

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:

E060078

1. Applicant

Name:	Datapath, Inc	Phone Number:	678-597-0300 x611
DBA Name:		Fax Number:	678-597-0305
Street:	2450 Satellite Blvd	E-Mail:	mbeattie@datapath.com
City:	Duluth	State:	GA
Country:	USA	Zipcode:	30096 -5801
Attention:	Mr Michael J Beattie		

2. Contact

Name:	Mr Michael J Beattie	Phone Number:	678-597-0300
Company:	Datapath, Inc.	Fax Number:	678-597-0305
Street:	2450 Satellite Blvd	E-Mail:	mbeattie@datapath.com
City:	Duluth	State:	GA
Country:	USA	Zipcode:	30096 -5801
Attention:	Mr Michael J Beattie	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 SESLIC2006030500351 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 CGX – Fixed Satellite Transmit/Receive Earth Station

5. Type Request

- Use Prior to Grant Change Station Location Other

6. Requested Use Prior Date

7. City Duluth

8. Latitude
(dd mm ss.s h) 33 58 22.6 N

9. State GA	10. Longitude (dd mm ss.s h) 84 5 31.6 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.) <div style="border: 1px solid black; padding: 5px; margin: 5px 0;">See Attachments</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 James Smith	15. Title of Person Signing Manager Engineering
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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