APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: STA – Paumalu, HI (16M)

1. Applicant

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 Entire Other(please explain | ber SESMOD2008122401717 of 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 Request Use Prior to Grant | O Cha | ange Station Location | Other |
| 6. Requested Use Prior 01/19/2009 | 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.) See Exhibit A. | | | | |
| | | | | |
| 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 Diane J. Cornell | 15. Title of Person Signing 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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