

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
STA Request 1.5M

1. Applicant

Name:	TIME WARNER ENTERTAINMENT COMPANY LP	Phone Number:	703-345-3549
DBA Name:		Fax Number:	703-345-3503
Street:	13241 Woodland Park Road	E-Mail:	don.sambol@twcable.com
City:	Herndon	State:	VA
Country:	USA	Zipcode:	20171 -
Attention:	Don Sambol		

2. Contact

Name:	Don Sambol	Phone Number:	703-345-3549
Company:	TIME WARNER ENTERTAINMENT COMPANY LP	Fax Number:	703-345-3503
Street:	13241 Woodland Park Road	E-Mail:	don.sambol@twcable.com
City:	Herndon	State:	VA
Country:	USA	Zipcode:	20171 -
Attention:	Don Sambol	Relationship:	

(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?

- If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114).
 Governmental Entity Noncommercial educational licensee
 Other (please explain):

4b. Fee Classification CGX – Fixed Satellite Transmit/Receive Earth Station

5. Type Request

- Use Prior to Grant Change Station Location Other

6. Requested Use Prior Date
08/28/2008

7. CityCastle High School	8. Latitude (dd mm ss.s h) 21 24 14.0 N
9. State HI	10. Longitude (dd mm ss.s h) 157 47 44.3 W
11. Please supply any need attachments. Attachment 1: STA Request Attachment 2: Technical Exhibit Attachment 3: RadHaz	
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: 5px; margin: 5px 0;">See Exhibit 1</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 Michael I. Goodish	15. Title of Person Signing Vice President, System Networking and Technical Qu
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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