

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
STA for Pending Earth Station Transfers of Control

1. Applicant

Name:	Arqiva, Inc.	Phone Number:	202-721-8592
DBA Name:		Fax Number:	202-721-8595
Street:	2025 M Street, NW Suite 450	E-Mail:	randyhall@arqiva.com
City:	Washington	State:	DC
Country:	USA	Zipcode:	20036 -
Attention:	Randy Hall		

2. Contact	
Name: Arqiva, Inc. Company: Street: 2025 M Street, NW Suite 450 City: Washington Country: USA Attention:	Phone Number: 202-721-8592 Fax Number: 202-721-8595 E-Mail: randyhall@arqiva.com State: DC Zipcode: 20036 - 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 SEST/C2009051200631 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	
7. City Marina Del Rey	8. Latitude (dd mm ss.s h) 33 58 54.0 N

9. State CA	10. Longitude (dd mm ss.s h) 118 25 32.3 W
11. Please supply any need attachments. Attachment 1: Request for STA 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.) Request for STA for 60 days to effectuate the transfer of control while the applications for permanent authority are considered. See Attachment 1.	
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. ☒ Yes ☐ No	
14. Name of Person Signing Nick Thompson	15. Title of Person Signing President
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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