

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
Special Temporary Authority to Operate a VSAT Terminal

1. Applicant

Name:	The Boeing Company	Phone Number:	866-248-1493
DBA Name:		Fax Number:	206-544-6592
Street:	Attn PO Box 3707	E-Mail:	bob.douglass@boeing.com
City:	Seattle	State:	WA
Country:	USA	Zipcode:	98124 -2207
Attention:	Mr Robert B Douglass		

2. Contact			
Name:	Ronald E Center	Phone Number:	206-544-6583
Company:	The Boeing Company	Fax Number:	206-544-6592
Street:	P.O. Box 3707	E-Mail:	ronald.e.center@boeing.com
City:	Seattle	State:	WA
Country:	USA	Zipcode:	98124 -2207
Attention:	Mr Ron Center	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 or Submission ID			
4a. Is a fee submitted with this application? <input checked="" type="radio"/> If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114). <input type="radio"/> Governmental Entity <input type="radio"/> Noncommercial educational licensee <input type="radio"/> Other(please explain):			
4b. Fee Classification CGV – Fixed Satellite VSAT System			
5. Type Request <div style="display: flex; justify-content: space-around;"> <input type="radio"/> Use Prior to Grant <input type="radio"/> Change Station Location <input checked="" type="radio"/> Other </div>			
6. Requested Use Prior Date 11/20/2006			
7. CityHerndon		8. Latitude (dd mm ss.s h) 38 57 32.0 N	

9. State VA	10. Longitude (dd mm ss.s h) 77 22 32.0 W
11. Please supply any need attachments. Attachment 1: STA Requirement Attachment 2: RADHAZ Study Attachment 3: Antenna Specs	
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: 10px; margin: 10px 0;"> Request an STA to conduct system verification testing and training on a new VSAT terminal prior to system deployment to an overseas location. This STA is requested from November 20, 2006 through December 20, 2006. See attached description. </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 Robert B Douglass	15. Title of Person Signing 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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