APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: Metop-B LEOP USN Alaska RGS

1. Applicant

Name: Universal Space Network, Inc. **Phone Number:** 215–328–9130

DBA Name: Fax Number: 215–328–9132

Street: 417 Caredean Drive E–Mail: jgreet@uspacenet.com

Suite A

City: Horsham State: PA

Country: USA Zipcode: 19044 -

Attention: Joanne Greet

2. Contact							
Nan	ne:	Universal Space Network, Inc.	Phone No	umber:	215-328	3–9130	
Company:			Fax Number:		215–328–9132		
Stre	eet:	417 Caredean Drive	E-Mail:		jswank@	uspacenet.com	
	;	Suite A					
City	/:	Horsham	State:		PA		
Cou	intry:	USA	Zipcode:		19044	-	
Atte	ention:	Joanne Greet	Relations	ship:	Same		
application. Ple 3. Reference Fi 4a. Is a fee s If Yes, com	ase enter o ile Number submitted w plete and a ntal Entity	or Submission ID with this application? ttach FCC Form 159. If No, in Noncommercial educations	dicate reason			ee IB Submission ID of the related ection 1.1114).	
4b. Fee Classifi	cation Co	GX – Fixed Satellite Transmit/Re	eceive Earth S	Station			
5. Type Request Use Prior t		Chang	ge Station Lo	cation	O Other		
6. Requested Us 05/18/20		ite					
7. CityNorth Pole				8. Latitude (dd mm ss.s h) 64 48 15.3 N			

	<u></u>						
9. State AK	10. Longitude						
	(dd mm ss.s h) 147 30 0.8 W						
11. Please supply any need attachments.							
Attachment 1: FCC For 312 Attachment 2: coordinate	ation report Attachment 3: Waiver request						
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.)							
Provide LEOP TT&C services in support of the	Metop-B currently scheduled for launch on May						
23, 2012. Request approval by 5/18/2012							
13. By checking Yes, the undersigned certifies that neither applicant nor							
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.							
get 17 C11t 1.2002(0) for the meaning of eequot, party to the appreario.	request, for these purposes.						
14. Name of Person Signing	15. Title of Person Signing						
Joanne Greet	Manager, Compliance & Contracts						
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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