

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:  
STA Request for Flushing, NY USTA Tennis Tournament – Ku-Band

**1. Applicant**

<b>Name:</b>	BT Americas Inc.	<b>Phone Number:</b>	703-755-6733
<b>DBA Name:</b>		<b>Fax Number:</b>	703-755-6740
<b>Street:</b>	11440 Commerce Park Drive Suite 5041	<b>E-Mail:</b>	linda.cicco@bt.com
<b>City:</b>	Reston	<b>State:</b>	VA
<b>Country:</b>	USA	<b>Zipcode:</b>	20191 –
<b>Attention:</b>	Ms Linda J Cicco		

<b>2. Contact</b>	
<b>Name:</b> Linda J. Cicco	<b>Phone Number:</b> 703-755-6733
<b>Company:</b> BT Americas Inc.	<b>Fax Number:</b> 703-755-6740
<b>Street:</b> 11440 Commerce Park Drive Suite 5041	<b>E-Mail:</b> linda.cicco@bt.com
<b>City:</b> Reston	<b>State:</b> VA
<b>Country:</b> USA	<b>Zipcode:</b> 20191 -
<b>Attention:</b> Regulatory Compliance Manager	<b>Relationship:</b> Other
<b>3. Reference File Number</b>	
4a. Is a fee submitted with this application?	
<input checked="" type="radio"/> If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114). <input type="radio"/> Governmental Entity <input type="radio"/> Noncommercial educational licensee <input type="radio"/> Other (please explain):	
4b. Fee Classification    CGX – Fixed Satellite Transmit/Receive Earth Station	
<b>5. Type Request</b>	
<input type="radio"/> Use Prior to Grant <input type="radio"/> Change Station Location <input checked="" type="radio"/> Other	
6. Requested Use Prior Date 08/28/2005	
7. City Flushing	8. Latitude (dd mm ss.s h) 40 45 0.3 N

9. State NY	10. Longitude (dd mm ss.s h) 73 51 6.2 W
11. Please supply any need attachments. Attachment 1: Exhibit A                      Attachment 2: Exhibit B                      Attachment 3: Exhibit C	
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: 10px 0;">STA request for the operation of two 1.5 meter and two 1.9 meter Ku-band transportable earth stations to cover the USTA tennis tournament in Flushing, New York from August 28 through September 15, 2005.</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 Linda J. Cicco	15. Title of Person Signing Regulatory Compliance Manager
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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