## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: STA for C-band Transmit/Receive Earth Station on Carnival Site

1. Applicant

Name: Harris CapRock Communications, **Phone Number:** 832–668–2753

Inc.

**DBA Name:** Fax Number: 832–668–2780

**Street:** 4400 S. Sam Houston Parkway Ea **E-Mail:** 

City: Houston State: TX

Country: USA Zipcode: 77048 -

**Attention:** Ms EllenAnn Sands

| 2. Contact   |   |                          |  |  |
|--|---|--------------------------|--|--|
| Name:  | EllenAnn Sands  | Phone Number:            | 832-668-2753   |  |
| Company:   | Harris Caprock  | Fax Number:              | 832-668-2780   |  |
| Street:  | 4400 S. Sam Houston Parkway Ea  | E–Mail:                  | raul@rmtelecomlaw.com  |  |
| City:  | Houston   | State:                   | TX   |  |
| Country:   | USA   | Zipcode:                 | 77048 –  |  |
| Attention:   |   | Relationship:            | Legal Counsel  |  |
|  |   |                          |  |  |
| application. Please enter 3. Reference File Numb 4a. Is a fee submitted If Yes, complete and Governmental Entity | only one.)  oer SESLIC2014112900877 or Subnown with this application?  I attach FCC Form 159. If No, indicate of the Noncommercial educational in the Noncommercial education | nission ID               | her the file number or the IB Submission ID of the related mption (see 47 C.F.R.Section 1.1114). |  |
| Other(please explain   | 1):   |                          |  |  |
| 4b. Fee Classification   | CGX – Fixed Satellite Transmit/Rece   | eive Earth Station       |  |  |
| 5. Type Request  |   |                          |  |  |
|  |   |                          |  |  |
| 6. Requested Use Prior I<br>01/05/2014   | Date  |                          |  |  |
| 7. CityDoral   |   | 8. Latitude<br>(dd mm ss |  |  |

| 9. State FL   | 10. Longitude (dd mm ss.s h) 80 20 8.4 W      |  |  |  |
|---|---|--|--|--|
| 11. Please supply any need attachments.   | <u>'</u>                                      |  |  |  |
| Attachment 1: Freq Coord. Attachment 2: Cover L   | etter 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.)  |   |  |  |  |
| Harris Caprock Communications, Inc seeks to request an Special Temporary Authorization for a C-band, transmit/receive earth station in support of the Carnival fleet of cruise ships.   |   |  |  |  |
| 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<br>EllenAnn Sands  | 15. Title of Person Signing<br>Senior Counsel |  |  |  |
| 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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