APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: May 2005 Extension of #020003 STA

Name:	Globecomm Systems, Inc.	Phone Number:	631–231–9800 x1
DBA Name	:	Fax Number:	631–231–1557
Street:	45 Oser Avenue	E–Mail:	GJohnstonSr@globecommsystems .c
City:	Hauppauge	State:	NY
Country:	USA	Zipcode:	11788 -3816
Attention:	Mr. Gerry Johnston, Sr.		

2. Contact							
Name:	Michelle A. McClure	Phone Number:	202-728-0400				
Company:	Irwin, Campbell & Tannenwald, P. C.	Fax Number:	202-728-0354				
Street:	1730 Rhode Island Ave., N.W.	E–Mail:	mmcclure@ictpc.com				
	Suite 200						
City:	Washington	State:	DC				
Country:	USA	Zipcode:	20036 -3101				
Attention:		Relationship:	Legal Counsel				
3. Reference File Number SESMOD2004110401646							
	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).							
O Governmental Entity O Noncommercial educational licensee							
• Other(please explain):							
4b. Fee Classification CGX – Fixed Satellite Transmit/Receive Earth Station							
5. Type Request							
Use Prior to Grant O Change Station Location O Other							
6. Requested Use Prior 05/14/2005	Date						
7. CityHauppauge		8. Lati					
		(dd mr	n ss.s h) 40 48 55.3 N				

9. State NY	10. Longitude (dd mm ss.s h) 73 14 17.3 W						
11. Please supply any need attachments.							
Attachment 1: Public Interest Attachment 2: SPAWA	R Letter 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.)							
Please see Public Interest Attachments 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.							
14. Name of Person Signing	15. Title of Person Signing						
Kenneth A. Miller	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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