

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
STA for satellite frequency license reinstatement

1. Applicant

Name:	NEP, LLC	Phone Number:	207-856-0078
DBA Name:		Fax Number:	207-856-2840
Street:	100 Larrabee Road, STE 150	E-Mail:	acarle@ucom.com
City:	Westbrook	State:	ME
Country:	USA	Zipcode:	04092 -5105
Attention:	Alan W. Carle		

2. Contact

Name:	Alan W. Carle	Phone Number:	2078560078
Company:	NEP,LLC	Fax Number:	2078562840
Street:	100 Larrabee Rd Suite 150	E-Mail:	acarle@ucom.com
City:	Westbrook	State:	ME
Country:	USA	Zipcode:	04092 -5105
Attention:	Alan W. Carle	Relationship:	Same

(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 SESLIC1998121401872 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

02/17/2010

7. CityWestbrook

8. Latitude

(dd mm ss.s h) 43 4 38.0 N

9. State ME	10. Longitude (dd mm ss.s h) 70 20 0.8 W
11. Please supply any need attachments. Attachment 1: 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.) Our fixed earth station license for Call Sign	
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 Alan W. Carle	15. Title of Person Signing Director of Engineering
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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