## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: 60–Day STA to Operate 100 Previously Authorized ESAA Terminals

1. Applicant

Name: Panasonic Avionics Corporation Phone Number: 949–672–2364

DBA Name: Fax Number:

Street: 26200 Enterprise Way E-Mail: mark.defazio@panasonic.aero

City: Lake Forest State: CA

Country: USA Zipcode: 92630 -

**Attention:** Mark DeFazio

2. Contact			
Name:	Carlos Nalda	Phone Number:	5713325626
Company:	LMI Advisors	Fax Number:	
Street:	8601 James Creek Drive	E–Mail:	cnalda@lmiadvisors.com
City:	Springfield	State:	VA
Country:	USA	Zipcode:	22152 –
Attention:		Relationship:	Other
application. Please enter 3. Reference File Num  4a. Is a fee submitte  If Yes, complete an	er only one.) ber or Submission ID  d with this application? d attach FCC Form 159. If No, ty Noncommercial education	indicate reason for fee exemption	on (see 47 C.F.R.Section 1.1114).
4b. Fee Classification	CGB – Mobile Satellite Earth S	tations	
5. Type Request			
Use Prior to Grant	O Ch	ange Station Location	Other
6. Requested Use Prior 09/02/2016	Date		
7. CityMobile		8. Latitude (dd mm ss.s h)	0 0 0.0

9. State	10. Longitude (dd mm ss.s h) 0 0 0.0			
11. Please supply any need attachments.				
Attachment 1: Narrative Attachment 2: Technic	al Appendix 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.)				
Panasonic Avionics Corporation seeks a 60-day special temporary authorization ('STA') to operate 100 of its previously authorized Single Panel Antenna ('SPA') Earth Stations Aboard Aircraft ('ESAA') terminals.				
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 Mark DeFazio	15. Title of Person Signing Sr. Manager			
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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