APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: Extend STA to use 15-m over T14 as standby (Dec 2011)

1. Applicant

Name: Telesat Network Services, Inc. **Phone Number:** 908–698–4882

DBA Name: Fax Number: 908–719–0226

Street: 135 Routes 202/206 E-Mail: rcondurso@telesat.com

City: Bedminster State: NJ

Country: USA **Zipcode:** 07921 -1538

Attention: Mr Robert Condurso

2. Contact					
Name	: Joseph A. Godles	Phone N	umber:	202-429-4900	
Comp	any: Goldberg, Godles, Wright	Wiener & Fax Num	iber:	202–429–4912	
Street	: 1229 19th Street, N	N.W. E–Mail:		jgodles@g2w2.com	
City:	Washington	State:		DC	
Count	try: USA	Zipcode:	}	20036 –	
Attent	tion:	Relations	ship:	Legal Counsel	
application. Pleas				mber or the IB Submission ID of the related	
If Yes, complete	omitted with this application ete and attach FCC Form 1.	59. If No, indicate reason	for fee exemption (see 4'	7 C.F.R.Section 1.1114).	
	l Entity Noncommer	cial educational licensee			
Other(please	explain):				
4b. Fee Classifica	tion CGX – Fixed Satelli	te Transmit/Receive Earth	Station		
5. Type Request					
O Use Prior to Grant O Change Station Location O Other					
6. Requested Use 12/27/2011					

7. CityMount Jackson	8. Latitude					
7. CityWould sackson	(dd mm ss.s h) 38 43 42.0 N					
9. State VA	10. Longitude					
	(dd mm ss.s h) 78 39 25.0 W					
11. Please supply any need attachments.						
Attachment 1: STA extension 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.)						
Applicant hereby requests extension of its Special Temporary Authority to operate its 15-m						
antenna, which is licensed under Call Sign KA399 and is located at its teleport in Mt.						
Jackson, Virginia, as a standby replacement antenna, in the manner described herein, for a						
period of up to 30 additional days.						
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	15. Title of Person Signing					
Robert Condurso	Director, Govt and 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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