## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: Request for STA to operate ESV while permanent application is under review

1. Applicant								
	Name:	CapRock Communications, Inc.	Phone Number:	832–668–2751				
	<b>DBA Name:</b>		Fax Number:	832-668-2780				
	Street:	4400 S. Sam Houston Parkway Ea	E-Mail:	esands@caprock.com				
	City:	Houston	State:	ТХ				
	<b>Country:</b>	USA	Zipcode:	77048 –				
	Attention:	Ms EllenAnn Sands						

2. Contact		2. Contact						
Name:	Raul Magallanes	Phone Nu	mber:	2813171397				
Company:	The Law Office of Raul Magallanes, PLLC	Fax Num	ber:	2812718085				
Street:	PO Box 1213	E–Mail:		raul@rmtelecomlaw.com				
City:	Houston	State:		TX				
Country:	USA	Zipcode:		77549 –				
Attention:	Raul Magallanes	Relations	hip:	Legal Counsel				
<ul> <li>(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.)</li> <li>3. Reference File Number or Submission ID IB2011000651</li> <li>4a. Is a fee submitted with this application?</li> <li>If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).</li> <li>Governmental Entity Noncommercial educational licensee</li> <li>Other(please explain):</li> </ul>								
4b. Fee Classification CGX – Fixed Satellite Transmit/Receive Earth Station								
5. Type Request       Ise Prior to Grant       Change Station Location   Other								
6. Requested Use Prior Date 03/31/2011								

7. CityGul of Mexico	8. Latitude (dd mm ss.s h) 0 0 0.0 N						
9. State LA	10. Longitude (dd mm ss.s h) 0 0 0.0 W						
11. Please supply any need attachments.							
Attachment 1: Cover LetterAttachment 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.)							
Request for STA to operate ESV while permanent application is under review          13. By checking Yes, the undersigned certifies that neither applicant nor any other party to the application is       Yes       No         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.       No							
See 47 CFR 1.2002(b) for the meaning of "party to the application" for these purposes.							
14. Name of Person Signing EllenAnn Sands	15. Title of Person Signing Corporate Counsel						
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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