

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:  
10/2004 Extension of E990402 STA

**1. Applicant**

<b>Name:</b>	Globecomm Systems, Inc.	<b>Phone Number:</b>	516-231-9800 x1191
<b>DBA Name:</b>		<b>Fax Number:</b>	631-457-1279
<b>Street:</b>	45 Oser Avenue	<b>E-Mail:</b>	GJohnstonSr@globecommsystems .c
<b>City:</b>	Hauppauge	<b>State:</b>	NY
<b>Country:</b>	USA	<b>Zipcode:</b>	11788 -3816
<b>Attention:</b>	Gerald Johnston, Sr.		

**2. Contact**

<b>Name:</b>	Michelle A. McClure	<b>Phone Number:</b>	202-728-0400
<b>Company:</b>	Irwin, Campbell & Tannenwald, P. C.	<b>Fax Number:</b>	202-728-0354
<b>Street:</b>	1730 Rhode Island Ave., N.W. Suite 200	<b>E-Mail:</b>	mmcclure@ictpc.com
<b>City:</b>	Washington	<b>State:</b>	DC
<b>Country:</b>	USA	<b>Zipcode:</b>	20036 -3101
<b>Contact Title:</b>		<b>Relationship:</b>	Legal Counsel

3. Reference File Number SESMOD2000042000658

4a. Is a fee submitted with this application?

- If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).  
 Governmental Entity     Noncommercial educational licensee  
 Other(please explain):

4b. Fee Classification CGX – Fixed Satellite Transmit/Receive Earth Station

5. Type Request

- Use Prior to Grant                       Change Station Location                       Other

6. Requested Use Prior Date  
10/10/2004

7. CityHauppauge

8. Latitude  
(dd mm ss.s h) 40 48 54.1 N

9. State NY	10. Longitude (dd mm ss.s h) 73 14 17.8 W
11. Please supply any need attachments. Attachment 1: Public Interest                      Attachment 2:                      Attachment 3:	
12. 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.) <div style="border: 1px solid black; padding: 5px; margin: 5px 0;">See Attachment 1</div>	
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 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. <input checked="" type="radio"/> Yes <input type="radio"/> No	
14. Name of Person Signing Kenneth Miller	15. Title of Person Signing President
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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