APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

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

1. Applicant

Name: BT Americas Inc. **Phone Number:** 703–755–6733

DBA Name: Fax Number: 703–755–6740

Street: 11440 Commerce Park Drive E–Mail: linda.cicco@bt.com

City: Reston State: VA

Country: USA Zipcode: 20191 -

Attention: Ms Linda J Cicco

2. Contact					
I	Name:	Linda J. Cicco	Phone Numl	ber: 703 755 6733	
•	Company:	BT Americas Inc.	Fax Number	r: 703 755– 6740	
\$	Street:	11440 Commerce Park Drive	E-Mail:	linda.cicco@bt.com	
		Suite 5041			
•	City:	Reston	State:	VA	
•	Country:	USA	Zipcode:	20191 –	
1	Attention:	Regulatory Compliance Manager	Relationship	Other	
4a. Is a f If Yes, o	fee submitted complete and	with this application? attach FCC Form 159. If No, indi Noncommercial educational		fee exemption (see 47 C.F.R.Section 1.1114).	
4b. Fee Class	ssification (CGX – Fixed Satellite Transmit/Rec	eive Earth Stat	ion	
5. Type Request Use Prior to Grant Change Station Location Other					
•	ed Use Prior D 0/2006	Date			
7. CityFlush	hing		I	Latitude d 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: 312sBT1.9ku_1.doc Attachment 2: BT1.9ra	dhaz.doc 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.)					
STA request for operation of a two 1.5 meter and two 1.9 meter KU band transportable earth stations to cover the USTA tennis tournament in Flushing, NY from August 20 thru September 15, 2006. Separate requests being filed for each antenna.					
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 Linda J . Cicco	15. Title of Person Signing Reg 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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