## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: STA Renewal for ESV Operations via E930320

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
<b>Country:</b>	USA	Zipcode:	20852 –
Attention:	Keith H Fagan		

2. Contact							
Name:	Keith H Fagan	Phone Number:	301-838-7860				
Company:	Telenor Satellite Inc.	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:		<b>Relationship:</b>					
<ul> <li>(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.)</li> <li>3. Reference File Number SESMOD2007031400353 or Submission ID</li> </ul>							
<ul> <li>4a. Is a fee submitted with this application?</li> <li>If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).</li> <li>Governmental Entity Noncommercial educational licensee</li> <li>Other(please explain):</li> </ul>							
4b. Fee Classification	CGV – Fixed Satellite VSAT Syst	em					
5. Type Request							
Use Prior to Grant     Change Station Location     Other							
6. Requested Use Prior 2 07/29/2007	Date						
7. CitySanta Paula		8. Latitude (dd mm ss.	s h) 0 0 0.0				

9. State CA		10. Longitude (dd mm ss.s h) 0 0 0.0					
11. Please supply any need attachment	ïS.						
Attachment 1:	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.)							
	. requests renewal of sp aula Teleport, call sign	pecial temporary authority for Ku-band ESV n E930320.					
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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