APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

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

V-Sat terminat STA (Seattle, WA)

1. Applicant

Name: The Boeing Company

Phone Number:

866-248-1493

DBA Name:

Fax Number:

206-544-6592

Street:

Attn

E-Mail:

bob.douglass@boeing.com

PO Box 3707

City:

Seattle

State:

WA

Country:

USA

Zipcode:

98124

-2207

Attention:

Mr Robert B Douglass

2. Contact					
Name:	Frequency Management Services	Phone Number:	206–54	4–5512	
Company:	The Boeing Company	Fax Number:	206-54	4–6592	
Street:	Attn	E–Mail:	john.p.j	ohnston2@boeing.com	
	PO Box 3707				
City:	Seattle	State:	WA		
Country:	USA	Zipcode:	98124	-2207	
Attention:	JJ Johnston	Relationship:	Same		
4a. Is a fee submitted If Yes, complete and Governmental Entity Other(please explain	with this application? I attach FCC Form 159. If No, indi y Noncommercial educational n):	cate reason for fee e licensee	xemption (see 47 C.F.R.S	ection 1.1114).	
4b. Fee Classification	CGB – Mobile Satellite Earth Statio	ns			
5. Type Request O Use Prior to Grant O Change Station Location O Other					
6. Requested Use Prior I 12/01/2006	Date				
7. CitySeattle		l l	8. Latitude (dd mm ss.s h) 47 25 7.0 N		

9. State WA	10. Longitude				
	(dd mm ss.s h) 122 15 10.0 W				
11. Please supply any need attachments.					
Attachment 1: Rad Haz Study Attachment 2: Antenna	a Data Sheet Attachment 3: Antenna 2 Data Sheet				
12. Description. (If the complete description does not appear in this bo	ox, please go to the end of the form to view it in its entirety.)				
The Boeing Company seeks autority to operate ane mobile transmitt and recieve earth					
station for testing, research, and development.					
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				
Robert B. Douglass	Manager, Spectrum Management				
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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