APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: 10/2009 STA Request – TECOM Antenna

1. Applicant								
	Name:	Row 44 Inc.	Phone Number:	818–706–3111				
	DBA Name:		Fax Number:	818–706–9431				
	Street:	31280 Oak Crest Drive, Suite 5	E-Mail:	jbcostello@row44.com				
	City:	Westlake Village	State:	CA				
	Country:	USA	Zipcode:	91361 –				
	Attention:	Jim Costello						

2. Contact								
Na	ame:	David S. Keir	Phone Nun	nber:	202-429-8970			
Co	ompany:	Lerman Senter PLLC	Fax Numb	er:	202–293–7783			
St	reet:	2000 K Street, NW	E-Mail:		dkeir@lermansenter.com			
		Suite 600						
Ci	ity:	Washington	State:		DC			
Co	ountry:	USA	Zipcode:		20006 –			
At	ttention:	David S. Keir	Relationshi	ip:	Legal Counsel			
(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. P			0					
3. Reference File Number or Submission ID IB2009005580								
	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 O Noncommercial educational licensee							
1 -	• Other(please explain):							
<u> </u>	_							
		CGS – Fixed Satellite Small Transmi	it/Receive Ea	rth Station				
5. Type Request								
	- Use Prior to Creat - Change Station Logation - Other							
	Use Prior to Grant O Change Station Location O Other							
6. Requested 12/01/2		Date						
				T				
7. CityMobile	e		-	. Latitude dd mm ss.s h) 0 0	0.0 N			
			(

9. State	10. Longitude (dd mm ss.s h) 0 0 0.0 W						
11. Please supply any need attachments.							
Attachment 1: ExplanatoryStatementAttachment 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.)							
Application for special temporary authority f of TECOM aeronautical mobile-satellite antenn Statement.							
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 John Guidon	15. Title of Person Signing CEO						
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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