## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: STA Renewal for E000282

1. Applicant

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

**DBA Name:** Fax Number: 301–838–7752

Street: 1101 Wootton Parkway E–Mail: keith.fagan@vizada.com

10th Floor

City: Rockville State: MD

Country: USA Zipcode: 20852 -

**Attention:** Keith H Fagan

2. Contact				
Name:	Vizada Satellite, Inc.	Phone Number:	301-838-7860	
Company:		Fax Number:	301-838-7752	
Street:	1101 Wootton Parkway	E-Mail:	keith.fagan@vizada.com	
	10th Floor			
City:	Rockville	State:	MD	
Country:	USA	Zipcode:	20852 –	
Attention:	Keith H Fagan	Relationship:		
application. Please ent 3. Reference File Nur 4a. Is a fee submitt  If Yes, complete a	nber SESMFS2006011800051 o  ed with this application?  nd attach FCC Form 159. If No  tity Noncommercial education	r Submission ID , indicate reason for fee exemption	on (see 47 C.F.R.Section 1.1114).	e related
4b. Fee Classification	CGB – Mobile Satellite Earth S	Stations		
5. Type Request  Use Prior to Gran	t O Ch	nange Station Location	• Other	
6. Requested Use Prio 11/18/2007	r Date			
7. City		8. Latitude (dd mm ss.s h)	0 0 0.0	

9. State	10. Longitude				
5. State	(dd mm ss.s h) 0 0 0.0				
	(dd 11111 35.5 H) 0 0 0.0				
11. Please supply any need attachments.					
Attachment 1: Need Showing Attachment 2: Ownership Statement 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.)					
Applicant Vizada Satellite, Inc. (VSI) requests renewal of special temporary authority to					
allow up to 1000 Inmarsat mini-M full duplex mobile earth terminals to continue operating					
with the Inmarsat 4F2 satellite.					
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				
Keith H Fagan	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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