

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
STA for I3F5 POC Authority

1. Applicant

Name:	Airbus DS SatCom Government, Inc.	Phone Number:	703-466-5860
DBA Name:		Fax Number:	703-466-5901
Street:	2550 Wasser Terrace	E-Mail:	chris.hetmanski@astrium.eads-na.com
	Suite 6000		
City:	Herndon	State:	VA
Country:	USA	Zipcode:	20171 -
Attention:	Mr Chris Hetmanski		

2. Contact

Name:	Airbus DS SatCom Government, Inc.	Phone Number:	703-466-5945
Company:		Fax Number:	703-466-5901
Street:	2550 Wasser Terrace Suite 6000	E-Mail:	james.lovelace@astrium.eads-na.com
City:	Herndon	State:	VA
Country:	USA	Zipcode:	20171 -
Attention:		Relationship:	Other

(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 IB2016000510

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
02/24/2016

7. CitySouthbury	8. Latitude (dd mm ss.s h) 41 27 5.0 N
9. State CT	10. Longitude (dd mm ss.s h) 73 17 21.0 W
11. Please supply any need attachments. Attachment 1: Need Statement 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;">Airbus DS SatCom Government, Inc. hereby requests Special Temporary Authority for 60 cays beginning on February 24, 2016 to add the Inmarsat-3 F5 satellite at the 54 W.L. orbital location as a point of communication for the WA28 Antenna IDs 21CNORM, 21CTTC and 21LBAND earth station.</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 James G. Lovelace	15. Title of Person Signing Consultant
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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