APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: STA for KB34 to operate with Inmarsat 3F4 at 142W

1. Applicant

Name: Telenor Satellite, Inc. Phone Number: 301–838–7860

DBA Name: Fax Number: 301–838–7752

Street: 1101 Wootton Parkway E–Mail: keith.fagan@telenor—usa.com

10th Floor

City: Rockville State: MD

Country: USA Zipcode: 20852 -

Attention: Keith H Fagan

2. Contact				
Name:	Telenor Satellite, Inc.	Phone Number:	301-838-7860	
Company:		Fax Number:	301-838-7752	
Street:	1101 Wootton Parkway	E-Mail:	keith.fagan@telenor-usa.com	
	10th Floor			
City:	Rockville	State:	MD	
Country:	USA	Zipcode:	20852 –	
Attention:	Keith H Fagan	Relationship:		
application. Please ente 3. Reference File Num 4a. Is a fee submittee If Yes, complete an	ber SESMFS2007051400640 od with this application? d attach FCC Form 159. If No	or Submission ID o, indicate reason for fee exemption	e file number or the IB Submission ID of the related on (see 47 C.F.R.Section 1.1114).	
Governmental Entity Noncommercial educational licensee				
Other(please explain	in):			
4b. Fee Classification	CGX – Fixed Satellite Transmi	t/Receive Earth Station		
5. Type Request				
Use Prior to Grant Change Station Location Other				
6. Requested Use Prior 07/01/2007	Date			
7. CitySanta Paula		8. Latitude (dd mm ss.s h)	8. Latitude (dd mm ss.s h) 34 24 5.0 N	

9. State CA	10. Longitude				
21.5.m.c	(dd mm ss.s h) 119 4 29.4 W				
11. Please supply any need attachments.					
Attachment 1: Need Attachment Attachment 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.)					
Telenor Satellite, Inc. seeks special temporary authority to allow its Santa Paula, CA earth station KB34 to communicate with the Inmarsat 3F4 satellite at 142W.					
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 Keith H. Fagan	15. Title of Person Signing Senior Counsel				
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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