APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: October 2017 Request for STA for Call Sign E4394, Lino Lakes, MN

1. Applicant							
	Name:	BFI Licenses, LLC	Phone Number:	404-876-7149			
	DBA Name:		Fax Number:				
	Street:	3845 Pleasantdale Rd	E-Mail:	jlaprise@encompass.tv			
	City:	Atlanta	State:	GA			
	Country:	USA	Zipcode:	30340 –			
	Attention:	Mr Jay LaPrise					

2. Contact							
Name:	David S. Keir	Phone Number:	202-429-8970				
Company:	Lerman Senter PLLC	Fax Number:	202–293–7783				
Street:	2001 L Street, NW	E-Mail:	dkeir@lermansenter.com				
	Suite 400						
City:	Washington	State:	DC				
Country:	USA	Zipcode:	20036 –				
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							
3. Reference File Number 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 O Change Station Location Other							
6. Requested Use Prior I	Date						
07/16/2017							
7. CityLino Lakes		8. Latitude					
		(dd mm ss.	sh) 45 7 56.0 N				

9. State MN	10. Longitude (dd mm ss.s h) 93 5 43.0 W						
11. Please supply any need attachments.							
Attachment 1: STA RequestAttachment 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.)							
See attached narrative.							
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 Jay LaPrise	15. Title of Person Signing Vice President, Transmission Operations						
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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