

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
STA for E010139

1. Applicant

Name:	Northern Kentucky University	Phone Number:	859-572-6500
DBA Name:		Fax Number:	859-572-6604
Street:	P.O. Box 337	E-Mail:	chuck@wnku.org
City:	Highland Heights	State:	KY
Country:	USA	Zipcode:	41076 -
Attention:	Chuck Miller		

2. Contact

Name:	Chuck Miller	Phone Number:	859-572-6500
Company:	Northern Kentucky University	Fax Number:	859-572-6604
Street:	P.O. Box 337	E-Mail:	chuck@wnku.org
City:	Highland Heights	State:	KS
Country:	USA	Zipcode:	41076 -
Attention:	Chuck Miller	Relationship:	Engineer

(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 SESLIC2010122101555 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
01/26/2011

7. City Highland Heights

8. Latitude
(dd mm ss.s h) 39 2 21.2 N

9. State KY	10. Longitude (dd mm ss.s h) 84 27 56.7 W
11. Please supply any need attachments. Attachment 1: STARrequest Attachment 2: PermApp Attachment 3: RadHaz	
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.) <div style="border: 1px solid black; padding: 5px; margin: 5px 0;">See Attachment 1. A copy of this STA has been sent to the office in Columbia, MD.</div>	
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 Chuck Miller	15. Title of Person Signing General Manager
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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