

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
STA Application pending Reinstatement of KB23

1. Applicant

Name:	Westar Satellite Services LP	Phone Number:	972-291-6000
DBA Name:		Fax Number:	972-293-6030
Street:	777 Westar Lane	E-Mail:	admin@westarsat.com
City:	Cedar Hill	State:	TX
Country:	USA	Zipcode:	75104 -
Attention:	Richard A Duke		

2. Contact

Name:	Westar Satellite Services L.P.	Phone Number:	972-291-6000
Company:		Fax Number:	972-291-6030
Street:	777 Westar Lane	E-Mail:	admin@westarsat.com
City:	Cedar Hill	State:	TX
Country:	USA	Zipcode:	75104 -
Attention:	Tom Pegues	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 or Submission ID IB2011004339

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

09/26/2011

7. City Cedar Hill

8. Latitude

(dd mm ss.s h) 32 34 42.0 N

9. State TX	10. Longitude (dd mm ss.s h) 96 58 56.0 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.) <div style="border: 1px solid black; padding: 5px; margin: 10px 0;">Application for Earth Station Special Temporary Authority in order to use facilities licensed under KB23 until such time as the expired KB23 license can be reinstated. A renewal form 312-R with 'Petition to Reinstate' attachment has been filed.</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 Richard Duke	15. Title of Person Signing President
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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