit No.			
6.	Are there any documents, instruments, contracts or understandings relating to ownership or future ownership rights with respect to any attributable interest as described in Question 2 (including, but not limited to, non-voting stock interests, beneficial stock ownership interests, options, warrants, debentures)?	Yes X No			
	If Yes, provide particulars in an Exhibit.				
7.	7. Do documents, instruments, agreements or understandings for the pledge of stock of the transferee/assignee, as security for loans or contractual performance, provide that: (a) voting rights will remain with the applicant, even in the event of default on the obligation; (b) in the event of default, there will be either a private or public sale of the stock; and (c) prior to the exercise of any ownership rights by a purchaser at a sale described in (b), any prior consent of the FCC and/or of the franchising authority, if required pursuant to federal, state or local law or pursuant to the terms of the franchise agreement will be obtained?				
•	If No, attach as an Exhibit a full explanation.	Exhibit No.			
SECT	ION III. TRANSFEREE'S/ASSIGNEE'S FINANCIAL QUALIFICATIONS				
1,	The transferee/assignee certifies that it has sufficient net liquid assets on hand or available from committed resources to consummate the transaction and operate the facilities for three months.	X Yes No			
2.	Exhibit No. 6				
SECT	ION IV. TRANSFEREE'S/ASSIGNEE'S TECHNICAL QUALIFICATIONS				
and ex approp transfe	th in an Exhibit a narrative account of the transferee's/assignee's technical qualifications, experience pertise regarding cable television systems, including, but not limited to, summary information about riate management personnel that will be involved in the system's management and operations. The ree/assignee may, but need not, list a representative sample of cable systems currently or formerly or operated.	Exhibit No. 7			

SECTION V - CERTIFICATIONS

Part I - Transferor/Assignor

All the statements made in the application and attached exhibits are considered material representations, and all the Exhibits are a material part hereof and are incorporated herein as if set out in full in the application.

I CERTIFY that the statements in this application are true, complete and correct to the best of my knowledge and belief and are made in good faith.	Signature Circle Culca		
WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT. U.S. CODE, TITLE 18, SECTION 1001.	Print full name Keith A. Kirkman		
Check appropriate classification: Individual General Partner	X Corporate Officer Other. Explain: President/Chief Executive Offficer		

Part II - Transferee/Assignee

All the statements made in the application and attached Exhibits are considered material representations, and all the Exhibits are a material part hereof and are incorporated herein as if set out in full in the application.

The transferee/assignee certifies that he/she:

- (a) Has a current copy of the FCC's Rules governing cable television systems.
- (b) Has a current copy of the franchise that is the subject of this application, and of any applicable state laws or local ordinances and related regulations.
- (c) Will use its best efforts to comply with the terms of the franchise and applicable state laws or local ordinances and related regulations, and to effect changes, as promptly as practicable, in the operation system, if any changes are necessary to cure any violations thereof or defaults thereunder presently in effect or ongoing.

I CERTIFY that the statements in this application are true, complete and correct to the best of my knowledge and belief and are made in good faith.	Signature John July		
WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT. U.S. CODE, TITLE 18, SECTION 1001.	Date 4/20/2012 Print full name Todd F. Schurz		
Check appropriate classification; Individual General Partner	X Corporate Officer Other. Explain;		