

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
Hawaii 2.4-m antenna application - 60 days (Oct 2014)

1. Applicant

Name:	O3b Limited	Phone Number:	202-813-4026
DBA Name:		Fax Number:	
Street:	900 17th Street, NW, #300	E-Mail:	suzanne.malloy@o3bnetworks.com
City:	Washington	State:	
Country:	USA	Zipcode:	-
Attention:	Ms Suzanne Malloy		

60 days "With conditions"



File # SES-STA-20141022-00810

Call Sign E140107 Grant Date 01/08/2015
(or other identifier)

Term Dates
From 01/08/2015 To: 03/09/2015

Approved: *Suzanne Malloy*

2. Contact			
Name:	Joseph A. Godles	Phone Number:	202-429-4900
Company:	Goldberg Godles Wiener & Wright LLP	Fax Number:	202-429-4912
Street:	1229 19th St., NW	E-Mail:	jgodles@g2w2.com
City:	Washington	State:	DC
Country:	USA	Zipcode:	20036 -2413
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 or Submission ID IB2014002096			
4a. Is a fee submitted with this application?			
<input checked="" type="radio"/> If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114).			
<input type="radio"/> Governmental Entity <input type="radio"/> Noncommercial educational licensee			
<input type="radio"/> Other (please explain):			
4b. Fee Classification CGX – Fixed Satellite Transmit/Receive Earth Station			
5. Type Request			
<input checked="" type="radio"/> Use Prior to Grant <input type="radio"/> Change Station Location <input type="radio"/> Other			
6. Requested Use Prior Date			
12/15/2014			

7. City Haleiwa	8. Latitude (dd mm ss.s h) 21 40 17.8 N
9. State HI	10. Longitude (dd mm ss.s h) 158 1 54.9 W
11. Please supply any need attachments. Attachment 1: STA request 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 herein seeks authority to operate an earth station to be located at Haleiwa, Hawaii that will communicate with the satellite system operated by O3b for the period between December 15, 2014 and February 13, 2015.	
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. Yes <input checked="" type="radio"/> No <input type="radio"/>	
14. Name of Person Signing Suzanne Malloy	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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