APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: STA to add E172B during the pendency of Modification application.

Name:	The Boeing Company	Phone Number:	206-544-6044
DBA Name:		Fax Number:	206-662-0701
Street:	PO Box 3707	E-Mail:	
City:	Seattle	State:	WA
Country:	USA	Zipcode:	98124 –2207
Attention:	Ronald Center		

2. Contact						
2. Contact						
Name:	The Boeing Company	Phone Number:	206-544-6053			
Company:		Fax Number:	206-662-0701			
Street:	PO Box 3707	E–Mail:				
City:	Seattle	State:	WA			
Country:	USA	Zipcode:	98124 -2207			
Attention:		Relationship:				
(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 SESMOD2017100301092 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 11/15/2017	Date					
7. CityN/A		8. Latitude (dd mm ss.	sh) 0 0 0.0 N			

9. State AK	10. Longitude (dd mm ss.s h) 0 0 0.0 W					
11. Please supply any need attachments.						
Attachment 1: E17B STA Narrative Attachment 2: Frequen	cy Info 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.)						
STA to begin testing operations on E172B during the pendency of Modification application.						
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	15. Title of Person Signing					
Ron E Center	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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