APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: Portland 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	
Compa	ny: ViaSat, Inc.	Fax Number:	760–929–3941	
Street:	6155 El Camino Real	E–Mail:	daryl.hunter@viasat.com	
City:	Carlsbad	State:	CA	
Country	v: USA	Zipcode:	92009 –	
Attentic	·	Relationship:	Same	
application. Please 3. Reference File N 4a. Is a fee subm If Yes, complet	enter only one.) Number SESLIC2010121701585 nitted with this application? e and attach FCC Form 159. If Entity Noncommercial edu	or Submission ID No, indicate reason for fee exemption	n (see 47 C.F.R.Section 1.1114).	
4b. Fee Classification	on CGX – Fixed Satellite Trans	mit/Receive Earth Station		
5. Type Request O Use Prior to Grant O Change Station Location O Other				
6. Requested Use P 10/19/2011	Prior Date			
7. CityPortland		8. Latitude (dd mm ss.s h)		

9. State OR	10. Longitude (dd mm ss.s h) 0 0 0.0			
11. Please supply any need attachments.				
Attachment 1: Amendment Attachment 2: Amended Attachment A 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 attachments.				
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 Daryl T. Hunter	15. Title of Person Signing 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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