

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:  
Request for STA for Experimental and Demo Purposes of a Ku-Band Mobile Satellite Earth Station

**1. Applicant**

<b>Name:</b>	VSL Networks, Inc.	<b>Phone Number:</b>	775-851-8282
<b>DBA Name:</b>		<b>Fax Number:</b>	775-851-8277
<b>Street:</b>	555 Double Eagle Court Suite 2000	<b>E-Mail:</b>	jdebeer@vslnetworks.com
<b>City:</b>	Reno	<b>State:</b>	NV
<b>Country:</b>	USA	<b>Zipcode:</b>	89521 -
<b>Attention:</b>	Mr Jacobus F de Beer		

**2. Contact**

<b>Name:</b>	VSL Networks, Inc.	<b>Phone Number:</b>	775-851-8282 x1009
<b>Company:</b>		<b>Fax Number:</b>	775-851-8277
<b>Street:</b>	555 Double Eagle Court Suite 2000	<b>E-Mail:</b>	jdebeer@vslnetworks.com
<b>City:</b>	Reno	<b>State:</b>	NV
<b>Country:</b>	USA	<b>Zipcode:</b>	89521 -
<b>Attention:</b>	Mr Jacobus F de Beer	<b>Relationship:</b>	

(If your application is related to an application filed with the Commission, enter either the file number or the IB Submission ID of the related application. Please enter only one.)

3. Reference File Number or Submission ID

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    CGB – Mobile Satellite Earth Stations

5. Type Request

- Use Prior to Grant                       Change Station Location                       Other

6. Requested Use Prior Date

7. City Hagerstown

8. Latitude  
(dd mm ss.s h) 39 25 6.9 N

9. State MD	10. Longitude (dd mm ss.s h) 77 30 14.2 W
11. Please supply any need attachments. Attachment 1: STA Request                      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: 10px 0;">Request for Special Temporary Authority for Experimental and Demonstration Purposes of a Ku-Band Mobile Satellite Earth Station</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 Jacobus de Beer	15. Title of Person Signing Project 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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