

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:  
FCC Call Sign E940536 – Application For STA to operate additional 50 kHz uplink centered at 150.025 MHz

**1. Applicant**

<b>Name:</b>	ORBCOMM License Corp.	<b>Phone Number:</b>	585-461-3018
<b>DBA Name:</b>		<b>Fax Number:</b>	585-461-3476
<b>Street:</b>	395 West Passaic Street	<b>E-Mail:</b>	sonnenfeldt.walter@orbcomm.com
	Suite 325		
<b>City:</b>	Rochelle Park	<b>State:</b>	NJ
<b>Country:</b>	USA	<b>Zipcode:</b>	07662 -3016
<b>Attention:</b>	Walter H Sonnenfeldt		

**2. Contact**

<b>Name:</b>	Walter H. Sonnenfeldt	<b>Phone Number:</b>	585-461-3018
<b>Company:</b>	ORBCOMM Inc.	<b>Fax Number:</b>	585-461-3476
<b>Street:</b>	395 West Passaic Street	<b>E-Mail:</b>	sonnenfeldt.walter@orbcomm.com
	Suite 325		
<b>City:</b>	Rochelle Park	<b>State:</b>	NJ
<b>Country:</b>	USA	<b>Zipcode:</b>	07662 -3016
<b>Attention:</b>		<b>Relationship:</b>	

(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 IB2013002112

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  
10/23/2013

7. CityOcilla	8. Latitude (dd mm ss.s h) 31 30 3.0 N
9. State GA	10. Longitude (dd mm ss.s h) 83 11 58.0 W
11. Please supply any need attachments. Attachment 1: Exhibit    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: 5px 0;">Special Temporary Authorization is requested to operate 150.025 MHz feeder uplink channel until processing and grant of pending application to modify FCC Call Sign E940536 license is completed.</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 &quot;party to the application&quot; for these purposes. <input checked="" type="radio"/> Yes <input type="radio"/> No	
14. Name of Person Signing Marc J. Eisenberg	15. Title of Person Signing Chief Executive Officer
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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