## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: Green Bay User Terminal STA with 109.2 POC

1. Applicant

Name: ViaSat, Inc. Phone Number: 760–476–2583

**DBA Name:** Fax Number: 760–929–3941

Street: 6155 El Camino Real E–Mail: daryl.hunter@viasat.com

City: Carlsbad State: CA

Country: USA Zipcode: 92009 -

**Attention:** Mr Daryl T Hunter

2. Contact				
Name:	Daryl T. Hunter	Phone Number:	760-476-2583	
Company:	ViaSat, Inc.	Fax Number:	760–929–3941	
Street:	6155 El Camino Real	E–Mail:	daryl.hunter@viasat.com	
City:	Carlsbad	State:	CA	
Country:	USA	Zipcode:	92009 –	
Attention:		Relationship:	Same	
application. Please ento 3. Reference File Num  4a. Is a fee submitte If Yes, complete and Governmental Ention Other(please explain)	er only one.) ber or Submission ID d with this application? d attach FCC Form 159. If No ty Noncommercial educa in):	o, indicate reason for fee exemption	on (see 47 C.F.R.Section 1.1114).	
4b. Fee Classification	CGX – Fixed Satellite Transm	it/Receive Earth Station		
<ul><li>5. Type Request</li><li>Use Prior to Grant</li></ul>	<b>o</b> 0	Change Station Location	Other	
6. Requested Use Prior 07/20/2011	Date			
7. CityGreen Bay		8. Latitude (dd mm ss.s h)		

	<u> </u>				
9. State WI	10. Longitude				
	(dd mm ss.s h) 0 0 0.0				
11. Please supply any need attachments.					
Attachment 1: Attachment A 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.)					
See Attachment A. Exact location of the antenna has not yet been determined. ViaSat will					
provide the exact coordinates when the location has been selected.					
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.					
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				
Daryl T. Hunter	Director, Regulatory Affairs				
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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