APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: Comtech Mobile Datacom Corp MSAT PR/USVI STA Request

1. Applicant

Name: COMTECH MOBILE Phone Number: 240–686–3300

DATACOM CORP.

DBA Name: Fax Number: 240–686–3301

Street: 20430 Century Boulevard E–Mail: david.ulanow@comtechmobile.

com

City: Germantown State: MD

Country: USA Zipcode: 20874 -

Attention: Mr David A Ulanow

2. Contact				
Name:	Joan M. Griffin	Phone Number:	202-342-8573	
Company:	Kelley Drye & Warren LLP	Fax Number:	202-342-8451	
Street:	3050 K Street, NW	E–Mail:	jgriffin@kelleydrye.com	
	Suite 400			
City:	Washington	State:	DC	
Country:	USA	Zipcode:	20007 –	
Attention:		Relationship:	Legal Counsel	
If Yes, complete andGovernmental EntitOther(please explain	ber or Submission ID d with this application? d attach FCC Form 159. If No, i y Noncommercial education n):	nal licensee	on (see 47 C.F.R.Section 1.1114).	
	CGB – Mobile Satellite Earth Sta	tions		
5. Type Request O Use Prior to Grant O Change Station Location O Other				
6. Requested Use Prior 10/08/2009	Date			
7. City		8. Latitude (dd mm ss.s h)	0 0 0.0	

9. State	10. Longitude (dd mm ss.s h) 0 0 0.0			
11. Please supply any need attachments.				
Attachment 1: Attachment 2: Descrip	Attachment 2: Description (#12) Attachment 3: Exhibits (A D)			
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.)				
Please see attachments 2 (Description) and 3 (Exhibits A-D).				
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 Greg Handermann	15. Title of Person Signing SVP & CTO			
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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