APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: Manson, Washington STA Request

1. Applicant

Name: Westgate Communications LLC **Phone Number:** 509–682–5556

DBA Name: Fax Number: 509–682–5558

Street: P.O. BOX 1903 E-Mail: rick.weaver@westgatecomm.com

City: Brewster State: WA

Country: USA **Zipcode:** 98812 –1903

Attention: Mr Richard J Weaver

2. Contact						
Naı	me:	Richard D. Rubino	Phone Nur	nber:	202-659-0830	
Con	mpany:	Blooston, Mordkofsky, Dickens, Duffy & Prendergast	Fax Numb	er:	202-828-5568	
Str	eet:	2120 L Street, N.W., Suite 300	E–Mail:		rdr@bloostonlaw.com	
Cit	y:	Washington	State:		DC	
Coi	untry:	USA	Zipcode:		20037 –	
Att	ention:		Relationsh	ip:	Legal Counsel	
 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 Reques	st					
Use Prior to Grant Change Station Location Other						
6. Requested U 09/01/20		ate				
7. CityManson				8. Latitude (dd mm ss.s h) 47 53 30.0 N		

9. State WA	10. Longitude (dd mm ss.s h) 120 9 24.0 W						
11. Please supply any need attachments.							
Attachment 1: STA Request Attachment 2: PCN and Supp Showing Attachment 3: Radiation Hazard Re							
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.) NULL 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 Dancer Circuits	15 Title of Degree Circuits						
14. Name of Person Signing Richard J. Weaver	15. Title of Person Signing Manager/Member						
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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