APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: Extension of STA for Pending License Grant of a 4.5 meter ES at FSU

1. Applicant					
Name	e: Florida State University Public Radio Center)	y (The Phone Number:	850–487–3086 x370		
DBA	Name:	Fax Number:	850-487-2611		
Stree	t: 1600 Red Barber Plaza	E-Mail:	ahanus@mailer.fsu.edu		
City:	Tallahassee	State:	FL		
Coun	try: USA	Zipcode:	32310 –		
Atten	tion: Mr Andrew M Hanus				

2. Contact						
Name:	Andrew Hanus	Phone Number:	850-487-3086			
Company:	Florida State University	Fax Number:	850-487-3293			
Street:	1600 Red Barber Plaza	E–Mail:	ahanus@mailer.fsu.edu			
City:	Tallahassee	State:	FL			
Country:	USA	Zipcode:	32310 –			
Attention:		Relationship:	Relationship:			
 (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 SESLIC2011022400186 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 04/03/2011	Date					
7. CityTallahassee		8. Latitude (dd mm ss.s h)	30 25 4.8 N			

9. State FL		10. Longitude (dd mm ss.s h) 84 18 45.3 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.) The previous STA request for this pending earth station license expired on 3/28/2011 and						
the Call Sign E110019 has still not been granted by the Commission. Another STA is requested to continue the distribution of important noncommercial educational programming by FSU until the final license grant has been processed.						
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 Elizabeth Maryanski		15. Title of Person Signing Interim VP for University Relations				
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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