## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: Iridium Carrier STA (8/06)

Name:	Iridium Carrier Services LLC	Phone Number:	301-571-6200
<b>DBA Name:</b>		Fax Number:	301-571-6250
Street:	6701 Democracy Blvd.	E-Mail:	olga.madruga-forti@iridium.com
	Suite 500		
City:	Bethesda	State:	MD
<b>Country:</b>	USA	Zipcode:	20817 –
Attention:	Ms Olga Madruga–Forti		

2. Contact						
Name:	Jennifer D. Hindin	Phone Number:	202−719−7000			
Compa	<b>my:</b> Wiley Rein & Fielding	Fax Number:	202−719−7207			
Street:	1776 K Street, NW	E–Mail:	jhindin@wrf.com			
City:	Washington	State:	DC			
Count	C	Zipcode:	20006 -			
Attent	-	Relationship:	Legal Counsel			
application. Please		ed with the Commission, enter eith	her the file number or the IB Submission ID of the related			
If Yes, comple	Entity O Noncommercial e		mption (see 47 C.F.R.Section 1.1114).			
4b. Fee Classification CGB – Mobile Satellite Earth Stations						
5. Type Request						
Use Prior to Grant Change Station Location Other						
6. Requested Use 2 08/28/2006	Prior Date					
7. City		8. Latitude (dd mm ss.				

9. State	10. Longitude (dd mm ss.s h) 0 0 0.0					
11. Please supply any need attachments.						
Attachment 1: Attachment 1Attachment 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.)						
See Attachment 1     12 By sheeking Yes, the undersigned certifies that neither applicant ner any other party to the application is						
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	15. Title of Person Signing					
Olga Madruga–Forti	Vice President – Regulatory & Legal					
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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