APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: STA BHUTAN DECEMBER 23, 2005

1.	Ap	pli	cant	t
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Name: Loral Skynet Network Services, **Phone Number:** 908–470–2342

Inc.

DBA Name: Fax Number: 908–470–2453

Street: 500 Hills Drive E–Mail: se@loralskynet.com

PO Box 7018

City: Bedminster State: NJ

Country: USA **Zipcode:** 07921 -7018

Attention: Mr Stanley Edinger

2. Contact						
Name:	Loral Skynet Network Services, Inc.	Phone Number:	908-470-2342			
Compan	y: LORAL SKYNET	Fax Number:	908-470-2453			
Street:	500 Hills Drive	E–Mail:	se@loralskynet.com			
	PO Box 7018					
City:	Bedminster	State:	NJ			
Country	: USA	Zipcode:	07921 -7018			
Attention	n: Mr Stanley Edinger	Relationship:	Same			
(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 SESMFS2005083101198 or Submission ID						
If Yes, complete	and attach FCC Form 159. If No, incentity Noncommercial educational plain):		n (see 47 C.F.R.Section 1.1114).			
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 01/10/2006						

7. CityKAPOLEI	8. Latitude (dd mm ss.s h) 21 20 12.6 N				
9. State HI	10. Longitude (dd mm ss.s h) 158 5 21.1 W				
11. Please supply any need attachments.					
Attachment 1: A Attachment 2: B	Attachment 3: 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.)					
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 STANLEY EDINGER	15. Title of Person Signing MANAGER, GOVERNMENT RELATIONS				
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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