APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: Request for Special Temporary Authority to Operate a Vsat Network

1. Applicant			
Name:	NEXTEL COMMUNICATIONS OF THE MID-ATLANTIC INC	Phone Number:	703–433–4000
DBA Name:		Fax Number:	703–433–4035
Street:	2001 EDMUND HALLEY DRIVE	E–Mail:	
City:	RESTON	State:	VA
Country:	USA	Zipcode:	20191 –
Attention:			

	2. Contact						
Nar	ne: I	Robin Cohen	Phone Number:	703–433–4000			
Cor	1 2	Nextel Communications of the Mid–Atlantic, Inc.	Fax Number:	703–433–4035			
Stre	eet: 2	2001 Edmund Halley Drive	E–Mail:	robin.cohen@nextel.com			
		_	a				
City	/:	Reston	State:	VA			
Cou	intry: U	USA	Zipcode:	20191 –			
		Manager, Regulatory	Relationship:	Other			
Titl	e:						
3. Reference Fi	le Number	SESLIC2004040600514					
		vith this application?					
1 =	If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).						
Governmen	ntal Entity	• Governmental Entity • Noncommercial educational licensee					
• Other(please explain):							
Other(pica	se explain).						
		GV – Fixed Satellite VSAT System	m				
	cation CC		m				
4b. Fee Classifi	cation CC		m				
4b. Fee Classifi	cation CC	GV – Fixed Satellite VSAT System	m e Station Location	Other			
4b. Fee Classifi 5. Type Reques	cation CC	GV – Fixed Satellite VSAT System		• Other			
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9. State VA	10. Longitude (dd mm ss.s h) 77 12 49.0 W				
11. Please supply any need attachments.					
Attachment 1: Exhibit A Attachment 2:	Attachment 3:				
12. Description. (If the complete description does not appear in this be	ox, please go to the end of the form to view it in its entirety.)				
See Request for a Special Temporary Authority (Exhibit A) 13. 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 Yes No					
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.					
14. Name of Person Signing Ray M. Rothermel Jr.	15. Title of Person Signing Counsel–Regulatory				
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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