

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
STA Request to Test AeroSat Terminals

1. Applicant

Name:	Gogo LLC	Phone Number:	202-870-7220
DBA Name:		Fax Number:	
Street:	5505 Connecticut Avenue, NW #288	E-Mail:	bgordon@aircell.com
City:	Washington	State:	DC
Country:	USA	Zipcode:	20015 -
Attention:	Mr William J Gordon		

2. Contact

Name:	Karis A. Hastings	Phone Number:	202-599-0975
Company:	SatCom Law LLC	Fax Number:	
Street:	1317 F Street, N.W. Suite 400	E-Mail:	karis@satcomlaw.com
City:	Washington	State:	DC
Country:	USA	Zipcode:	20004 -
Attention:		Relationship:	Legal Counsel

(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 SESLIC2012061900574 or Submission ID

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 CGB – Mobile Satellite Earth Stations

5. Type Request

Use Prior to Grant

Change Station Location

Other

6. Requested Use Prior Date

09/10/2012

7. City Itasca

8. Latitude

(dd mm ss.s h) 41 59 22.6 N

9. State IL	10. Longitude (dd mm ss.s h) 88 0 15.6 W
11. Please supply any need attachments. Attachment 1: Narrative and Coord. 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;">Gogo LLC ('Gogo') respectfully requests special temporary authority for a period of 60 days beginning on September 10, 2012, to permit operation of four technically-identical terminals for testing purposes, pending Commission action on Gogo's underlying application for an AMSS blanket license.</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 William Gordon	15. Title of Person Signing Vice President, 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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