## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: COMS STA

1. Applicant

Name: Universal Space Network, Inc. **Phone Number:** 215–328–9130

**DBA Name:** Fax Number: 215–328–9132

Street: 417 Caredean Drive E–Mail: jswank@uspacenet.com

Suite A

City: Horsham State: PA

Country: USA Zipcode: 19044 –

**Attention:** Joanne Swank

2. Contact			
Name:	Universal Space Network, Inc.	Phone Number:	215–328–9130
Company:		Fax Number:	215–328–9132
Street:	417 Caredean Drive	E–Mail:	jswank@uspacenet.com
	Suite A		
City:	Horsham	State:	PA
Country:	USA	Zipcode:	19044 –
Attention:	Joanne Swank	Relationship:	
application. Please enter 3. Reference File Numb 4a. Is a fee submitted If Yes, complete and Governmental Entit Other(please explain	r only one.)  oer or Submission ID  I with this application? I attach FCC Form 159. If No, inc  y Noncommercial educations n):	dicate reason for fee exemptional licensee	on (see 47 C.F.R.Section 1.1114).
	CGX – Fixed Satellite Transmit/Re	eceive Earth Station	
<ul><li>5. Type Request</li><li>Use Prior to Grant</li></ul>	O Chang	ge Station Location	O Other
6. Requested Use Prior 2 06/19/2010	Date		
7. CityNaalehu		8. Latitude (dd mm ss.s h)	19 0 49.6 N

9. State HI	10. Longitude			
	(dd mm ss.s h) 155 39 46.6 W			
11. Please supply any need attachments.				
Attachment 1: FCC 312 Attachment 2: Waiver	request Attachment 3: coordination study			
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.)				
LEOP support of the KARI COMS mission. Launch is currently scheduled for June 23, 2010.				
Request approval by June 19th for testing				
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	15. Title of Person Signing			
Joanne Greet Swank	Manager, Compliance			
(U.S. Code, Title 18, Section 1001), AND/OR REV	ARE PUNISHABLE BY FINE AND / OR IMPRISONMENT OCATION OF ANY STATION AUTHORIZATION FORFEITURE (U.S. Code, Title 47, Section 503).			

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