APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: STA – Paumalu, HI

1. Applicant	1.	A	pp	li	ca	nt
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Name: Inmarsat Hawaii Inc. **Phone Number:** 202–248–5155

DBA Name: Fax Number: 202–248–5186

Street: 1101 Connecticut Avenue NW E–Mail: diane_cornell@inmarsat.com

Suite 1225

City: Washington State: DC

Country: USA Zipcode: 20036 -

Attention: Diane J Cornell

2. Contact			
Name:	John P. Janka	Phone Number:	202-637-2200
Company:	Latham & Watkins LLP	Fax Number:	202-637-2201
Street:	555 Eleventh Street, NW	E–Mail:	
	Suite 1000		
City:	Washington	State:	DC
Country:	USA	Zipcode:	20004 –
Attention:		Relationship:	Legal Counsel
4a. Is a fee submitted If Yes, complete and Governmental Entity Other(please explain	ber SESLIC2008030600242 or sold with this application? d attach FCC Form 159. If No, ty Noncommercial education):	indicate reason for fee exemptional licensee	on (see 47 C.F.R.Section 1.1114).
4b. Fee Classification	CGX – Fixed Satellite Transmit	Receive Earth Station	
5. Type RequestUse Prior to Grant	O Cha	ange Station Location	Other
6. Requested Use Prior 08/10/2008	Date		
7. CityHaleiwa		8. Latitude (dd mm ss.s h)	21 40 10.4 N

9. State HI	10. Longitude (dd mm ss.s h) 158 1 59.4 W				
11. Please supply any need attachments.					
Attachment 1: Exhibit A 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.)					
Inmarsat Hawaii Inc. hereby requests a 30-day extension of special temporary authority to test its new Paumalu, Hawaii FSS gateway earth station facility using the same technical parameters for which it currently is authorized under IB File No. SES-STA-20080311-00275 (granted April 4, 2008).					
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				
Diane J. Cornell	Director				
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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