

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:  
Hawaii Pacific Teleport STA to Communicate with Telstar 18 (E010016)

**1. Applicant**

<b>Name:</b>	Hawaii Pacific Teleport, L.P.	<b>Phone Number:</b>	808-674-9157
<b>DBA Name:</b>		<b>Fax Number:</b>	808-674-1826
<b>Street:</b>	91-340 Farrington Highway	<b>E-Mail:</b>	
<b>City:</b>	Kapolei	<b>State:</b>	HI
<b>Country:</b>	USA	<b>Zipcode:</b>	96707 -
<b>Attention:</b>	Mr .Vincent Waterson		

**2. Contact**

<b>Name:</b>	Frank R. Jazzo	<b>Phone Number:</b>	703-812-0400
<b>Company:</b>	Fletcher, Heald & Hildreth, PLC	<b>Fax Number:</b>	703-812-0486
<b>Street:</b>	1300 N. 17th Street 11th Floor	<b>E-Mail:</b>	jazzo@fhhlaw.com
<b>City:</b>	Arlington	<b>State:</b>	VA
<b>Country:</b>	USA	<b>Zipcode:</b>	22209 -
<b>Contact Title:</b>	Member	<b>Relationship:</b>	Legal Counsel

3. Reference File Number SESMOD2004092401425

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  
12/01/2004

7. City Kapolei

8. Latitude  
(dd mm ss.s h) 21 20 8.0 N

9. State HI	10. Longitude (dd mm ss.s h) 158 5 25.0 W
11. Please supply any need attachments. Attachment 1: Letter                      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;">The applicant seeks Commission consent to add Telstar 18/Apstar V as a point of communication for existing licensed vertex 11.0 meter antenna (E010016) at Kapolei, Hawaii.</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 Vincent Waterson	15. Title of Person Signing VP Business Development
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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