

Date & Time Filed: Aug 19 2021 8:42:31:396AM

File Number: SAT-STA-20210819-00106

Callsign:

FEDERAL COMMUNICATIONS COMMISSION
APPLICATION FOR SPACE STATION SPECIAL TEMPORARY AUTHORITY

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APPLICANT INFORMATION

Enter a description of this application to identify it on the main menu:

YAM-3 STA Request for Receiving Transmissions

1. Applicant

Name:	Loft Orbital Solutions Inc.	Phone Number:	410-382-5050
DBA Name:		Fax Number:	
Street:	715 Bryant Street Suite 202	E-Mail:	alex@loftorbital.com
City:	San Francisco	State:	CA
Country:	USA	Zipcode:	94107 -
Attention:	Alex Greenberg		

2. Contact	
Name: Tony Lin	Phone Number: 202-799-4450
Company: DLA Piper LLP (US)	Fax Number:
Street: 500 Eighth Street, N.W.	E-Mail: tony.lin@us.dlapiper.com
City: Washington	State: DC
Country: USA	Zipcode: 20004 -
Attention:	Relationship: Legal Counsel
(If your application is related to an application filed with the Commission, enter either the file number or the IB Submission ID of the related application. Please enter only one.)	
3. Reference File Number SATLOA2020090700105 or Submission ID	
4a. Is a fee submitted with this application?	
<input checked="" type="radio"/> If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114).	
<input type="radio"/> Governmental Entity <input type="radio"/> Noncommercial educational licensee	
<input type="radio"/> Other (please explain):	
4b. Fee Classification CXW – Space Station (Non-Geostationary)	
5. Type Request	
<input type="radio"/> Change Station Location <input type="radio"/> Extend Expiration Date <input checked="" type="radio"/> Other	
6. Temporary Orbit Location	7. Requested Extended Expiration Date

8. Description (If the complete description does not appear in this box, please go to the end of the form to view it in its entirety.)

Loft Orbital Solutions Inc. requests special temporary authorization for a six-month period to receive transmissions in the 920-924 MHz band on its licensed space station YAM-3 from two Internet-of-Things devices, as discussed in the attached narrative.

9. By checking Yes, the undersigned certifies that neither applicant nor any other party to the application is subject to a denial of Federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti-Drug Act of 1988, 21 U.S.C. Section 862, because of a conviction for possession or distribution of a controlled substance. See 47 CFR 1.2002(b) for the meaning of "party to the application"; for these purposes. Yes No

10. Name of Person Signing
Alex Greenberg

11. Title of Person Signing
Chief Operating Officer

12. Please supply any need attachments.

Attachment 1: Narrative

Attachment 2:

Attachment 3:

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

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