## APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: O3b STA to use 1.2m at Bristow (Jan 2014)

1. Applicant

Name: O3b Limited Phone Number: 202–813–4026

DBA Name: Fax Number:

**Street:** 900 17th Street, NW, #300 **E–Mail:** suzanne.malloy@o3bnetworks.

com

City: Washington State:

Country: USA Zipcode: -

**Attention:** Ms Suzanne Malloy

2. Contact				
Name:	Will Lewis	Phone Number:	202-8134033	
Company:	O3b Limited	Fax Number:		
Street:	900 17th St. NW, #300	E–Mail:	will.lewis@o3bnetworks.com	
City:	Washington	State:	DC	
Country:	USA	Zipcode:	20006 –	
Attention:		Relationship:		
application. Please ente 3. Reference File Num	er only one.) therefore or Submission ID	h the Commission, enter either th	the file number or the IB Submission ID of the related	
	d with this application? Id attach FCC Form 159. If No	, indicate reason for fee exemption	on (see 47 C.F.R.Section 1.1114).	
	ty Noncommercial educat		,	
Other(please expla	<del></del>			
4b. Fee Classification	CGX – Fixed Satellite Transmi	t/Receive Earth Station		
5. Type Request				
6. Requested Use Prior 10/11/2017	Date			
7. CityCeiba		8. Latitude (dd mm ss.s h)	18 14 24.0 N	

9. State PR	10. Longitude			
	(dd mm ss.s h) 65 37 48.0 W			
11. Please supply any need attachments.	I			
Attachment 1: Narrative and Annexe 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.)				
Applicant herein seeks Special Temporary Authority to operate in the 27.6-28.4 and 17.8-				
18.6 GHz bands to help restore local wireless services in Puerto Rico.				
L				
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 pursua	* * * **			
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			
Suzanne Malloy	Vice–President, Regulatory Affairs			
•				
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).				
(0.5. Code, The 47, Section 312(a)(1)), AND/OR PORTEITORE (0.5. Code, The 47, Section 303).				

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