

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:

Hurricane Irma-Related STA Request for E090044 (GRANTED 9/10/17)

1. Applicant

Name:	Hearst Properties Inc.	Phone Number:	919-839-0300
DBA Name:		Fax Number:	919-839-0304
Street:	P.O. Box 1800	E-Mail:	shartzell@brookspierce.com
City:	Raleigh	State:	NC
Country:	USA	Zipcode:	27602 -
Attention:	Stephen Hartzell		

2. Contact			
Name:	Stephen Hartzell	Phone Number:	9198390300
Company:	Brooks, Pierce et al.	Fax Number:	9198390304
Street:	150 Fayetteville Street Suite 1700	E-Mail:	shartzell@brookspierce.com
City:	Raleigh	State:	NC
Country:	USA	Zipcode:	27601 –
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 SESMOD2017083000965 or Submission ID			
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 09/10/2017			
7. CityVarious		8. Latitude (dd mm ss.s h) 0 0 0.0 N	

9. State FL	10. Longitude (dd mm ss.s h) 0 0 0.0 W
11. Please supply any need attachments. Attachment 1: Operating Parameters Attachment 2: 9-10 Email STA Reqst Attachment 3: Sept. 10 STA GRANT	
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.) Hurricane Irma STA Request granted 9/10/17. In connection with Hurricane Irma, the instant STA request seeks to operate a new SNG van at the same parameters as those that are specified in the modification application in SES-MOD-20170830-00965.	
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 ☐ No	
14. Name of Person Signing Jordan M. Wertlieb	15. Title of Person Signing President
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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