FORM 312–R APPLICATION FOR RENEWAL OF RADIO LICENSE IN SPECIFIED SERVICES FOR OFFICIAL USE ONLY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: KU_12_K_Renewal

1. Applicant

Name: Pacific Satellite Connection, Inc. **Phone Number:** 916–446–7890

DBA Name: Fax Number: 916–446–7893

Street: 1629 S Street E–Mail: karen@pacsat.com

City: Sacramento State: CA

Country: USA Zipcode: 95814 -

Attention: Karen Ross

2. Contact					
Name:	Pacific Satellite Connection, Inc.	Phone Num	nber: 916–446–7890		
Company:		Fax Numbe	er: 916–446–7893		
Street:	1629 S Street	E–Mail:	karen@pacsat.com		
City:	Sacramento	State:	CA		
Country:	USA	Zipcode:	95814 –		
Attention:	Karen Ross	Relationshi	p: Other		
4. Is a fee submitted witIf Yes, complete andGovernmental EntitOther(please explain	d attach FCC Form 159. If No, in y Noncommercial education		n for fee exemption (see 47 C.F.R.Section 1.1114).		
O other (preuse explain					
5. Application is for ren existing license as speci	•	y with the			
(a)File Number SESLIC19970721009	966	(t	(b)Date Issued 1997–09–26 00:00:00.0		
(c)Call Sign E970388		(0	(d)Location Various		
(e)Nature of Service SNG transmissions		(f	(f)Class of Station Fixed Satellite Transmit/Receive Earth Station (CGX)		

(g)Expiration Date 2007–09–26 00:00:00.0	Petition to reinstate:				
6. Note any changes such as discontinuance of use of a frequency, or of a application covering this station was filed: N/A	a type of emission or of a transmitter which have	e been made sin	nce the last		
Items 7(a) and (b) apply to Part 21 licenses only.					
7(a) Has there been removal of equipment or alteration of facilities as to render the Station not operational?					
		•	No		
		0	N/A		
If YES when:					
(b) If this is a Multipoint Distribution Service (MDS) station, is there a continuous co	Yes				
with, or leasing arrangement with a cable television company?		No			
	ŏ	N/A			
8. Applicant represents that there has been no change in applicant's orga applicant's relation to the station, or financial responsibility; that application identified below, is to be considered as a part of this application, and the here any further exceptions, not already covered in question 6 or 7. File Number SESLIC1997072100966 Date 09/07/2007	ants most recent application or report embodying	g this information	on, as		

9. Would a Commission grant of this application come within 47 CFR 1.1307, such that it may have a significant environmental impact? If YES, attach as an Exhibit an Environmental Assessment required by 47 CFR 1.1311:	○ ◎ ○	Yes No N/A		
If NO, Explain briefly why not: This is an uplink flyaway— Does not stay long in the same place.				
10. Certification: The applicant certifies that, in the case of an individual applicant, he or she is not subject to a denial of federal benefits pursuant to section 5301 of Anti–Drug Abuse Act of 1988, 21 U.S.C. 853a, or, in the case of a nonindividual applicant (e. g., corporation, partnership or other unincorporated association), no party to the application is subject to denial of federal benefits pusuant to that section. For the definition of a "party" for these purposes, see 47 CFR 1.2002(b).	0	Yes No		
a. Applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and requests a station license in accordance with this application. Applicant acknowledges that all attached exhibits are a material part hereof. b. The undersigned, individually and for the applicant, hereby certifies that the statements made in this application are true, complete and correct to the best of the signer's knowledge and belief, and are made in good faith.				
11. Designate Appropriate Classification:				
O Individual				
O Unincorporated Association				
O Partnership				
Corporation				
• Governmental Entity				
Other (please specify)				

12. Please supply any need attachments.

1:	2:		3:				
CERTIFICATION							
13. Typed Name of Person Signing Eddie Maalouf		14. Title of Person Signing Engineer					
WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND / ORIMPRISONMENT (U.S. Code, Title 18, Section1001), AND/OR REVOCATION OF ANY STATIONAUTHORIZATION (U.S. Code, Title 47, Section312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503).							

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